



Signature Healthcare – Education & Training Center

Student Handbook

Academic Year 2024 - 2025

Signature Healthcare
14225 University Ave
Ste 130
Waukee, IA 50263
(515) 252-0000
www.mysighealth.com

2024 – 25 Student Handbook

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Welcome to Signature Healthcare!

We are delighted to welcome you to Signature Healthcare. Whether you are just beginning or expanding your knowledge in the healthcare sector, we look forward to learning, exploring and growing together.

At Signature Healthcare, you – our students – are our highest priority, and we are dedicated to both your academic and personal growth. As you embark on your experiences here, we hope you will feel the strong sense of community that is at our core. We are not only passionate about education, but we care deeply about our community, our environment, and each other.

We work collaboratively to foster an environment that is compassionate, inclusive, supportive, and safe. Signature Healthcare is a place where we celebrate our differences and learn from a variety of perspectives represented in our community. By honoring and respecting each other, we create a strong learning environment where each of us can pursue our dreams and reach our highest potential.

Introduction and Purpose of this Handbook

This handbook was designed as a reference and resource for you. The policies and procedures described in this handbook apply to all students of Signature Healthcare and have been included to help answer questions should they arise. Please keep in mind, this handbook contains general information and practices. It is not intended to address all possible situations, and for that reason, if you have questions or need clarification, you should address your specific concerns to an Administrative Personnel of Signature Healthcare or the Program Coordinator.

Signature Healthcare's policies and procedures, as explained in this Handbook, may change from time to time as business, legislation and economic conditions dictate. If and/or when provisions are changed, you will be notified of the changes as soon as possible.

This handbook and all the information in it should be treated as proprietary and confidential. No portion of this handbook should be shared or disclosed to others, except students and others who are affiliated with Signature Healthcare.

History of Signature Healthcare

Signature Healthcare was founded in 2004 by Christi J Hokel and John Paulsen. The organization began offering medical staffing solutions to local hospitals, long term care facilities and physician clinics. The company employees RNs, LPNs, CNAs, CMAs and Dietary personnel. In 2009 the company was approved by the Department of Inspections, Appeals, & Licensing (DIAL) as an approved training center to instruct the 75-hour CNA Course and continues to host classes. In June 2024 the company was awarded approval by DIAL to instruct the Certified Medication Aide Course. The organization is currently seeking approval from the Iowa College Aid demonstrating compliance with Iowa's student consumer protection laws.

MISSION

To provide our students with lifelong learning experiences and unlock their full potential for growth and innovation through learning opportunities and community engagement.

Classroom Location

14225 University Ave
Ste. 130
Waukee, IA 50263
515.252.0000

VISION

To be a premier training center for those interested in learning more about the health care field.

VALUES

- ✓ Achievement: Assure our students are given every opportunity for success
- ✓ Integrity: Serve as a trusted community training center throughout Iowa
- ✓ Respect: Value diversity, individualism, and freedom of expression
- ✓ Excellence: Commit to excellence in all we do

DISCLAIMER(S)

This handbook is provided for information purposes only. It is not a contract. If there is any conflict between the provisions of this handbook and any other application policy or agreement of Signature Healthcare, this handbook will not apply. Signature Healthcare reserves the right to change policies or procedures or the terms of this handbook at any time without notice to students or others.

This school is not accredited, nor does it offer credits, rather a certificate of completion. Certificates earned may not be transferred or be accepted by other schools.

This school is authorized in Iowa with the Bureau of Iowa College Aid, within the Iowa Department of Education. Students can address their concerns about this school or any of its educational programs by following the grievance process outlined in the school's catalog or by directly contacting:

Bureau of Iowa College Aid (Iowa College Aid), within the Iowa Department of Education

400 E. 14th St., Des Moines, IA 50319

Authorization Information: <https://educate.iowa.gov/higher-ed/authorization>

Student Complaint: <https://educate.iowa.gov/higher-ed/student-complaints>

1-877-272-4456

SIGNATURE HEALTHCARE EDUCATION & TRAINING CENTER

PROGRAMS OF STUDY

75-hour Certified Nursing Assistant Course

This course meets the training requirements of The Omnibus Budget Reconciliation Act of 1987 (OBRA) for aides working in nursing facilities and skilled nursing facilities. The emphasis in this course is on students achieving basic level knowledge. Students will also demonstrate skills in the clinical setting, demonstrating the ability to provide safe and effective resident care.

