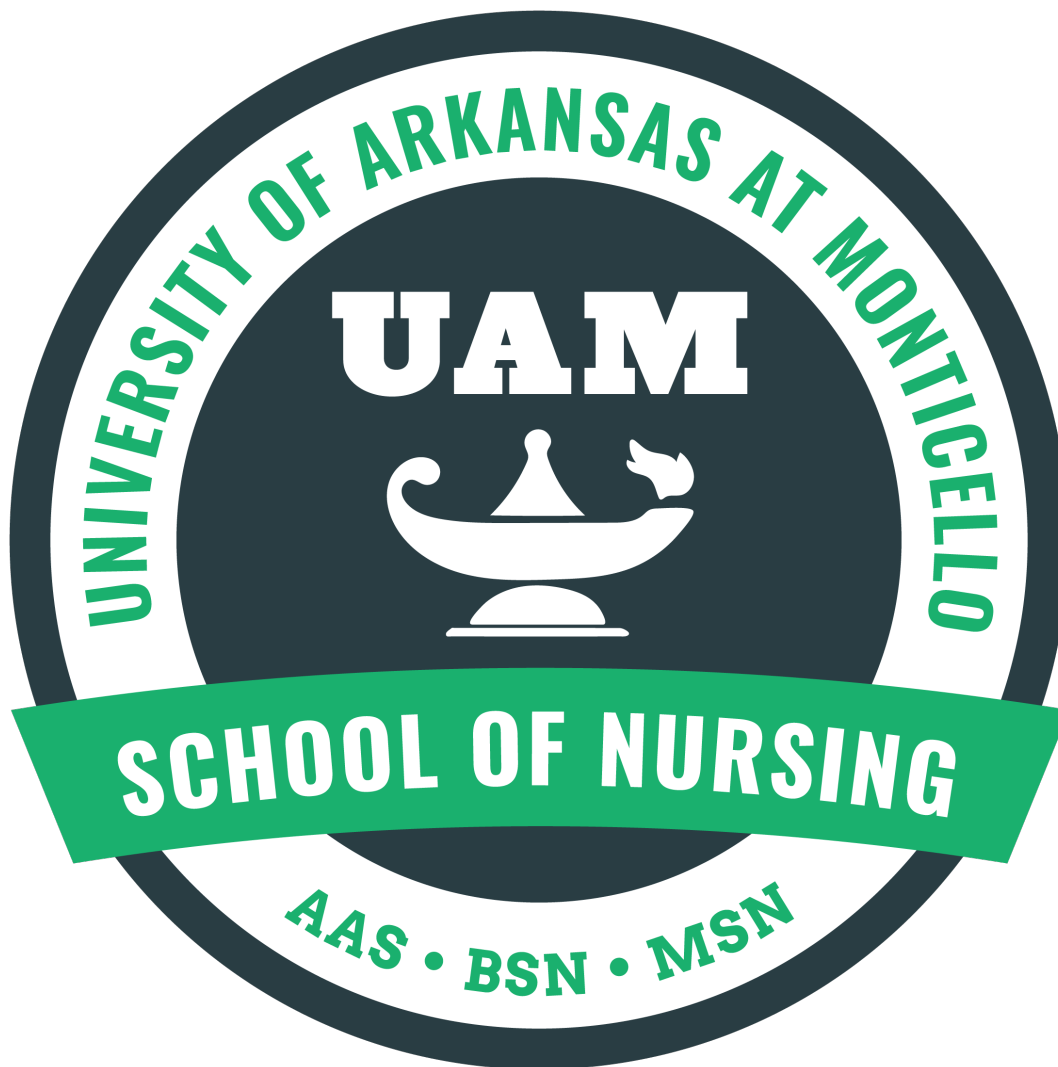


**UNIVERSITY OF ARKANSAS AT MONTICELLO  
SCHOOL OF NURSING  
UNDERGRADUATE STUDENT HANDBOOK  
2025-2026**



*All undergraduate UAM School of Nursing programs are approved by the Arkansas State Board of Nursing (ASBN). The AAS in nursing and BSN programs are accredited by the National League for Nursing Commission for Nursing Education Accreditation (CNEA).*

*Revised: 12/11/2025*

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## Welcome from the Dean



Dear Students,

I would like to welcome each of you as you begin or continue your journey in the field of nursing. As the Dean of Nursing, I am honored to support you as you achieve your academic goals. I speak on behalf of all the nursing faculty and staff when I say welcome to the University of Arkansas at Monticello (UAM) School of Nursing (SON). The faculty and staff are committed to your success and challenge you to strive for excellence over the next few semesters as you become a nurse generalist.

Nursing is more than a profession; it is a calling that demands compassion, integrity, and excellence. Our dedicated faculty and staff are committed to providing a rigorous and supportive learning environment that prepares you not only for licensure, but also for leadership. The challenges may be difficult at times, but know your faculty and staff are available to help you. Our curriculum is strong and validated through our accreditation by the Higher Learning Commission, a Commission of North Central Association of Colleges and Secondary Schools. All SON programs are approved by the Arkansas State Board of Nursing (ASBN) and hold accreditation by the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA), located at 2600 Virginia Avenue, NW, Washington, DC 20037. 202-909-2487.

This handbook is a valuable resource designed to guide you through the academic policies, procedures, and expectations of our program. I encourage you to read it carefully and refer to it often as you progress through your studies. Students also have access to the SON Faculty Handbook that is hyperlinked on the UAM SON Website for faculty policies and procedures.

You are now part of a proud tradition of nursing excellence at UAM. I look forward to seeing all that you will accomplish in the classroom, clinical settings, and beyond.

Sincerely,

*Mrs. Smith*

Mrs. Amanda Smith, MSN, RN  
Dean and Assistant Professor of Nursing  
UAM School of Nursing



## University of Arkansas at Monticello School of Nursing

### Mission

The University of Arkansas at Monticello is accredited by the Higher Learning Commission, a Commission of the North Central Association of Colleges and Secondary Schools. The University of Arkansas at Monticello Associate and Bachelor's Degree in Nursing Program holds continual accreditation from the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA), located at 2600 Virginia Avenue, NW, Washington, DC 20037. 202-909-2487. The mission of the School of Nursing (SON) is to strive for excellence in the preparation of nursing graduates to develop the knowledge, skills, and attitudes to advance the discipline of nursing. This mission is achieved through the following goals set for nursing graduates:

- Demonstrate competencies through practice experiences with populations across the lifespan and within each of the four spheres of care:
  - 1) wellness and disease prevention,
  - 2) chronic disease management,
  - 3) regenerative or restorative care, and
  - 4) hospice/palliative care.
- Demonstrate clinical judgment to guide nursing interventions that promote, maintain, and restore health.
- Demonstrate accountability through a commitment to nursing practice and lifelong learning.

### School of Nursing Organizing Framework in Curricula

The organizing framework for the Bachelor of Science in Nursing (BSN) and the Associate of Applied Science (AAS) in nursing programs is guided by the nursing metaparadigm. The National League for Nursing (NLN) Educational Competencies Model and Quality and Safety Education for Nurses (QSEN) Competencies are integrated into the framework. This organizing framework supports the values of the University of Arkansas at Monticello (UAM) that include individuality, ethics of care, evidence-based decision making, professionalism and collaboration. The organizing framework provides the foundation for curricular decisions, structure, and organization that allows student learning in a coherent and successive manner.

### Philosophy

The faculty of the SON holds the following beliefs about the major concepts of *person*, *health*, *environment*, *professional nursing* (for BSN degree), *professional nursing education* (for BSN degree), *technical nursing* (for AAS degree) and *technical nursing education* (for AAS degree):

The above-mentioned concepts underpin the four NLN broad program outcomes of *Human Flourishing*, *Nursing Judgement*, *Professional Identity*, and *Spirit of Inquiry*. These outcomes evolve from UAM and SON core values of *caring*, *safety*, *client-centered care*,

*ethics, evidence-based practice, professionalism, and interprofessional collaboration.* In addition to these values, the QSEN competencies of *teamwork and collaboration, quality improvement, and informatics* are integrated in both curriculums. Program outcomes for both degrees incorporate these concepts.

## **Person**

The concept of a person includes the individual, family, and/or community who is the recipient of care. The person is unique and complex with varying needs throughout the lifespan. A family is a group of individuals bound by common and unique relationships. A community is often a group of individuals bound by similar needs, goals, culture, and/or geographic location. The person becomes the client/patient when entering into a relationship with the nurse who provides care in a healthcare setting. Client-centered care, also known as patient-centered care, reflects the values and preferences of the individual, family, and/or community.

## **Health**

Health is a process of being and becoming an integrated holistic person by continuously adapting to change. The SON faculty view health as a dynamic state that is influenced by the person's interaction with the environment and is influenced by the person's own beliefs and prior experiences. The role of nursing is to assist the person to maintain their health by coordinating care and when necessary, collaborating with the individual's family, or community. The interprofessional team members monitor the outcomes of that care and make adaptations when required. When health can no longer be maintained or restored, end of life care becomes the goal of nursing.

*Human Flourishing* is consistent with the concepts of person and health. It is defined by NLN as an effort by the individual to achieve self-actualization within the context of family or community. Nursing graduates act as advocates for clients, families, and communities to promote self-determination and provide culturally appropriate, effective, and high quality to individuals, families, and communities. This outcome aligns with the QSEN competency of *patient-centered care*, in which the licensed nurse recognizes the client as the source of control, and a full partner in making care decisions that respect the client's preferences, values, and needs.

## **Environment**

The person exists in a global environment interconnected with others in caring relationships. Internal and external environmental factors such as physical, psychological, social, cultural, and spiritual factors affect health and health care. The role of the nurse is to support the client in managing these elements and monitoring the environment to promote the health of the individual, family, or community. The nurse applies evidence-based nursing judgement that integrates and translates knowledge from pathophysiology, pharmacology, nutrition, and social and behavioral science. The nurse also manages the environment through the use of communication and collaboration with interprofessional team members. The goal of the nurse is to produce a safe, supportive, and caring environment to improve health delivery.

## Professional Nursing (BSN degree)

As a practice profession, nursing students (and the nursing workforce) need to provide care to a wide spectrum of individuals, and they need to be prepared to offer appropriate care. Thus, the BSN nursing curriculum (courses and clinical/practicum experiences) prepares students for situations they will encounter in practice.

The BSN degree is considered the entrance professional nursing degree. Professional nursing behaviors maximize the quality of life through the provision of nursing care which promotes, maintains, and restores clients to the highest level of health. The BSN prepared nurse is considered the professional nurse and assists the person to manage environmental stimuli through developing client-centered interventions which are research-based and promote health.

The discipline of BSN prepared nurses is based on a body of nursing knowledge and research incorporating the use of the natural and behavioral sciences. Nursing is based upon the essential art and science of caring. The art of nursing is the creative use of caring, critical thinking, nursing judgement, technical skills, communication, and collaboration to provide nursing care in various settings. Nursing advocates for all clients.

The NLN outcomes of *Nursing Judgement and Professional Identity* align with the concept of professional nursing and the QSEN competencies of *Safety, Informatics, and Teamwork and Collaboration*. *Nursing Judgment* encompasses critical thinking that integrates best current evidence into clinical judgments using the nursing process while *Professional Identity* addresses the internalization of core nursing values, ethics, knowledge, and skills. The nursing graduate demonstrates *Nursing Judgment* when engaged in evidence-based critical thinking to make clinical decisions that integrate science and quality principles to improve health outcomes. BSN students can demonstrate *Professional Identity* in how they incorporate their values and strengths in their nursing role and their contributions to the health care team.

The professional nurses minimize risk of harm through system effectiveness and individual performance and applies information technology to manage knowledge, mitigate error, and support decision making. Nursing graduates become effective members of inter-professional teams when they foster open communication and shared decision making to improve health outcomes.

*Spirit of Inquiry* embodies an ongoing curiosity about best evidence and practices that guide practice to improve health outcomes. This outcome aligns with the QSEN competencies of *Quality Improvement and Evidence-based Practice* and can be demonstrated through the student's use of critical thinking and integration of best evidence, traditions, and client preferences for each nursing intervention. Nursing graduates use data to monitor client outcomes, develop, implement, and evaluate quality improvement strategies. Nurses also integrate evidence-based practice in the delivery of healthcare with individuals, families, and communities.

Faculty believe that it is important for nurses to use critical thinking in applying the

nursing process as an approach to problem solving in assisting clients to achieve optimal client-centered outcomes. The nursing process, a scientific method that functions as a formative guide to client-centered care, includes the following steps: assessment, analysis, outcomes identification, planning, implementation, and evaluation. The nursing process serves as a critical thinking model for nursing. The nursing process is taught early in the curriculum, strengthened, and refined by continuous and repeated application in classes and clinical experiences, involving various clients across the lifespan.

The professional nurse uses the nursing process to support successful outcomes or to identify problems and collaborate with the client to design a plan of care that promotes safe and caring interventions. These include independent, dependent, and collaborative interventions. Safe and caring interventions are actions resulting from knowledge of evidence-based practices, nursing theory, ethics, and physical, psychological, and social behavioral sciences. It also includes knowledge gained from the client which involves cultural and spiritual needs. The nurse demonstrates caring interventions through compassion, concern, respect, and advocacy. Safe and caring interventions are introduced early in the curriculum. The complexity of these interventions increases with subsequent semesters and specialized client populations.

The professional nurse demonstrates professional nursing behaviors through three roles:

- a. provider of care,
- b. coordinator of care, and
- c. professional role.

Enactment of these roles requires communication, teamwork, and collaboration by the nurse with individuals, families, communities, and other members of the health care team.

The provider role requires the nurse to conduct a client assessment at various developmental stages and to identify the client's health related problems. The nurse uses assessment data in collaboration with the client to establish nursing diagnoses, priorities, and outcomes. Based on assessment data, the nurse plans and implements safe and caring nursing interventions that promote, maintain, and restore health. The nurse in collaboration with the client evaluates the outcomes of care for effectiveness in promoting quality client-centered care.

The coordinator role requires collaborative care management. This involves the effective coordination of human, physical, financial, and technological resources to promote optimal client and organizational outcomes. It also entails effective communication between health care team members. Coordinator role responsibilities includes:

- a. evaluation of strategies and resources to initiate changes to improve nursing practice and the health care system.
- b. delegation and supervision of client care.
- c. managing communication technology to improve client-centered care outcomes.
- d. understanding the effects of population-based planning on the health care system.

The professional role requires assuming responsibility and accountability for providing holistic care based on established American Nurses Association (ANA) Nursing Scope and Standards of Practice (year) and the ANA Guide to the Code for Nurses-Interpretation and

Application Statements (year). Professional role responsibilities include:

- a. using leadership and management skills, cost-effective interventions, and knowledge of the political and legal system to communicate, collaborate, and negotiate with members of the health care team and consumers to improve health care.
- b. lifelong learning through continued personal and professional development to promote excellence in nursing.
- c. involvement in community service; and
- d. application of research findings to improve nursing practice.

In all of the above stated nursing roles, professional nurses are expected to collaborate with the client, family, intra- and interprofessional team members, peers, and community agencies to provide quality health care services. In the provider and coordinator roles, the professional nurse assists the team to focus on client needs with the decision-making process based on continuity of care, the client's preferences, costs, and availability of resources.

### **Professional Nursing Education (BSN degree)**

Excellence in nursing requires the integration of science and art. Baccalaureate nursing education serves as the channel for the conscientious assimilation of professional nursing knowledge gleaned from best research evidence and clinical expertise in nursing practice. The educational environment/setting for professional nursing education fosters a supportive collegial culture which encourages open communication, collaboration, practice, teamwork, leadership, and scholarship. This supportive environment for nursing education respects the values and ideas of each person.

Through BSN education, the student learns to manage communication and technology. Effective communication is an essential skill for client safety and positive healthcare outcomes. Communication through technology includes but is not limited to the use of electronic health records, automated medication dispensing systems, bar coding, nurse call systems, telehealth systems, etc.

The use of therapeutic communication, confidentiality and information technology are essential components of communication. Therapeutic communication is a nurse/client experience that improves the nurses' ability to effectively perceive clients' thoughts and feelings in order to provide client-centered care. The nurse learns how to manage client information and to protect information collected when gathering data and planning care. An outcome for the professional nurse is that the nurse will communicate effectively with individuals, families, and community groups in all settings.

All BSN nursing courses emphasize collaborative care, which includes intra- and interprofessional relationships. This involves working with nurse colleagues, and multidisciplinary teams within the healthcare system. Nurses on the team represent the voice of nursing as a discipline. Through collaborative care management the nurse identifies client concerns, assists with the development of strategies to resolve problems, and promotes respectful client-nurse, peer, and staff interactions.

The art of nursing is the creative processes which nurses use to deliver nursing care. A major aspect of this creative process is teaching/learning. Teaching/learning is a vital skill in professional nursing education. The teaching/learning process fosters intellectual development, reflection, critical thinking, and lifelong learning. Teaching/learning principles are used for health promotion, maintenance, and restoration. Teaching/learning activities related to health promotion increases the person's awareness of health/wellness states. Through these activities the person learns of resources and develops skills to continue healthy outcomes.

Health maintenance involves the identification and promotion of positive behaviors that preserve the person's current state of health. Through education, the nurse works with the person to identify and maximize strengths that are unique to the person to maintain an optimal level of health and cope with health limitations.

Health restoration focuses on persons who exhibit illness. Activities that support health restoration include educating the person to utilize nursing and medical interventions which are designed to return the person to an optimal health. When health cannot be restored the nurse educates the client and family to meet the end of life with dignity, respect and caring.

### **Technical Nurse (AAS degree)**

The AAS in nursing degree is considered the technical nursing degree. Technical nursing behaviors maximize the quality of life through the provision of nursing care which promotes, maintains, and restores clients to the highest level of health. The technical prepared nurse assists the person to manage environmental stimuli through developing client-centered interventions which are evidence-based and promote health.

As a practice profession, AAS nursing students (and the nursing workforce) need to provide care to a wide spectrum of individuals, and they need to be prepared to offer appropriate care. Thus, the AAS in nursing curriculum (courses and clinical experiences) prepares students for situations they will encounter in practice.

The SON faculty view technical nursing as an art and a science. The goal of technical nursing is to assist the person to develop adaptive responses and, thus, promote, maintain, and restore health throughout the life span. Faculty believe that it is important for nurses to use critical thinking in applying the nursing process as an approach to problem solving in assisting clients to achieve optimal client-centered outcomes. The nursing process, a scientific method that functions as a formative guide to client-centered care, includes the following steps: assessment, analysis, outcomes identification, planning, implementation, and evaluation. The nursing process is taught early in the curriculum, strengthened, and refined by continuous and repeated application in classes and clinical experiences, involving various clients across the lifespan.

The technical nurse uses the nursing process to support successful outcomes or to identify problems and collaborate with the client to design a plan of care that promotes safe and caring interventions. These include independent, dependent, and collaborative interventions. Safe and caring interventions are actions resulting from knowledge of evidence-based practices, nursing theory, ethics, and physical, psychological, and social behavioral sciences. It also

includes knowledge gained from the client which involves cultural and spiritual needs. The nurse demonstrates caring interventions through compassion, concern, respect, and advocacy. Safe and caring interventions are introduced early in the AAS in nursing curriculum. The complexity of these interventions increases with subsequent semesters and specialized client populations.

The NLN outcomes of *Nursing Judgement and Professional Identity* align with the concept of technical nursing and the QSEN competencies of *Safety, Informatics, and Teamwork and Collaboration*. *Nursing Judgment* encompasses critical thinking that integrates best current evidence into clinical judgments using the nursing process while *Professional Identity* addresses the internalization of core nursing values, ethics, knowledge, and skills. The nursing graduate demonstrates *Nursing Judgement* when engaged in evidence-based critical thinking to make clinical decisions that integrate science and quality principles to improve health outcomes. Students can demonstrate *Professional Identity* in how they incorporate their values and strengths in their nursing role and their contributions to the health care team.

Technical nursing graduates minimize risk of harm through system effectiveness and individual performance and apply information technology to manage knowledge, mitigate error, and support decision making. Nursing graduates become effective members of inter-professional teams when they foster open communication and shared decision making to improve health outcomes.