The course includes lectures, group discussions, instructional demonstrations, laboratory experiences, role playing, and engaging activities to assist students in mastering competencies. The course is broken into 3 segments: 30 hours of lecture, 15 hours of lab and 30 hours of supervised clinical experiences. The clinical setting will be in a nursing facility. Students will be notified of clinical sites on the first day of class. During the experience, students will be assigned to provide care to one or more residents.

Students will be given quizzes and unit exams throughout the course. For successful completion of the course, students must complete the skills' checklist satisfactorily, receive a satisfactory clinical evaluation, and receive an acceptable grade on the course final examination to pass the course. Upon successful completion of the course, students will receive a certification of completion and will be eligible to take the required to be written and practical competency examination required by the State of Iowa for certification.

Advanced Nurse Aide Course (75-hour hospital based)

The Advanced Nurse Aide course is an additional 75 hours of training which prepares students an to work in an acute care setting (hospital). Students are given the opportunity to gain additional competencies and clinical experiences. To enroll, you must have successfully completed a state approved 75-hour Certified Nurse Aide course.

The course is divided into lectures, laboratory simulations, and clinical experiences. The clinical experience will take place in a hospital setting. The course emphasizes basic pathophysiology necessary in providing care to patients in the hospital.

Upon successful completion, job opportunities include, but are not limited to, EKG tech, Emergency Tech, Scope Tech, Surgery Tech, and OB Tech. The agency or hospital will provide additional training in these specialized areas.

60-hour Certified Medication Aide Course

In this competency-based course, students are prepared to safely administer non parenteral medications in long term care facilities. This 60-hour course consists of 48 classroom hours and 12 clinical hours. To enroll, the student must currently be working in and **sponsored** by a facility licensed by the Iowa Department of Inspections, Appeals, and Licensing. Private registrations are not accepted.

The course has been developed into three (3) units of study to include:

- Role of the Medication Aide
- 6 Resident Rights
- Infection Control and Standard Precautions
- Drug Names (Generic, Trade and Brand)
- Medication Basics and Body Systems
- Medication Administration Record (MAR)
- Routes of Administration
- Medication Administration Supplies
- Medication Cart

Phlebotomy Technician Program

The Phlebotomy Technician Program is a comprehensive and “hands-on” course led by highly experienced instructors. Students will learn the skills and knowledge to succeed as a phlebotomist. The 4-week course is divided into lectures, discussion and practical laboratory instruction and hands-on blood draws. Students will learn a variety of blood drawing techniques, safety standards, basic anatomy and physiology, and much more.

The Phlebotomy Program course content includes:

- HIPAA and Patient Rights
- Universal Precautions and Safety
- Venipuncture with Vacutainer, Butterflies and Syringes
- Finger and Heel Sticks
- Blood and Blood Components
- Medical Lab Terminology
- Test Tubes – Uses, Additives and Order of Draw
- Special Procedures

TRAINING CENTER RESPONSIBILITIES TO STUDENTS

Signature Healthcare exists for the success of our students. We attempt to provide all students an environment that is conducive to academic excellence, social growth, and individual self-discipline. Signature Healthcare seeks to achieve this goal through a sound educational program and established policy and procedure. Signature Healthcare has a responsibility to students by providing educational opportunities and protections which best promote the learning process. To achieve this goal, all staff of Signature Healthcare must be aware of and respectful to the rights of others.