*Spirit of Inquiry* embodies an ongoing curiosity about best evidence and practices that guide practice to improve health outcomes. This outcome aligns with the QSEN competencies of *Quality Improvement and Evidence-based Practice* and can be demonstrated through the student's use of critical thinking and integration of best evidence, traditions, and client preferences for each nursing intervention. Nursing graduates use data to monitor client outcomes, develop, implement, and evaluate quality improvement strategies. Nurses also integrate evidence-based practice in the delivery of healthcare with individuals, families, and communities.

The technical nurse demonstrates technical nursing behaviors through three roles:

- a. provider of care,
- b. coordinator of care, and
- c. member of the discipline of nursing

Enactment of these roles requires communication, teamwork, and collaboration by the nurse with individuals, families, communities, and other members of the health care team.

The provider role requires the nurse to conduct a client assessment at various developmental stages and to identify the client's health related problems. The nurse uses assessment data in collaboration with the client to establish nursing diagnoses, priorities, and outcomes. Based on assessment data, the nurse plans and implements safe and caring nursing interventions that promote, maintain, and restore health. The nurse in collaboration with the client evaluates the outcomes of care for effectiveness in promoting quality client-centered care.

The coordinator role requires collaborative care management. This involves the effective coordination of human, physical, financial, and technological resources to promote optimal client and organizational outcomes. It also entails effective communication between health care team members. Coordinator role responsibilities includes:

- a. evaluation of strategies and resources to initiate changes to improve nursing practice and the health care system.
- b. delegation and supervision of client care.
- c. managing communication technology to improve client-centered care outcomes.
- d. understanding the effects of population-based planning on the health care system.

Membership in the discipline of nursing requires assuming responsibility and accountability for providing holistic care based on established ANA Nursing Scope and Standards of Practice and the ANA Guide to the Code for Nurses-Interpretation and Application Statements. Responsibilities include:

- a. using management skills, cost-effective interventions, and knowledge of the political and legal system to communicate, collaborate, and negotiate with members of the health care team and consumers to improve health care.
- b. lifelong learning through continued personal and professional development to promote excellence in nursing.
- c. involvement in community service; and
- d. application of evidence-based findings to improve nursing practice.

### **Technical Nursing Education (AAS degree)**

Technical nursing education is the process by which students are introduced to the role of the Associate Degree Registered Nurse. This process is best accomplished in an institution of higher learning. Although the set of competencies expected at each level of nursing practice is different, there is a common base of interpersonal and intellectual competencies which provide the foundation of nursing practice upon which each advanced level is built. The depth and scope of the knowledge base, therefore, differentiates the levels of nursing practice. Technical nursing education builds upon the foundation of fundamental nursing knowledge and skills acquired at the level of education of the licensed practical nurse (LPN) and integrates the concepts and principles of the natural and social sciences. Technical nursing education prepares students for entry level practice in structured settings and provides a foundation for baccalaureate study. The process of technical nursing education guides the student in the acquisition of nursing knowledge, skills, attitudes, and values.

The art of nursing is the creative processes which nurses use to deliver nursing care. A major aspect of this creative process is teaching/learning. Teaching/learning is a vital skill in technical nursing education. The teaching/learning process fosters intellectual development, reflection, critical thinking, and lifelong learning. Teaching/learning principles are used for health promotion, maintenance, and restoration. Teaching/learning activities related to health promotion increases the person's awareness of health/wellness states. Through these activities the person learns of resources and develops skills to continue healthy outcomes. Therefore, the teaching/learning process fosters intellectual development, critical thinking, and lifelong learning.



**University of Arkansas at Monticello**  
**School of Nursing**  
**BSN Strands with Outcomes**

At the completion of the Bachelor of Science in Nursing (BSN) program, the graduate will be prepared to:

**STRANDS**

Critical thinking

Research

Nursing Process

Leadership

Communication

Teaching/Learning

**OUTCOMES**

1. Formulate judgments using a problem-solving process that is goal directed, ethical, and based on standards of professional nursing practice.
2. Reflect critical thinking to critique and apply research findings in nursing practice.
3. Use the nursing process to provide therapeutic nursing interventions that promote, maintain, and restore the health of a wide spectrum of individuals, families, and/or communities throughout the lifespan.
4. Apply leadership and management skills to provide cost effective quality health care, implement and support change, and serve as a client advocate in a variety of settings.
5. Communicate and collaborate with members of the health care team and consumers to provide and improve delivery of health care.
6. Educate individuals, families, and communities using teaching/learning principles that promote, maintain, and restore health.

**University of Arkansas at Monticello  
School of Nursing  
BSN Student Learning Outcomes**

The student learning outcomes for the BSN graduate include demonstration of:

- the ability to critically think using a problem-solving process that is goal directed and ethical based on standards of professional nursing practice as evidenced by average scores of  $\geq 75\%$  written examinations and passing the NCLEX-RN, the licensing examination, the first time.
- an understanding of nursing research and evidence-based nursing practice as evidenced by scores of  $\geq 75\%$  on evidenced-based practice summaries and the Nursing Research course project.
- therapeutic nursing interventions that promote, maintain, and restore the health of culturally and ethnically diverse individuals, families, and communities throughout the lifespan as evidenced by meeting clinical objectives and passing the registered nursing licensing examination (NCLEX-RN) the first time.
- the ability to apply leadership and management skills to provide cost-effective care, implement and support change, and serve as a client advocate in a variety of settings as evidenced by average scores of  $\geq 75\%$  on Leadership and Management course assignments, becoming members/officers of the Student Nurses Association, National Student Nurses Association, and Sigma Theta Tau International (STTI), if eligible.
- communication and collaboration with members of the health care team and consumers to provide and improve delivery of health care as evidenced by scores of  $\geq 75\%$  on all process recordings and presentations.
- the ability to educate individuals, families, and communities using teaching/learning principles that promote, maintain, and restore health as evidenced by scores of  $\geq 75\%$  on all teaching plans.

## **BSN Organizing Framework**

The BSN organizing framework acts as the building blocks for the curriculum. It provides a frame of reference for faculty, staff, students, preceptors, and our clinical sites to connect our curriculum to nursing practice. The framework guides the development of critical thinking, clinical observations, and interpretations.

The UAM SON BSN curriculum centers around four components: (1) person, (2) health, (3) environment, and (4) nursing practice. To understand those four components, the BSN curriculum teaches that a person is bio-psycho-social being in constant interaction with a changing environment and has an innate and acquired mechanism to adapt. Therefore, persons are viewed as living adaptive systems whose behaviors and health status are classified as adaptive or ineffective. Using this framework teaches the student how to promote an integrated level of adaptation for persons and communities that can advance wellness, the quality of life, and death with dignity. The process of adaptation is determined by four main coping processes, referred to as modes:

1. physiological-physical
2. self-concepts
3. role function
4. interdependence

Physiological-Physical Mode includes the nine basic needs:

1. Oxygenation
2. Nutrition
3. Elimination
4. Activity and rest
5. Protection
6. Fluid and Electrolytes
7. Neurological
8. Endocrine
9. Sensation

Self-Concept Mode includes the physical and personal self. This relates to the physic and spiritual integrity and the need of the person to exist with a sense of unity.

Role Function Mode includes the instrumental and expressive behaviors. This relates to the need of the person to understand the personal role played in life that impacts decision-making and how to maintain order in life.

The Interdependence Mode includes the person's relationships and interactions with others. This includes relational integrity, the feeling of security in relationships and includes interactions of giving and receiving love, respect, and value.

**University of Arkansas at Monticello  
School of Nursing  
AAS in Nursing Strands with Outcomes**

At the completion of the Associate of Applied Science (AAS) in nursing program, the graduate will be prepared to:

<b><u>STRANDS</u></b>	<b><u>OUTCOMES</u></b>
Critical thinking	1. Formulate judgments using a problem-solving process that is goal directed, ethical, and based on standards of nursing practice.
Nursing Process	2. Use the nursing process to provide therapeutic nursing interventions that promote, maintain, and restore the health of a wide spectrum of individuals, families, and communities throughout the life span.
Management	3. Apply management skills to provide cost effective quality health care, support change, and serve as a client advocate.
Communication	4. Communicate and collaborate with members of the health care team and consumers to provide and improve delivery of health care.
Teaching/Learning	5. Educate individuals, families, and families in communities using teaching/learning principles that promote, maintain, and restore health.

**University of Arkansas at Monticello  
School of Nursing  
AAS in Nursing Student Learning Outcomes**

The student learning outcomes for the AAS in Nursing graduate include demonstration of:

- the ability to critically think using a problem-solving process that is goal directed and ethical based on standards of nursing practice as evidenced by average scores of  $\geq 75\%$  on written examinations and meeting clinical objectives;
- therapeutic nursing interventions that promote, maintain, and restore the health of culturally and ethnically diverse individuals, families, and families in communities throughout the lifespan as evidenced by meeting clinical objectives and passing the licensing examination (NCLEX-RN) the first time;
- the ability to apply management skills to provide cost-effective care, implement and support change, and serve as a client advocate as evidenced by average scores of  $\geq 75\%$  on delegation examination items and management journals;
- communication and collaboration with members of the health care team to provide and improve delivery of health care as evidenced by average scores of  $\geq 75\%$  on all process recordings and presentations; and
- the ability to educate individuals, families, and families in communities using teaching/learning principles that promote, maintain, and restore health as evidenced by scores of  $\geq 75\%$  on all teaching plans.

## **AAS Organizing Framework**

The AAS organizing framework acts as the building blocks for the curriculum. It provides a frame of reference for faculty, staff, students, preceptors, and our clinical sites to connect our curriculum to nursing practice. The framework guides the development of critical thinking, clinical observations, and interpretations.

The UAM SON AAS in nursing curriculum centers around four components: (1) person, (2) health, (3) environment, and (4) nursing practice. To understand those four components, the AAS curriculum teaches that a person is bio-psycho-social being in constant interaction with a changing environment and has an innate and acquired mechanism to adapt. Therefore, persons are viewed as living adaptive systems whose behaviors and health status are classified as adaptive or ineffective. Using this framework teaches the student how to promote an integrated level of adaptation for persons and communities that can advance wellness, the quality of life, and death with dignity. The process of adaptation is determined by four main coping processes, referred to as modes: (1) physiological-physical, (2) self-concepts, (3) role function, and (4) interdependence.

Physiological-Physical Mode includes the nine basic needs:

1. Oxygenation
2. Nutrition
3. Elimination
4. Activity and rest
5. Protection
6. Fluid and Electrolytes
7. Neurological
8. Endocrine
9. Sensation

Self-Concept Mode includes the physical and personal self. This relates to the physic and spiritual integrity and the need of the person to exist with a sense of unity.

Role Function Mode includes the instrumental and expressive behaviors. This relates to the need of the person to understand the personal role played in life that impacts decision-making and how to maintain order in life.

The Interdependence Mode includes the person's relationships and interactions with others. This includes relational integrity, the feeling of security in relationships and includes interactions of giving and receiving love, respect, and value.

**NAM/QSEN, BSN Program SLO and AACN BSN Essentials Congruency Table**

<b>Program Outcomes</b>	<b>Baccalaureate Program SLO</b> The SLOs for the SON BSN graduate include demonstration of:	<b>AACN BSN Essentials</b>	<b>NAM/QSEN Core Competencies</b>
<b>Critical thinking:</b> Formulate judgments using a problem solving process that is goal directed, ethical, and based on standards of professional nursing practice.	the ability to critically think using a problem solving process that is goal directed and ethical based on standards of professional nursing practice as evidenced by average scores of $\geq 75\%$ written examinations and passing the NCLEX-RN, the licensing examination, the first time.	Essential IX: Baccalaureate Generalist Nursing Practice. The baccalaureate nurse is prepared to practice with clients including individuals, families, groups, communities and populations across the lifespan and across the continuum of healthier environments. The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for clients.  Essential I: Liberal education for Baccalaureate Generalist Nursing Practice. A solid base in liberal education provides the cornerstone for the practice and education of nurses.	Evidenced-Based Practice (EBP): Integrate best current evidence with clinical expertise and client/family preferences and values for delivery of optimal health care.  Safety: Minimizes risk of harm to clients and providers through both system effectiveness and individual performance.
<b>Research:</b> Reflect critical thinking to critique and apply research findings in nursing practice.	an understanding of nursing research and evidence-based nursing practice as evidenced by scores of $\geq 75\%$ on evidenced-based practice summaries and the Nursing Research course project;	Essential III: Scholarship for Evidenced Based Practice. Professional nursing practice is grounded in the translation of current evidence into one's practice	EBP: Integrate best current evidence with clinical expertise and client/family preferences and values for delivery of optimal health care.  Safety: Minimizes risk of harm to clients and providers through both system effectiveness and individual performance.
<b>Nursing Process:</b> Use the nursing process to provide therapeutic nursing interventions that promote, maintain, and restore the health of culturally and ethnically	therapeutic nursing interventions that promote, maintain, and restore the health of culturally and ethnically diverse individuals, families, and communities throughout the lifespan as	Essential IX: Baccalaureate Generalist Nursing Practice. The baccalaureate nurse is prepared to practice with clients including individuals, families, groups, communities and populations across the lifespan and across the continuum of healthier environments. The baccalaureate	Patient-Centered Care: Recognize the client or designee as the source of control and full partner in providing compassionate and coordinated care based on

diverse individuals, families, and/or communities throughout the lifespan.	evidenced by average scores of $\geq 75\%$ on all clinical assignments and passing the registered nursing licensing examination (NCLEX-RN) the first time;	graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for clients.  Essential I: Liberal education for Baccalaureate Generalist Nursing Practice. A solid base in liberal education provides the cornerstone for the practice and education of nurses.	respect for client's preferences, values and needs.  Safety: Minimized the risk of harm to patients and providers through both system effectiveness and individual performance.
<b>Leadership:</b> Apply leadership and management skills to provide cost effective quality health care, implement and support change, and serve as a client advocate in a variety of settings.	the ability to apply leadership and management skills to provide cost-effective care, implement and support change, and serve as a client advocate in a variety of settings as evidenced by average scores of $\geq 75\%$ on Leadership and Management course assignments, becoming members/officers of the Student Nurses Association, National Student Nurses Association, and Sigma Theta Tau International (if eligible);	Essential II: Basic Organizational and Systems Leadership For Quality Care and Client Safety.  Knowledge and skills in leadership, quality improvement, and client safety are necessary to provide high quality health care.	Quality Improvement: Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.  Safety: Minimize risk of harm to patients and providers through both system effectiveness and individual performance.
<b>Communication:</b> Communicate and collaborate with members of the health care team and consumers to provide and improve delivery of health care.	communication and collaboration with members of the health care team and consumers to provide and improve delivery of health care as evidenced by scores of $\geq 75\%$ on all process recordings and presentations	Essential VI: Inter-professional Communication and Collaboration for Improving Client Health Outcomes Communication and collaboration among healthcare professional are critical to delivering high quality and safe client care.  Essential I: Liberal education for Baccalaureate Generalist Nursing Practice. A solid base in liberal education provides the cornerstone for the practice and education of nurses.	Teamwork and Collaboration: Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.
<b>Teaching/Learning:</b>	the ability to educate individuals,	Essential VII: Clinical Prevention and	Teamwork and Collaboration:



Educate individuals, families, and communities using teaching/learning principles that promote, maintain, and restore health.	families, and communities using teaching/learning principles that promote, maintain, and restore health as evidenced by scores of $\geq 75\%$ on all teaching plans.	<p>Population Health</p> <p>Health promotion, disease, and injury prevention across the lifespan are essential elements of baccalaureate nursing practice at individual and population levels.</p> <p>The baccalaureate program prepares the graduate to use information and communication technologies in preventive care.</p>	Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.
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Domain: Social Determinants of Health (SDOH) SON measures SDOH in each course.

Reviewed and approved 03/14/25

**NAM/QSEN and AAS Program SLO Congruency Table**

Program Outcomes	Associate Program SLO The student learning outcomes for the SON AAS graduate include demonstration of:	NAM/QSEN Core Competencies
<b>Critical thinking</b> Formulate judgments using a problem-solving process that is goal directed, ethical, and based on standards of professional nursing practice.	the ability to critically think using a problem-solving process that is goal directed and ethical based on standards of professional nursing practice as evidenced by average scores of $\geq 75\%$ written examinations and passing the NCLEX-RN, the licensing examination, the first time;	Evidenced-Based Practice: Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.  Safety: Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.
<b>Nursing Process</b> Use the nursing process to provide therapeutic nursing interventions that promote, maintain, and restore the health of culturally and ethnically diverse individuals, families, and/or communities throughout the lifespan.	therapeutic nursing interventions that promote, maintain, and restore the health of culturally and ethnically diverse individuals, families, and communities throughout the lifespan as evidenced by average scores of $\geq 75\%$ on all clinical assignments and passing the registered nursing licensing examination (NCLEX-RN) the first time;	Patient-Centered Care: Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values and needs.  Safety: Minimized the risk of harm to patients and providers through both system effectiveness and individual performance.
<b>Management</b> Apply management skills to provide cost effective quality health care, implement and support change, and serve as a client advocate in a variety of settings.	the ability to apply management skills to provide cost-effective care, implement and support change, and serve as a client advocate in a variety of settings as evidenced by average scores of $\geq 75\%$ on Management Journal, becoming members/officers of the Student Nurses Association, National Student Nurses Association.	Quality Improvement: Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.  Safety: Minimize risk of harm to patients and providers through both system effectiveness and individual performance.
<b>Communication</b> Communicate and collaborate with members of the health care team and consumers to provide and improve delivery of health care.	communication and collaboration with members of the health care team and consumers to provide and improve delivery of health care as evidenced by scores of $\geq 75\%$ on all process recordings and presentations.	Teamwork and Collaboration: Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.

<b>Teaching/Learning</b> Educate individuals, families, and communities using teaching/learning principles that promote, maintain, and restore health.	The ability to educate individuals, families, and communities using teaching/learning principles that promote, maintain, and restore health as evidenced by scores of $\geq 75\%$ on all teaching plans.	Teamwork and Collaboration: Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.
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Domain: Social Determinants of Health (SDOH) SON measures SDOH in each course.

Reviewed and approved 03/14/25

## NLN Competencies for Graduates

Reviewed: 03/14/25	AAS	BSN	Evaluated in:
Graduates should be prepared to:			
promote and enhance <i>Human Flourishing</i> for clients, families, communities, and themselves	Advocate for clients and families in ways that promote their self-determination, integrity, and ongoing growth as human beings	Incorporate the knowledge and skills learned in didactic and clinical courses to help clients, families and communities continually progress toward fulfillment of human capacities	Process Recordings, Teaching Plans, NCPs, Skill Check-offs, or Journals  AAS: Clinical courses BSN: Clinical/lab courses and Population Health
show sound <i>Nursing Judgement</i>	Make judgements in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care and promote the health of clients within a family and community context.	Make judgements in practice, substantiated with evidence, that synthesize nursing science and knowledge from other disciplines in the provision of safe, quality care and promote the health of clients, families, and communities.	NCP's, CET, EBPS, Course Exams, or Skill Check-offs  AAS: all courses BSN: all courses
continually develop their <i>Professional Identity</i>	Implement one's role as a nurse in ways that reflect integrity, reasonability, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, care, advocacy, and safe, quality care for diverse clients within a family and community context.	Express one's identity as a nurse through actions that reflect integrity; a commitment to evidence-based practice, caring, advocacy, and safe, quality care for diverse clients, families, and communities; and a willingness to provide leadership in improving care	Presentations, Professional Papers, SNA, attending the ASBN discipline hearings, EBPS, Journals, Course Clinical or Practicum Experiences  AAS: Clinical courses BSN: Clinical courses and Leadership and Management and Capstone
maintain a <i>Spirit of Inquiry</i> as they move into the world of nursing practice, and beyond	Examine the evidence that underlies clinical nursing practice to challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for clients, families, and communities.	Act as an evolving scholar who contributes to the development of the science of nursing practice by identifying questions in need of study, critiquing published research, and using available evidence as a foundation to propose creative, innovative, or evidence-based solutions to clinical practice problems.	EBPS, Course Clinical and Practicum Experiences, or NCPs  AAS: Clinical courses BSN: Clinical courses, Informatics, Leadership and Management, Research, and Capstone