Signature Healthcare is strongly committed to the safety of the training center community. Safety ensures a productive learning environment for all. Signature Healthcare will contact law enforcement officers to immediately remove anyone from property grounds who is deemed a threat to our classroom safety and security and/or who is disruptive to the environment. Such individuals will not be permitted to reenter the property and will be notified in writing about the duration of their exclusion from Signature Healthcare grounds.

Equal Opportunity and Non-Discrimination Policy

Signature Healthcare will not discriminate in its educational programs, activities, or employment practices based on race, color, creed, religion, national or ethnic origin, ancestry, genetic information, physical or mental disability, age, sex, sexual orientation, general identity or expression, veteran status, citizenship, medical condition, and actual or potential parental, family or marital status as those terms are defined under applicable law.

If you have questions or complaints related to compliance with this policy, please contact our director at christi@mysighealth.com or 515-252-0000.

Reasonable Accommodation Policy

Students with a documented or obvious “disability” as defined by the Americans with Disabilities Act Amendments Act (“ADA”), 42 U.S.C. § 12131, et seq., and Section 504 of the Rehabilitation Act of 1973 (“Section 504”), 29 U.S.C. § 794, may be entitled to a reasonable accommodation, modification, or academic adjustment. A disability for purposes of this policy means a physical or mental impairment that substantially limits one or more major life activities and, in some cases, having a record of such an impairment. Impairments include, but not limited to, disorders or conditions affecting the neurological or musculoskeletal systems, special sense organs, respiratory, cardiovascular, reproductive, digestive, genitor-urinary, hemic, lymphatic, or endocrine systems, or the skins. Impairments also include mental or psychological disorders, including, organic brain syndrome, emotional or mental illness, and certain learning disorders. Major life activities include, for example, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working.

Reasonable Accommodation Requests

Signature Healthcare will provide reasonable accommodation, modifications, or academic adjustments to the known limitations of an otherwise qualified student with a disability. It is the responsibility of the student with a disability to inform Signature Healthcare they need an accommodation, modification, or academic adjustment. Students who believe they are entitled to a reasonable accommodation, modification, or academic adjustment must contact the Admissions Office at: 515-252-0000. Students must provide reliable documentation from appropriate licensed professionals and/or educational information about the student's education and accommodation history to support their request. Any cost of obtaining documentation is the responsibility of the student. If the initial documentation is incomplete or inadequate and an interview of the student does not provide the necessary information, Signature Healthcare has the discretion to request additional information necessary to make an educated decision as to whether the student is entitled to an accommodation, modification, or academic adjustment.

Determination of Need and Reasonableness of Requested Accommodation

Accommodations, modifications, or academic adjustments will be granted to students who demonstrate a disability-based need for the accommodation, modification, or academic adjustment to enable the student to have an equal opportunity to attain the same level of performance or to enjoy equal benefits and privileges as are available to similarly situated individuals without a disability. Evaluation of performance, course examinations and other measures of achievement, will be provided with appropriate reasonable accommodations or modifications to ensure that the evaluation represents achievement rather than reflecting the impact of disability. Signature Healthcare is not required to provide accommodation, modification, or academic adjustment if it would result in undue hardship or fundamentally alter any program, policy, or service provided by Signature Healthcare.

STUDENT RESPONSIBILITIES

Signature Healthcare expects students attending a training course to pursue their training in a serious and professional manner. Students should attempt to obtain maximum benefit from all instructional opportunities and clinical experiences.

Class Attendance

Students are expected to attend all class sessions for the course in which they are enrolled. Absences, regardless of the reason, result in the loss of instruction and directly interferes with the learning process. Students enrolled in courses overseen by the Department of Inspections and Appeals and Licensing have strict attendance mandates. If a student misses a certain number of course hours, regardless of reason, the student is dropped per state of Iowa regulation. Specific attendance and make-up policies for each course are outlined on course registration forms and in the course syllabus.

Audio Recording Classes

A student may audio record a class only with the course instructor's permission. Under no circumstances shall an audio recording, or any portion of the recording, be duplicated, transmitted, or provided in any part to another individual or entity.