## ANA Code of Ethics for Program Competencies

Reviewed: 03/14/25	AAS Evaluation	BSN Evaluation
<b>Fundamental Values and Nurse Commitments</b>		
The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.	Course Clinical	Course Clinical and Practicum Experiences
The nurse's primary commitment is to the client, whether an individual, family, group or community.	Course Clinical	Course Clinical and Practicum Experiences
The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the client.	Course Clinical	Course Clinical and Practicum Experiences
<b>Boundaries of Duty and Loyalty</b>		
The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum client care.	Course Clinical, NCPs	Course Clinical and Practicum Experiences and NCPs
The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.	Course Clinical, NCPs, SNA, Professional Presentations and Written Papers	Course Clinical and Practicum Experiences, NCPs, SNA, Professional Presentations and Written Papers
The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.	Course Clinical, NCPs	Course Clinical and Practicum Experiences and NCPs
<b>Aspects of Duties Beyond Individual Client Encounters</b>		
The nurse participates in the advancement of the profession through contributions to practice, educate, administration, and knowledge development.	Course Clinical, NCPs, EBPS, SNA	Course Clinical, NCPs, EBPS, SNA, Leadership Practicum Experiences and Capstone practicum experiences
The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.	Course Clinical, NCPs, Teaching Plans, Process Recordings	Course Clinical, NCPs, Teaching Plans, Process Recordings
The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.	Course Clinical, SNA, ASBN Discipline Hearings	Course Clinical, SNA, ASBN Discipline Hearings

## ANA Scope of Standards and Practice

Reviewed: 03/14/25	AAS Evaluation	BSN Evaluation
<b>These standards describe a competent level of nursing practice demonstrated by the critical thinking model known as the nursing process; its six components correspond to these standards.</b>		
Standard 1. Assessment The RN collects pertinent data and information relative to the healthcare consumer's health or the situation	Course Clinical, NCPs, Teaching Plans	Teaching Plans, Course Clinical and Practicum Experiences, NCPs, and Journals
Standard 2. Diagnosis The RN analyzes the assessment data to determine actual or potential diagnoses, problems, and issues	Course Clinical, NCPs, Teaching Plans	Teaching Plans, Course Clinical and Practicum Experiences, NCPs, and Journals
Standard 3. Outcomes Identification The RN identifies expected outcomes for a plan individualized to the healthcare consumer or the situation	Course Clinical, NCPs, Teaching Plans	Teaching Plans, Course Clinical and Practicum Experiences, NCPs, and Journals
Standard 4. Planning The RN develops a plan that prescribes strategies to attain expected, measurable outcomes	Course Clinical, NCPs, Teaching Plans	Teaching Plans, Course Clinical and Practicum Experiences, NCPs, and Journals
Standard 5. Implementation The RN implements the identified plan	Course Clinical, NCPs, Teaching Plans	Teaching Plans, Course Clinical and Practicum Experiences, NCPs, and Journals
Standard 5A. Coordination of Care The RN coordinates care delivery	Course Clinical, NCPs, Journals	Teaching Plans, Course Clinical and Practicum Experiences, NCPs, and Journals
Standard 5B. Health Teaching and Health Promotion The RN employs strategies to promote health and a safe environment	Course Clinical, NCPs, Teaching Plans	Teaching Plans, Course Clinical and Practicum Experiences, NCPs, and Journals
Standard 6. Evaluation The RN evaluates progress toward attainment of goals and outcomes.	Course Clinical, NCPs, Teaching Plans	Teaching Plans, Course Clinical and Practicum Experiences, NCPs, and Journals

## ANA Standards of Professional Performance

Reviewed: 03/14/25	AAS Evaluation	BSN Evaluation
<b>These standards describe a competent level of nursing practice demonstrated by the critical thinking model known as the nursing process; its six components correspond to these standards.</b>		
Standard 7. Ethics The RN practices ethically	Course Clinical and Journals	Course Clinical and Practicums and Journals
Standard 8. Culturally Congruent Practice The RN practices in a manner that is congruent with cultural diversity and inclusion principles	Course Clinical and Journals	Course Clinical and Practicums and Journals
Standard 9. Communication The RN communicates effectively in all areas of practice	Course Clinical, Professional Papers and Presentations, Teaching Plans, and Process Recordings	Course Clinical and Practicums, Journals, Professional Presentations, Teaching Plans, and Process Recordings
Standard 10. Collaboration The RN collaborates with healthcare consumer and other key stakeholders in the conduct of nursing practice	Course Clinical, NCPs, and Journals	Course Clinical and Practicums and Journals
Standard 11. Leadership The RN leads within the professional practice setting and the profession	Course Clinical	Course Clinical and Practicums and Journals
Standard 12. Education The RN seeks knowledge and competence that reflects current nursing practice and promotes futuristic thinking	Course Clinical, Teaching Plans, and EBPS	Course Clinical and Practicums , Teaching Plans, and EBPS
Standard 13. Evidence-based Practice and Research The RN integrates evidence and research findings into practice	Course Clinical, NCPs, and EBPS	Course Clinical and Practicums, NCPs, and EBPS
Standard 14. Quality of Practice The RN contributes to quality nursing practice	Course Clinical, NCPs, and Teaching Plans	Course Clinical and Practicums, NCPS, and Teaching Plans
Standard 15. Professional Practice Evaluation The RN evaluates one's own and others' nursing practice	Course Clinical and Course Group Work	Course Clinical and Practicums and Course Group Work
Standard 16. Resource Utilization The RN utilizes appropriate resources to plan, provide, and sustain evidence-based nursing services that are safe, effective, and fiscally responsible.	Course Clinical, Teaching Plans, and EBPS	Course Clinical and Practicums, Teaching Plans, and EBPS
Standard 17. Environmental Health The RN practices in an environmentally safe and health manner	Course Clinical	Course Clinical and Practicums

## Definitions

Acquired coping mechanisms – deliberate responses that are developed throughout the lifespan.

Adaptive modes – related to the way human systems respond to stimuli from the environment. Reflect coping activities that can be observed in one of four categories, or modes.

Adaptive responses – behaviors that promote need integrity and adaptation goals.

Caring – encompasses the nurse's empathy for, connection with, and provision of therapeutic interventions for the client.

Client – the receiver of nursing care (formerly called "patient").

Client-Centered Care – nursing care provided to a wide spectrum of individuals, families, and communities that addresses specific needs and includes awareness of important issues and concerns of the individual, family, and/or community.

Collaborative – one that is carried out in collaboration with other health team members (e.g., physical therapists, physicians).

Community – a group bound by similar needs, goals, culture, and/or geographic location.

Consumers – users of health care services and persons active in improving the rights and power of health care services buyers.

Contributive behaviors – giving love, respect, and value toward other persons.

Critical thinking – using an analytic problem-solving process to make judgments that are goal directed, ethical, and based on standards of professional nursing practice.

Cultural Awareness – many different cultures co-existing within one larger culture. Cultural diversity considers language, religion, race, sexual orientation, gender, age, and ethnicity.

Dependent Interventions – one that is prescribed by a physician or advanced practice nurse but carried out by the nurse.

Development – the sequential acquisition of growth.

Environment – the constantly changing milieu in which internal and external stimuli exist within and around the person, affecting development and stimulating responses through coping mechanisms.

Evidence-based practice – the use of current best evidence in making decisions about the care of clients, the planning and implementation of health services, and the development of health policy.



Expressive behaviors – feelings and attitudes toward other persons.

External stimuli – system input from the environment that elicits an adaptive or ineffective response.

Family – a group of individuals bound by common and unique needs.

Formal complaints - an official complaint made directly by a student. The complaint should be in writing (document or email), by the student or Dean, and include the student's name.

Generalist – a professional nurse prepared to care for individuals, families, and communities in a variety of settings.

Genomics – how a gene is expressed within a person or family.

Good Standing – student departure from the program is voluntarily and/or departure does not affect eligibility for readmission, and that the student is eligible to register for classes in the upcoming semester. If a student does not progress through courses due to failure, but is eligible for readmission into the program, the student is in good standing. If a student is dismissed for cheating, behavioral concerns, or other policy violations, the student is noted to not be in good standing.

Health – a continuum that is influenced by the person's adaptive responses that may promote goal adaptation and need integrity.

Health care team – an interdisciplinary group including the client, health professionals, and members of other disciplines.

Holistic – the individual, family, and community viewed from a physiological, psychological, social, cultural, and spiritual perspective.

Independent Interventions – one that registered nurses are accountable for and are licensed to prescribe, perform, or delegate based on their knowledge or skills.

Ineffective responses – behaviors that do not promote need integrity and goals of adaptation.

Informal complaints: student complaints that are anonymous or complaints that are verbalized by other students concerning the matter (hearsay).

Innate coping mechanisms – automatic responses that are genetically determined.

Instrumental behaviors – goal-oriented actions.

Intellectual inquiry – the examination and development of new ideas or new ways to examine

previously accepted ideas.

Internal stimuli – system input that originates within self.

Lifelong learning – the perpetual acquisition of knowledge, skills, attitudes, values, and beliefs.

Maintain – therapeutic nursing interventions intended to prevent further deterioration in health by treating human responses to chronic disease or injury.

Near-miss – an adverse event that was caught by a licensed professional before care was given and could have been harmful or fatal to the client or student.

Need integrity – achievement of the goals of adaptation.

Nurturing – caring behaviors that influence development and adaptation.

Negotiation – intervention to advocate in the client's interest to obtain improved outcomes.

Outcomes of care – evaluation of the results of nursing care.

Population-based planning – identification of the current and future health care resources required to meet the needs of a target population.

Personal self – appraisal of one's worth.

Physical self – appraisal of one's physical being.

Professional Nurse – a baccalaureate nurse generalist prepared to care for individuals, families, and communities in a variety of settings.

Promote – therapeutic nursing interventions directed to prevent pathological changes.

Receptive behaviors – receiving love, respect, and value in relationships.

Restore – action directed toward therapeutic nursing interventions implemented to limit the progression of disease or disability and restore the client to optimal health.

Risk reduction behaviors – measures initiated by the person to promote adaptation and integrity.

Scholarship – the disciplined pursuit of understanding phenomena, through critical thought processes, to enrich understanding relevant to improvement of the well-being of a person throughout the lifespan.

Service Learning – an educational method that combines academic coursework with community service to help students learn community needs and develop civic responsibility.

Spirituality – the search for meaningful answers to questions about life, illness, and death through relationships with self, others and a supreme being.

Survival – the process of meeting basic needs to sustain life.

Technical Nurse – nurse prepared to care for individuals, families, and families in communities in structured settings

**University of Arkansas at Monticello  
School of Nursing  
Teaching/Learning Principles**

The teacher and learner facilitate learning by using various strategies based upon the following Teaching/Learning principles for the BSN and AAS programs:

1. If learners know what they are expected to learn, they will learn more efficiently.
2. Learners should be given frequent reinforcement for exhibiting desired behaviors, attitudes, and skills, thus enhancing progress.
3. Learned skills or bits of knowledge repeated often will be remembered longer.
4. Active participation enhances learning.
5. Practicing what is learned in a variety of situations facilitates the transfer of learning to new situations.
6. Learning built on previous knowledge and experience is more meaningful and occurs at a faster rate.
7. A moderate amount of anxiety is essential for learning to occur but high levels of anxiety hamper learning.
8. Individuals must be motivated to learn. Learning is a strong motivator for some, whereas others need more tangible external reinforcement.
9. Varying teaching techniques enhances learning and facilitates achievement of objectives.
10. Learners learn at different rates.
11. Learners are motivated when they are interested; can see the end of the learning process; can recognize the material is related to a realistic goal; and are convinced they can reach the goal.

### **Disclaimer**

Care has been taken to ensure that the information contained within this handbook is accurate and complete at the time of distribution; however, due to constraining events and/or circumstances which may necessitate change, the SON faculty reserve the right to amend any information contained within this handbook. Students will be informed in a timely manner of any changes made and must acknowledge changes made by resigning a student handbook agreement, which is kept on file in each student's folder.

### **Students with Disabilities**

It is the policy of UAM to accommodate individuals with disabilities pursuant to federal law and the University's commitment to equal educational opportunities. It is the responsibility of the student to inform the instructor of any necessary accommodation at the beginning of the course. Any student requiring accommodations should contact the Office of Special Student Services located the Student Success Center, room 101G; phone 870-460-1226; Fax: (870) 460-1926; TDD: (870) 460-1626.

### **Service Animals**

The SON is committed to assisting in the care and well-being of our nursing students at all points of their education careers. This includes providing a safe environment for all members of the SON. All students in the SON are required and expected to meet all health and safety regulations as directed by law, the university, and health agencies in which our students attend. The SON oversees the collection, monitoring, and reporting of compliance-related items to our clinical agencies.

Under the American Disability Act (ADA), a service animal is defined as animal that has been trained to perform tasks or do work for the benefit of a person with a disability. Any other wild or domestic animals, whether trained or untrained, are not considered service animals under federal law. The task or work of the animal must be related to the person's disability. Neither the ADA nor Arkansas service animal law includes comfort animals. Students with a registered service animal may bring their animal into any public accommodation. That student is responsible for any damage the animal causes. The ADA allows any public accommodation to exclude the service animal if it poses a direct threat to the health and safety of others, becomes aggressive, is not housebroken, or the animal is not under control. Students with a service animal must register with the UAM Student Disability Office for approval. Attendance at clinical facilities requires coordination with facility guidelines. The student must complete program requirements successfully to progress in the nursing program.

### **Academic Advisors and Advisement**

Academic advisors are faculty within the SON who assist students in planning their educational program. It is the student's responsibility to meet with his or her advisor at least once each semester to establish that the student is progressing toward meeting the requirements for the nursing program.

### **Advisor Appointments/Office Hours**

The academic advisor is available during regularly scheduled office hours to meet with students. Office hours are posted on each faculty member's door and in each course syllabus. Students desiring an advising appointment are expected to schedule an appointment if possible. Advisors will see students without an appointment during office hours if time is available.

### **Preregistration from Advisors/Dean of Nursing**

Preregistration periods for the University are documented on the University Calendar. Following successful completion of current course work, students who have been accepted into a SON program will automatically be enrolled in nursing coursework during preregistration for the upcoming semester by the dean of the SON or designated advisor. Students do not need to make an appointment to see their advisor for registration for nursing courses.

### **Academic Advisement Report**

Students must file an official academic advisement report following completion of 70 hours and prior to the completion of 90 hours. The report becomes official when the student, advisor, dean, and registrar sign it. This process is designed to assist the student in obtaining a degree. Lack of knowledge or incorrect interpretation of university policies and regulations does not remove the obligation to satisfy all requirements for a degree. The student bears the ultimate responsibility for completing a degree program.

### **Academic Conduct**

The UAM guidelines describing penalties for academic misconduct will be followed.

### **Technology**

Classroom/meeting technology may be used in the SON for organizational meetings or class times under special circumstances. For example, students may be given permission by faculty to connect to class by ZOOM, Microsoft Teams, Blackboard Collaborate, etc. in the event of illness. Students are not permitted to connect due to other reasons such as transportation issues or appointments (including medical appointments) unless prior approval from the course coordinator is obtained.

If classes cannot meet on campus (ex: inclement weather), faculty will inform students of the plan of how course activities will continue. This may include connecting by technology-

Students that connect to class by technology should follow the following etiquette guidelines.

### **Technology Etiquette Guidelines**

The following are general guidelines when using connecting remotely:

- Students should ensure that they have a webcam and a reliable internet connection.

- Students must be logged into the link five minutes before class is scheduled to begin. If you must leave the classroom early, you need to notify one of the faculty by email. Please do not ‘leave the meeting’ before class has ended.
- Attendance will be taken at the beginning of class. Faculty must see your face for attendance.
- Classroom etiquette rules apply while in the “electronic” classroom (on campus or remotely).
- All students should have their audio muted during lecture to minimize background noise.
- Cell phones should be silent and no texting or web surfing during class.
- Background noise should be minimized (ex: pets).
- Unless permission has been granted by faculty (ex: illness) if a student connects electronically, their web cam should be on with their face visible on the screen at all times.
- Students connecting electronically should avoid activities that could be distracting to the instructor or other participants.
- No smoking, vaping, or drinking alcohol while in the “electronic” classroom.
- Students connected by technology are reminded to:
  - Be mindful that when using the webcam, everyone can see everyone else. Proper attire will be expected.
  - Every attempt should be made to secure daycare or sitter arrangements for children.
  - Ensure that pets are fed/walked, and family knows that they are ‘in class.’

Electronic Classroom Connection will NOT CONDUCT the following classroom activities:

- Exam reviews
- End-of-course reviews
- Most workshops (EKG workshop/ABG workshop/IV workshops)
- Skills validation/check offs
- Collaborative exams
- Clinical activities
- Exams (may be allowed by faculty under special circumstances or course specific)

### **Artificial Intelligence (AI)**

Artificial Intelligence (AI): Any use of AI for class/clinical work that is not the creation of the student is considered in violation of UAM’s Academic Integrity policy, and appropriate consequences will follow. If you are ever unsure whether the task allows AI, ask, rather than risking it.

### **At Risk Students**

An “At-Risk Student” is defined as a nursing student enrolled in the undergraduate nursing degree curriculum sequence who has a pattern of:

- academic failure (or risk) as evidence by failing (or near failing) examination grade.
- risk of clinical failure as evidenced by not meeting clinical objectives
- personal issues that disrupt the learning process.
- financial burdens.

An at-risk student is in danger of academic failure, NCLEX-RN failure, withdrawing from the nursing program, and/or any student with an average grade of less than 75% after two exams or at midterm in any nursing course. A student making unsatisfactory progress in a clinical rotation is also considered at-risk for failure. Senior nursing students in jeopardy of failing NCLEX-RN, as evidenced by consistent minimal passing grades, are also considered at-risk students.

At-risk students will be referred to the appropriate campus resources, as necessary. Available resources include:

1. Career Services and Learning Support Services – General education tutors, workshops on notetaking, test-taking skills, time management, and stress management.
2. Writing Center – Writing skills, grammar, and spelling.
3. Scholarship Office – Nursing scholarships are available and may be requested through the scholarship office in Harris Hall room 307.
4. Campus Nurse (located in the UAM Risher Wellness Center) – For health problems and referrals.
5. Health Wellness Center (located in the UAM Risher Wellness Center) – For active stress management.

The Course Coordinator will counsel at-risk students and explore strategies for improving chances for academic success. After failing a second unit examination, the student must meet with the SON dean for counseling. The student, faculty, and/or dean are expected to cooperatively develop and agree upon a plan for academic success using the Student Improvement Plan form. The student is expected to adhere to the plan. Counseling records will be maintained for all conferences.

### **At-Risk Student Policy**

Function: To assist at-risk students to develop and engage in strategies to promote successful progression through the nursing program.

Process for at-risk students: The student holds the responsibility to resolve the cited deficiencies to meet their course learning outcomes. The following process will be followed for at-risk students:

1. After failure of one examination, the student will meet with the Course Coordinator and complete a Student Performance Improvement Plan. A Counseling Record will be placed in the student's file.
2. After failure of the second examination, the student will be referred to the dean. Additional Counseling Records will be completed and placed in the students' file.
3. Students who are readmitted to the nursing sequence will meet with the Course Coordinator to complete a Student Performance Improvement Plan. A plan will be placed in the student's file.
4. Students with unsafe, near-miss, and/or unsatisfactory performance in the clinical setting will meet with the clinical instructor to develop a plan of improvement before the next



clinical week. A Counseling Record and the Student Performance Improvement Plan will be placed in the student's file.

5. Students with academic, personal and/or financial issues disrupting the learning process will be referred to UBIT or issued an Academic Alert.

### **Estimated Expenses Incurred During Nursing School**

In addition to standard university student fees and expenses, there will be costs specific to the nursing school programs. These include but are not limited to the expenses listed below. Use of multiple clinical sites within a hundred-mile radius of the campus requires reliable transportation and may require overnight travel. BSN and AAS in Nursing students may have clinical rotations in distant locations from the university throughout the program. Expenses related to clinical rotations are the responsibility of each student. The university does not provide transportation, childcare, or monetary reimbursement for clinical or nursing school related activities.