Video Recording

Prohibited on Signature Healthcare course grounds and in clinical environments.

STUDENT RESPONSIBILITY FOR CATALOG INFORMATION

This catalog is effective beginning August 2024, for the 2024 – 25 academic year. Each student is responsible for compliance with the information appearing in this catalog. Failure to read the regulations and policies will not be considered an excuse for noncompliance.

Signature Healthcare reserves the right to change policies or revise the curriculum as necessary. Program or course availability may be affected by number of enrollments or instructor availability.

TUITION, FEES & REFUNDS

New students who register for a program at Signature Healthcare are assessed a one-time **non-refundable** fee of \$75.00

Tuition rates for 2024 Academic Schedule:

1. 75-hour (Initial) Certified Nurse Aide Course: \$735
2. Advanced Nurse Aide Course: \$850
3. 60-hour Certified Medication Aide Course: \$735
4. Phlebotomy Technician Program: \$1050

The following section is a list of **REQUIRED additional costs for each course**. Please read it thoroughly. If you need clarification, please call our office at (515) 252-0000.

75-hour (Initial) Certified Nurse Aide Course (CNA):

1. Navy blue scrubs (top and bottoms). Available for purchase in our office \$40 or you may purchase elsewhere.
2. Close-toed shoes (black or white tennis shoes).
3. TB (2-step) skin test within the past 12 months. Available for \$40 in our office or you may get it from your doctor.

4. QuantiFERON GOLD or T-Spot TB test is also accepted (must be done at a doctor's office and within the last 12-months) **OR** a copy of a chest x-ray with results from your doctor is accepted.
5. Watch with a second hand. Available for purchase in our office \$20-30 or bring your own.
6. 3-ring notebook. Available for purchase in our office \$5 or bring your own.

60-hour Certified Medication Aide Course (CMA):

1. Navy blue scrubs (top and bottom). Available for purchase in our office \$40 or you may purchase elsewhere.
2. Close-toed shoes (black or white tennis shoes).
3. TB (2-step) skin test within the past 12 months. Available for \$40 in our office or you may get it from your current employer or doctor.
 1. QuantiFERON GOLD or T-Spot TB test is also accepted (must be done at a doctor's office and must be within the last 12-months) **OR** a copy of a chest x-ray with results from your doctor is accepted.
4. Watch with a second hand. Available for purchase in our office \$20-30 or bring your own.
5. 3-ring notebook. Available for purchase in our office \$5 or bring your own.
6. Your registration is NOT complete without a facility sponsorship form filled out and turned in by the DON or Administrative personnel from your facility.

Advanced Nurse Aide Course (hospital based):

1. Navy Scrub Top and Bottom (available in our office \$40) or you may purchase elsewhere
2. Close toed shoes (black or white tennis shoes)
3. 1-Step TB skin test (within the past 12 months) (\$30 in our office) or you may get it from your doctor
 1. QuantiFERON GOLD or T-Spot TB test is also accepted (must be done at a doctor's office and must be within the last 12-months) **OR** a copy of a chest x-ray with results from your doctor is accepted
4. Medical documentation: MMR (Measles, Mumps, Rubella vaccine record), Varicella vaccine record, Physical examination (physical exam must be completed in the last 12 months)
5. Flu vaccine record (September - March classes)
6. Watch with a second hand (available for purchase in our office \$20-30) or bring your own
7. Stethoscope (available for purchase in our office \$35) or bring your own
8. 3-ring notebook (available for purchase in our office \$5) or bring your own

The section below is a list of RECOMMENDED additional supplies for each course. Please read it thoroughly. If you need clarification, please call our office at (515) 252-0000.