### **Required Estimated Expenses**

The following estimates reflect anticipated expenses for SON students:

- Criminal Background Check - \$52.00
- Immunization tracking - \$35.00
- Drug Screening – \$50.00
- TB Skin Test - \$15.00
- BSN Skills Bag - \$ prices may fluctuate
- Uniform (1) -\$220.00 (estimate) one uniform with lab coat, patch/emblem, and plain white shoes
- Stethoscope/Lab/Clinical Equipment/Orientation *Prices Vary*  
[orientation fees, bandage scissors, watch with a sweep second hand, penlight, retractable tape measure (cm/inch), blood pressure cuff, 2 black ball point ink pens and small pocket notebook]
- CPR Certification \$50.00
- Lockdown Respondus - \$15.00
- Textbooks  
\$2200.00 – \$2600.00 (BSN program - estimate)  
\$1800.00 - \$2000.00 (AAS in Nursing program - estimate)  
\$900.00 - \$1100.00 (RN to BSN program - estimate)
- NCLEX-RN Review Course - paid through student fees divided over semesters enrolled
- Student Nurse Association (SNA) dues through the National Student Nurse Association  
New Member - \$37.00  
Renewal - \$40.00  
2 years – \$70.00
- Arkansas Student Nurse Association Fall Convention Registration - \$90.00
- Influenza Vaccine (Yearly) – prices vary

- Hotel expenses (should students choose to stay overnight for clinical and/or required learning activities) - \$110/night. Clinical sites include rotations to facilities outside of Monticello and include Crossett, Hamburg, Lake Village, Warren, Fordyce, Dumas, McGehee, Dermont, Star City, Pine Bluff, Little Rock, and North Little Rock. Other learning activities may include other cities.

### ***For Graduating Seniors***

(estimates)

NCLEX-RN Application Fee	\$200
ASBN NCLEX Application Fee	\$100
ASBN Temporary License Fee	\$30
Criminal Background Check	\$varies
Graduation Pictures	\$50 (estimate: sitting fee and personal 11x17 composite)
UAM Nursing Pin	\$40.95 – \$230.00 (depending on choice of style)
New Uniform (1)	\$40.00 – \$50.00 (if needed)

NOTE: Other expenses may be incurred for graduation that are not specific to the nursing program and may include but are not limited to graduation fees, graduation invitations, and graduation rings. The SON makes every effort to reflect correct prices, but prices may fluctuate without the school's knowledge.

### ***Optional Expenses***

Hunter Green warm-up jacket or Black long-sleeved underscrub shirt - \$28 - \$50

### **School of Nursing Telephone and Printer Use**

The SON Administrative Assistant works diligently to support student needs while completing necessary tasks for the dean and faculty. The SON asks that the student remain client when requesting assistance and display time management skills designed to meet required deadlines. The administrative assistant arranges appointments with the SON faculty, receives and dates time sensitive course documents, maintains student files, and assists with the procurement of Computer Assisted Instruction and nursing videos. Students are not allowed beyond in the faculty workroom. Students are not to use the SON printer in the SON office or ask to make copies. Printers for student use are located in the UAM Library.

Students are not routinely allowed to use the SON phone for personal calls. Students wishing to contact faculty may call the SON Office at 870-460-1069. If unable to reach a particular faculty member, students should leave a message with the SON administrative assistant or faculty voicemail. During clinical rotations, faculty must be contacted one hour prior to the start of clinical using phone numbers found in the course syllabus.

### **Bookstore**

The University bookstore sells all required textbooks, uniforms, skills equipment, and other

supplies needed for nursing. In addition, the bookstore provides other merchandise based on student, faculty, and staff needs, such as: Scantron forms, computer accessories, UAM T-shirts, fraternity, and sorority supplies, UAM logo items, cards, posters, gifts, snacks, and many other items.

### **Computer Services**

Computer laboratories are in the SON, Sorrells Hall room 105, the Library and Technology Center, Student Success Center, and various other sites on the UAM campus. A list of available computer software is on file in the SON Administrative Specialist's office. Computer programs are available to students to improve their understanding of nursing concepts. Programs are also available to assist students with NCLEX-RN review. Computers may also be used for word processing, accessing e-mail, and the internet. Students are required to obtain a UAM e-mail address from information technology services. Students are responsible for regularly checking their UAM e-mail.

### **Financial Aid Resources**

Financial aid is available to UAM students from a wide variety of sources. Applications for nursing scholarships are available on the SON webpage. Any student seeking additional information about financial assistance should contact the Financial Aid Office, which is located on the second floor of Harris Hall, telephone 870-460-1050. Scholarship recipients are posted on the scholarship board in Sorrell's Hall.

### **Library**

The UAM Library is centrally located on campus and affords a quiet and comfortable environment for study and research. There is a wide range of nursing literature to assist students in increasing their knowledge of various nursing topics and issues. Faculty will, in some courses, place books and articles on reserve to be read throughout the semester. These articles are not to be taken from the library. Students are encouraged to become familiar with the Cumulative Index to Nursing and Allied Health Literature (CINAHL), Health Source: Nursing Academic Edition, Medline, Science Direct, and PubMed databases.

### **Skills/Simulation Laboratory Guidelines**

The Nursing Skills/Simulation Laboratory is located on the second floor in Sorrells Hall, room 214. The Simulation Handbook is stored on the SON website under "Simulation" and will be reviewed with students during simulation orientation and as the handbook is updated. Students are encouraged to use these facilities for the practice of required nursing skills. Life-sized, anatomically correct manikins, supplies, and equipment are available. To maintain a professional and functional simulation lab, students must adhere to the policies and procedures set forth. Students are not allowed to have any food or beverages in the simulation area. When using the skills lab for practice, students must sign in and out by indicating actual time in, time out, and skills to be practiced followed by initials. The signature will be kept in the SON administrative assistant's office. Students will be required to leave student ID and/or vehicle keys when signing in. Upon signing out, the student ID/vehicle keys will be returned to the student. For additional

policies and guidelines, see the simulation handbook.

### **Audio-Visual/CAI Check out Procedure**

The SON maintains a library of technology and video resources. Video resources are to be checked- out with the SON Administrative Specialist. The student checking out the material will leave an ID (driver's license or UAM ID) with the Administrative Specialist until he or she returns the material. Only single copies of videos are available, so group viewing is encouraged. The student who checks out the material is held responsible for its care and return. All materials released to students are to be used in Sorrells Hall.

### **Parking Regulations**

Any student who drives a motor vehicle on campus must have the vehicle registered with the Public Safety Office. Campus traffic regulations forbid students from parking in areas reserved for faculty, visitors, or disabled individuals.

### **Security**

The Office of Public Safety (campus security) helps provide an environment conducive to the students' educational pursuits. All nursing students are advised to contact Public Safety for concerns with personal safety or security of personal items. The Office of Public Safety can be reached 24 hours a day by calling 870-460-1000. Outside emergency telephones are located throughout the campus. Sorrells Hall closes at 4:30 p.m. unless special circumstances require it to be open later. If leaving the building after dark, students are urged to use the buddy system to walk to their automobile. To protect personal belongings, students should leave books, purses, and other personal items locked in their car or at home during clinical hours. Small items can be carried in uniform pockets. **NEITHER UAM NOR THE CLINICAL FACILITY WILL BE RESPONSIBLE FOR LOST OR STOLEN ITEMS, INCLUDING JEWELRY.**

### **Student Identification (ID) Cards**

ID cards identify UAM students for purposes of athletic events, student programs, meals, library use, and various other activities. IDs are made at the first of each semester for new students and are intended to last throughout the student's enrollment at UAM. There is a fee for ID replacement.

### **Student Lounge**

A student lounge is provided for nursing students to relax before and between classes. Food and drinks may be consumed in the lounge area only. Students are not to eat or drink near computers. Keeping the lounge clean is the responsibility of students. Failure to maintain the lounge in a clean and orderly manner or consuming drinks/food near computers may result in its closure. The SON is not responsible for providing printer supplies.

## **Health and Wellness Center**

Nursing students are required to provide care to clients with mental and physical health problems. To promote the health of clients, students must also take care of their own mental and physical health. Students are urged to participate in some form of physical exercise as well as stress-reducing activities. The UAM Wellness Center is available for students to develop higher levels of cardiovascular and respiratory fitness, flexibility, strength, and nutritional excellence. The long-range goal of the Center is lifestyle changes. The Wellness Center is located next to the University Center and can be contacted at 870-460-1051.

## **Student Services**

### **Health Services**

UAM maintains a Student Health Services Office staffed by a full-time Registered Nurse (RN). The RN treats minor ailments, provides general health information, administers prescribed physicians' orders, assists in emergencies, maintains student health records, and acts as a referral in health care matters. The Student Health Services Office is located in the Risher Wellness Center and can be contacted at 870-460-1051.

### **Mainline Medical and Behavioral Clinics**

UAM provides student access to medical and behavioral health clinics through Mainline Health Systems, located on the UAM campus. The medical clinic is staffed by an Advanced Practice Registered Nurse (APRN). The APRN treats minor illnesses, injuries and/or emergencies, performs physicals and immunizations. The Mainline Medical clinic is located in Maxwell Hall and can be contacted at 870-224-0647. The behavioral health clinic is staffed with a full-time licensed mental health professional who provides mental health services that may interfere with academic success, such as depression, anxiety, loneliness, trauma, and relationship difficulties. The Mainline Behavioral Health Clinic is located in the Gibson University Center "UC" Suite 201 and can be contacted at 870-224-0109.

### **Testing and Career Services**

The purpose of Career Preparation Services is to assist students to prepare for academic and career success. The staff assists with career assessment and helps students make informed choices regarding academic majors. Career Services is located in the Student Success Center.

### **Tutoring Lab**

These services provide fundamental enrichment skills for students' educational growth. Peer tutoring in selected academic subjects is available to any student. Learning Support Services is located in room 203 in The Student Success Center, telephone 870-460-1054. Students requiring academic counseling may be referred to the Assistant Vice Chancellor of Student Engagement, located in the University Center, 870-460-1053.