75-hour (Initial) Certified Nurse Aide Course (CNA):

1. Stethoscope
2. Blood pressure cuff
3. CNA Study Guide 2024-2025 Edition. CNA Study Guide 2024-2025 Edition by Gerald Sackler (recommended). Available for purchase here: [CNA Study Guide 2024-2025 Edition: Ace the Certified Nursing Assistant Exam on Your First Try with No Effort | Test Questions, Answer Keys & Tips to Score a 98% Pass Rate: 9798874431051: Medicine & Health Science Books @ Amazon.com](#)

60-hour Certified Medication Aide Course (CMA):

1. 2024 Lippincott Pocket Drug Guide for Nurses by Rebecca Tucker.

Phlebotomy Technician:

1. NHA Phlebotomy Study Guide, 2024 Edition. Available for purchase here: [NHA PHLEBOTOMY STUDY GUIDE: Conquer The Certified Phlebotomist Technician on Your first Try with no Stress and Anxiety, Q&A, Test, Bonus included: FOR SUCCESS, STUDY SOLUTION: 9798883426345: Amazon.com: Books](#)

Refunds

Tuition paid by the applicant will be refunded up to 72 business hours prior to the start of the program, except for the \$75 non-refundable fee. No refunds will be made after 72 business hours to the start of the program. Refunds requested prior to the 72 business hours of the start of the course will be dispersed within 21 business days after the verbal or written request.

STUDENT RECORDS & TRANSCRIPTS

Student Records

1. Signature maintains records in the following way:
 - a. registration forms and related documents (transcripts, letters of recommendation, etc.) shall be kept for 5 years from course completion or date of last attendance.
 - b. financial records (records relating to payment, financial obligations, forms and receipts of payment, etc.) shall be kept for 5 years
 - c. grade sheets, course catalog, course syllabus and student evaluations shall be kept permanently.
2. Student records may not be released without written approval from the student in certain circumstances.

3. Information from student records may not be given by phone, even to parents or sponsoring third parties, without written permission from the student.
4. General student information is defined as the following categories:
 1. Student name
 2. Residing address
 3. Phone number(s)
 4. Photographs
 5. Program enrolled
 6. Dates of attendance
5. Signature Healthcare may release 'general student information' regarding a current or former student to anyone without the consent of the student unless a restriction is requested in writing and turned into the office of Signature Healthcare. Restricted information will not be released to the public.
6. If a student wishes to disclose their student educational record, they must fill out a release form, available in the office of Signature Healthcare.
7. Certain disciplinary records/information may be released without student consent, such as disciplinary records of a crime of violence by a student and parental notification to a parent or guardian of a drug or alcohol violation committed by a student under 21 years of age.
8. Student record information may further be released to, without consent to, testing agencies, accrediting organizations, designated officials of state and federal governments, and to individuals with a judicial order or lawfully issued subpoena.
9. In the event another school, in which the student desires to attend or where the student is already enrolled, Signature Healthcare can disclose educational records without student consent.

Student Transcripts & Certificate Reprint Fees

Student records are considered confidential records. Transcripts and Certificate reprints are only issued at the request of the student who completed the program/course.

Transcripts include only programs/courses attempted at Signature Healthcare.

Students must fill out the Transcript Request Form or Certificate Reprint Form located on the website: <https://mysighealth.com/student-records/> and pay a fee of \$15.00 for each official copy requested. Paper transcripts and certificate reprints will be made available within 1-2 business days of the request.

CONFIDENTIALITY

Confidentiality of Financial and Student Records

Signature Healthcare provides privacy safeguards for students by setting up guidelines for the disclosure of education records and personally identifiable information. Students have the right to inspect official records directly relating to them. Signature Healthcare does not provide information regarding grades, transcripts, financial information, or schedules to anyone without written consent of the student. Consent forms are available in the main Admissions Office.

TOBACCO / ALCOHOL / DRUG POLICIES

Tobacco Policy

Signature Healthcare provides tobacco-free buildings to all students and employees. The tobacco-free policy prohibits the use of smokeless tobacco, e-cigarettes, or any non-prescription inhalant, as well as any devices that stimulate the act of smoking, including vaping in all Signature Healthcare buildings and grounds. Smoking is prohibited in buildings, parking lots and sidewalks.

Alcohol Policy

Signature Healthcare's policy on alcohol has been developed to provide intervention, prevention, and education to students and employees. The policy outlines the procedure for handling student conduct, which is disruptive, illegal, or unethical. More specifically, the unlawful manufacture, distribution, dispensation, possession, or use of alcohol or a controlled substance while on Signature Healthcare grounds and while at facility/clinical locations. The possession, use, distribution, or being in the presence of alcohol in Signature Healthcare buildings, on surrounding grounds, and while at facility/clinical locations is strictly prohibited regardless of age. Violations of this policy will result in disciplinary action which may include verbal or written warning, probation, or suspension, and/or student expulsion. The student may be reported to proper authorities for legal action or possible arrest by law enforcement officials for apparent or suspected violation of local, state, or federal laws.

Illegal Drugs, Synthetic Substances and Controlled Substances

Signature Healthcare's policy on illegal drugs, synthetic substances, controlled substances and/or other drugs has been developed to provide intervention, prevention, and education to students and employees. The policy outlines the procedure for handling student conduct, which is disruptive, illegal, or unethical. More specifically, the unlawful manufacture, distribution, dispensation, possession, or use of alcohol or a controlled substance while on Signature Healthcare grounds and while at facility/clinical locations.

The possession, use, distribution, being under the influence, or in the presence of illegal drugs, synthetic substances, controlled substances, and paraphernalia in Signature Healthcare buildings,

on surrounding grounds, and while at facility/clinical locations is strictly prohibited. Signature Healthcare enforces both the State of Iowa and the Federal drug laws regarding the use, possession, and the sale of illegal drugs, synthetic substances, controlled substances.

Violations of this policy will result in disciplinary action which may include verbal or written warning, probation or suspension, and/or student expulsion. The student may be reported to proper authorities for legal action or possible arrest by law enforcement officials for apparent or suspected violation of local, state, or federal laws.

Substance Abuse Assistance

Signature Healthcare recognizes drug and alcohol abuse as a potential health, safety, and security problem. The following is a list of community resources and prevention programs available to you.

Alcoholics Anonymous

Des Moines – Central Office

<http://www.aadsmco.org>

515.282.8550 – main phone

800.207.2172 – helpline

Narcotics Anonymous

Iowa Substance Abuse Information Center

www.iowa-na.org

800.897.6242

Crisis Hotlines

Drug and Alcohol Helpline

866.242.4111

Statewide Crisis Line (24-hour)

800.332.4224

National Institute on Drug Abuse Helpline

800.662.4357

Clive Behavioral Health

Alcohol/Drug Treatment

Mental Health Services

Substance Use Evaluations

Withdraw Management and Detox

844.680.0504

Websites with Additional Information

QuitLine Iowa – assistance with tobacco cessation

<https://iowa.quitlogix.org>

Alcoholics Anonymous

www.aa.org

Your Life Iowa

<https://yourlifeiowa.org>

SEXUAL MISCONDUCT POLICY

Commitment to Prohibit Sexual Misconduct

Signature Healthcare is committed to providing an environment for its students, instructors, staff, and visitors, regardless of sexual orientation or gender identity, that discourages and prevents sexual misconduct. It is the policy of Signature Healthcare to provide a positive, discrimination-free

educational and work environment. Sexual misconduct in the workplace or the education environment is unacceptable behavior that will not be tolerated. Any student, employee, or visitor who believes he or she has witnessed or been the victim of sexual misconduct should report the incident to the Program Coordinator as soon as possible following the incident. If the allegation is against the Program Coordinator, the report should then be made to John Paulsen. Signature Healthcare maintains a strict policy prohibiting sexual misconduct in any form, to include sexual harassment, sexual discrimination, and sexual violence (including, but not limited to; sexual exploitation, intimidation, hostile environment, sexual assault).

A complaint may be filed with the Program Coordinator in person, by mail, or by electronic mail. A sexual Misconduct Report Form is available on the Signature Healthcare website, and in hard copy in the main Registration office. An anonymous Sexual Misconduct Report Form can be submitted. Anonymous reports may limit the extent to which sexual misconduct can be investigated.

Christi J. Hokel, MS, BSN, RN – Program Coordinator
14225 University Ave. Ste 130
Waukee, IA 50263
christi@mysighealth.com

Any person may report sex discrimination, sexual misconduct, including sexual harassment (whether the person reporting is the person alleged to be the victim of conduct that could constitute sex discrimination or sexual harassment), in person, by mail, by telephone, or by any other means that results in the Program Coordinator receiving the persons verbal or written report. The report may be made at any time (including during non-business hours) by phone, electronic mail address, or by mail to Christi J Hokel, MS, BSN, RN, at (515) 252-0000 (this phone is answered 24/7) or Christi@mysighealth.com.

Response options have been defined in policies and/or local, state, and federal law enforcement agencies for any persons have been sexually harassed, have experienced sexual discrimination, or have been a victim of sexual assault or other sexual misconduct which impacts their educational experience or employment environment. Any person found to be in violation of this policy will be subject to action by Signature Healthcare, up to and including dismissal from the program. A Complainant may wish to report to law enforcement agencies. If a report to law enforcement agencies is desired, the Program Coordinator, or their designee, would be able to assist.

Definitions of Sexual Harassment and Retaliation

This policy includes a broad range of behaviors, including sexual harassment, sexual assault, dating violence, domestic violence, stalking, and retaliation. If you have any questions about the definition or application of any of these terms, the policy in general, or the resources available to you as a member of Signature Healthcare, please contact the Program Coordinator or Clinical Director (listed above).

Sexual Harassment is defined as conduct that must satisfy one or more of the following:

- a. Hostile environment sexual harassment: Unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectionably offensive that it effectively denies a person equal access to an education program or activity;

- b. Quid pro quo sexual harassment: An employee conditioning the provision of an aid, benefit, or service of the educational program on an individual's participation in unwelcome sexual conduct; and
- c. Sexual assault, dating violence, domestic violence, and stalking, as defined below.

Hostile Environment Sexual Harassment

Signature Healthcare considers a variety of factors related to the objective offensiveness, pervasiveness, and severity of the sex-based harassment, including: (1) the type, frequency, and duration of the conduct; (2) the identity and relationships of persons involved; (3) the number of individuals involved; (4) the location of the conduct and the context in which it occurred; and, (5) the degree to which the conduct affected one's employment or educational opportunities.

Examples of behavior that might be considered hostile environment sexual harassment include, but are not limited to:

1. Unwanted sexual innuendo, propositions, sexual attention, or suggestive comments and gestures; inappropriate humor about sex or gender-specific traits; sexual slurs or derogatory language directed at another person's sexuality, gender, gender identity, sexual orientation, or gender expression; insults and threats based on sex, gender, gender identity, sexual orientation, or gender expression; and other oral, written, or electronic communications of a sexual nature that an individual communicates is unwanted and unwelcome.
2. Written graffiti or the display or distribution of sexually explicit drawings, pictures, or written materials; sexually charged name-calling; or the circulation, display, or creation of emails, text messages, or websites of a sexual nature.
3. Display, presentation, or circulation of materials or pictures degrading to an individual or gender group where such display is not directly related to academic freedom or to an educational/pedagogical, artistic, or work purpose.
4. Unwelcome physical contact or suggestive body language, such as touching, patting, pinching, hugging, kissing, or brushing against an individual's body.
5. Use of a position of power or authority to: (1) threaten or punish, either directly or by implication, for refusing to tolerate harassment, for refusing to submit to sexual activity, or for reporting harassment; or (2) promise rewards in return for sexual favors.
6. Acts of verbal, nonverbal, or physical aggression, intimidation, or hostility based on sex or sex stereotyping.
7. Sexual exploitation - taking sexual advantage of another person for the benefit of anyone other than that person, without that person's consent.

Quid Pro Quo Sexual Harassment

Quid pro quo sexual harassment occurs when an employment opportunity (e.g., hiring, compensation, advancement, etc.) or an educational opportunity (e.g., admission, grades, research, etc.) is conditioned by an employee upon the targeted student or employee submitting to unwelcome requests or demands for sexual favors. Only individuals with authority to grant or withhold employment or educational opportunities can engage in quid pro quo sexual harassment.

In some cases, quid pro quo sexual harassment is obvious and may involve an overt action, threat, or reprisal. In other instances, it is subtle and indirect, with a coercive aspect that is unstated. Examples of behavior that might be considered quid pro quo sexual harassment include but are not limited to:

1. Physical coercion or pressure of an individual to engage in sexual activity or punishment for a refusal to respond or comply with sexual advances.
2. Use of a position of power or authority to: (a) threaten or punish, either directly or by implication, for refusing to tolerate harassment, for refusing to submit to sexual activity, or for reporting harassment; or (b) promise rewards in return for sexual favors.

Sexual Assault

Sexual assault is having or attempting to have sexual contact with another individual without consent or where the individual cannot consent because of age or temporary or permanent mental incapacity. Sexual contact includes:

- a. Sexual intercourse (anal, oral, or vaginal), including penetration with a body part (e.g., penis, finger, hand, or tongue) or an object or requiring another to penetrate themselves with a body part or an object, however slight.
- b. Sexual touching of the private body parts, including, but not limited to, contact with the breasts, buttocks, groin, genitals, or other intimate part of an individual's body for the purpose of sexual gratification; or
- c. Attempts to commit sexual assault.

Reporting Protocols and Confidential Resources:

Signature Healthcare strongly encourages all individuals who have experienced or witnessed incidents of sexual harassment to report the information to the Program Coordinator. The Program Coordinator will provide the Complainant with information about resolution options and access to reasonably available Community Programs.

After receiving a report or complaint, the Program Coordinator will promptly contact the Complainant to discuss available Community Resources and their wishes. If a Complainant or witness does not wish to report an incident of sexual harassment to Signature Healthcare but wishes to seek support or information in a confidential setting, such support can be sought from one of the Confidential Resources listed below:

MercyOne West Des Moines Medical Center Hospital, non-emergency	(515) 358-8000
UnityPoint Health – Methodist West Hospital Hospital, non-emergency	(515) 343-1000
Waukee Police Department (non-emergency) Emergency, call 911	(515) 222-3321
Iowa Coalition Against Sexual Assault 3030 Merle Hay Rd Des Moines, IA 50310	(515) 244-7424 www.iowacasa.org
Crisis & Advocacy Services Services: violent crimes and sexual assault Serves Polk and Warren Counties	(515) 286-3600

Crisis Intervention & Advocacy Center
Services: sexual abuse, domestic abuse
Serves: Adair, Adams, Clarke, Dallas, Decatur,
Guthrie, Madison, Ringgold, Taylor, Union

(515) 993-4095
(800) 550-0004 - sexual abuse hotline

RAINN Online Network
National Sexual Assault Hotline
<https://hotline.rainn.org/online> (online chat)

(800) 656-HOPE (4673)

MILITARY REFUND POLICY

Students who are members of the Iowa national guard or reserve forces of the United States and who are ordered to national guard duty or federal active duty (upon verification of official orders) are eligible for tuition and fee refund or credit. This refund policy also includes the spouse of a member, if the member has a dependent child.

The eligible student and/or eligible spouse of a member, may choose from the following options:

1. The student may withdraw from the entire registration and receive a full refund of tuition and all mandatory fees;
2. The student may arrange with their instructor for a current course score or grade.
 - a. The grade will be held and completed at a later date.
 - b. If such arrangement is made, the student's registration shall remain intact and tuition and mandatory fees shall be assessed for the course in full.
3. The student determines they cannot complete the course and takes an incomplete.
 - a. If such arrangement is made, the student shall be considered dropped and the tuition and all mandatory fees for the course are fully refunded.