## **School of Nursing Specific Policies and Regulations**

When one enters a professional program, one becomes a part of that profession and is thereby obligated to assume the highest standards of the profession. This remains true throughout one's academic and professional life.

### **Civility and Professional Conduct**

To articulate and cultivate habits for being a member of the UAM SON community, student should abide by the following statements and community norms to help guide interactions with peers, faculty, staff, administration, client's, families, and community members.

The UAM SON is dedicated to creating and maintaining a civil and professional community of success that supports respectful discourse, openness to opposing points of view, and passionate dialogue with an intention to secure common ground. To achieve civility and professionalism within the program and facilitate a culture of success, it is essential for its members to uphold the following norms:

- Assume goodwill – approaching situations positively;
- Communicate respectfully – listening actively and being timely;
- Send the mail to the right address – taking the problem to the person involved and not going around or behind the involved person or up the chain of command without first attempting resolution with the involved person; and
- We are all responsible for creating a civil and professional learning environment.

Actions that are uncivil will result in a written counseling record.

### **Classroom Behavior/Disruption Policy**

Students will not disturb normal classroom procedures and instruction. Disruptive conduct includes but is not limited to violence, noisy actions, profane or obscene language, intoxication, verbal abuse/slander, quarreling, fighting, threats to safety to oneself or others, and failure to comply with the directions of a university official (reference UAM Student Handbook). A faculty member may, at his or her discretion, dismiss a disruptive student from the classroom for the balance of the class period and, at the faculty member's discretion, consider the missed class time as an unexcused absence. Faculty should, following a student dismissal from class, request that the student meet with them to assure that the student's classroom conduct will be appropriately modified. The first dismissal from the classroom for disruptive or distracting behaviors serves as a warning. Faculty members should document the basis for the dismissal and the content/outcome of the meeting. Any threat of harm to others or actions that may threaten the safety of others can result in foregoing step 1 and immediately enforcing step 2. It may be necessary for the faculty member to file a report with the University Behavioral Intervention Team (UBIT) after the first ejection. Any time an instructor believes individuals in a class are in imminent danger, the class should be dismissed, and University Police immediately contacted via the EMERGENCY NUMBER at 870-460-1000. If a student is dismissed a second time, with appropriate documentation of the ejection, the faculty member will take the following actions:

1. Immediately notify the dean/chair/director of the unit of the incident.
2. Notify the student in writing that he or she is in violation of university behavioral standards

listed in the student handbook. Upon receiving such notification, the student must meet the faculty member within two (2) class/academic days to attempt to resolve the issue. No action or penalty shall be imposed until the student has been informed in writing of the charge, given an opportunity to present his or her defense, and been informed of his or her right to appeal the case to the Dean of Students or Director of Student Services at the Colleges of Technology. During this process, if the student is not perceived as a threat to the safety of the instructor or the other students, the student has the right to remain in class if he or she engages in no disruptive or distracting conduct.

3. If the student is perceived to be a threat to the safety of the instructor or other students, the instructor may impose an immediate interim suspension. In such cases, the instructor must immediately file a UBIT report and notify his/her supervisor. During the interim suspension, further investigation will take place, the findings of which will serve university officials as the basis for formulating appropriate action. An interim suspension is the only exception to a student's right to remain in class until action has been taken.
4. If the student and faculty member are unable to come to resolution, the student shall take the grievance to the department chairperson (or academic dean if the faculty member is the department chairperson) within two (2) class/academic days following the discussion with the faculty member. The department chairperson or academic dean shall attempt to resolve the grievance within two (2) class/academic days by meeting with the student and faculty member.
5. After the above procedures have been followed, the student may, upon notification to the faculty member and department chairperson/academic dean, file an appeal in writing within two (2) class/academic days to the Dean of Students or Director of Student Services at the Colleges of Technology. If the student does not wish to appeal the case, the faculty member shall immediately initiate the administrative class withdrawal process by notifying the Dean of Students or Director of Student Services at the Colleges of Technology. The Dean of Students or Director of Student Services at the Colleges of Technology shall notify the student within two (2) class/academic days of the pending action and schedule a conference with the student. Following the conference, the Dean of Students or Director of Student Services at the Colleges of Technology will administratively withdraw the student from the class in which he or she was enrolled and impose an appropriate student behavioral sanction. Exception: An instructor can request administrative withdrawal of a student from a class if sound evidence exists that his/her personal safety or the safety of the students in the classroom is in jeopardy. In addition, a UBIT report must also be processed.

### **Definition of Improper Conduct**

The SON subscribes to the definition of improper conduct and associated penalties indicated in the UAM Student Handbook and University catalog. Improper conduct disrupts the academic community and breaches the freedom of other students to progress academically. This includes the Academic Code violations of, but is not limited to:

- Cheating – the possession, receipt, use, solicitation, or furnishing of unauthorized aid in an academic endeavor.
- Plagiarism – the use of ideas or thoughts of another which are not common

knowledge without acknowledging the source(s) or, when applicable, identifying direct quotations.

Cell phones/smart watches, etc., must be turned off during class. Leaving cell phones on during class/clinical is deemed improper conduct and will result in disciplinary action. Refer to the Academic Services and Policies section of the UAM Student Handbook (and the 36<sup>th</sup> Student Services section of the University catalog) for the definitions and penalties for Academic Misconduct and the Academic Appeals Process. Refer to the SON Handheld Technology Use Policy for specific guidelines during classroom and clinical experiences. In addition, students exhibiting unprofessional behavior or any behavior which breaches the peace or violates the rights of others will be asked to leave the classroom or laboratory. Students may be asked to appear before the Professional Standards Review (PSR) Committee. Refer to the UAM Student Handbook for specific policies.

Improper conduct is further described by the SON in the “*School of Nursing Honor Code*.” It is to be read, understood, and signed by the student. The original will be filed in the SON student file. The consequences of noncompliance with the SON Honor Code will result in an appearance before the Professional Standards Review Committee with the possibility of dismissal from the program. Students are to maintain relationships with the SON dean, faculty, and staff who are cordial and respectful. Conduct unbecoming of a student preparing for a professional or technical nurse role will cause dismissal from the nursing program in which the student is enrolled.

### **Cell Phone Usage Policy**

The following policy is intended to define acceptable classroom behavior regarding cell phones and other electronic devices to preserve academic integrity and ensure that students have optimum environmental conditions for effective learning.

As a member of the learning community, each student has a responsibility to other students who are members of the community. The use by students of cell phones and other electronic devices during scheduled classes is prohibited. All such devices must be turned off or put in a silent mode and cannot be visible during class. At the discretion of the instructor, an exception to this policy is possible in special circumstances. Cell phones may not be answered or utilized for text messages, instant messages, games, Facebook, or other social media in the classroom. Both ear buds and/or earphones must be removed from ears. A student deciding to ignore the policy will be asked to leave and may be counted absent. In testing situations, use of cell phones/smart watches or similar communication devices may lead also to a charge of academic dishonesty and additional sanctions under the *Academic Dishonesty Policy*. Under no circumstances are cell phones or other smart devices allowed to take pictures of exams/quizzes.

### **Student Attendance Policy**

Regular class and clinical attendance are expected of all students for the entire class/clinical period. The SON understands on occasion there are extenuating circumstances that prevent a student from attending class (deemed extenuating by the course coordinator and the



course faculty). Therefore, it is imperative that students always attend class/clinical in case extenuating circumstances arise that prevent class/clinical attendance, which are recorded as an absence. This applies to all nursing courses (whether required or elective) for SON students.

Students who will be tardy or absent from class or clinical MUST follow course syllabus instructions for notification. Due to contract requirements for clinical space and limited faculty time, make up clinical time is not available. Students who miss class, lab, simulation, or clinical time are expected to meet with the course coordinator within 48 hours (about 2 days). If an alternate assignment is given, the student must perform satisfactorily or is at risk of failure of the course. If the student is a no call/no show for class/clinical, the student will face disciplinary action, up to dismissal from the program.

### **Tardiness**

Classroom tardiness: Students who are not present when class starts will not be allowed into the classroom until break time and will be counted tardy. After the class has been in session for an hour, the tardy becomes an absence. If the student is tardy on an exam date, the course faculty holds the authority to allow the student to begin the test (only allowing the time remaining) or to take a make-up exam. Students who leave class early (before official dismissal from the faculty) will be counted absent, regardless of the time leaving. If the student was tardy at the beginning of the class and then leaves the class early, that will count as one tardy and one absence for the day. Three tardies equals an absence.

Clinical tardiness: Students who are not present when clinical starts will be counted tardy. The course faculty may make an alternate clinical assignment based on student time of arrival. Failure of the student to carry out the alternate clinical assignment will result in immediate dismissal from the clinical site and count as an absence. The student must then go immediately to the Dean's office for counseling/further disciplinary action. Students who leave clinical early (before official dismissal from the faculty) will be counted as absent. Three tardies equals an absence. Tardiness will be recorded as "unsatisfactory" in the appropriate section on the Clinical Evaluation Tool. A pattern of clinical tardiness puts the student in jeopardy for clinical failure.

### **Counting Absence**

Each class and clinical day are counted as one day as shown in Table 1 and Table 2. This includes day one (pre-planning) for clinical. If a student is absent on clinical day one or two, the student may be required to complete an alternate assignment in lieu of clinical paperwork. See course specifics related to assignment. If the student misses both clinical days, the student will receive an unsatisfactory clinical grade for that week. It is the student's responsibility to verify course tardies/absences with the course coordinator.

**Table 1**  
***Absenteeism in Class or Lab***

Course duration	Course grade lowered one letter grade with:	Student fails the course with:
8	2 absences	more than 2 absences
16	3 absences	more than 3 absences
Intersession and Summer	1 absence	2 absences

**Table 2**  
***Absenteeism in Clinical***

Clinical rotations per semester	Student fails the course with:
6	more than 1 absence
8	more than 1 absence
12	more than 2 absences

NOTE: Preplanning day is NOT counted as one day. If you miss preplanning and/or the clinical day, that is counted as one absence.

### **Infection Control Precautions**

All nursing students are assigned to care for people with a wide variety of diagnoses, including airborne and blood borne illnesses. Nursing students are NOT insured by the University or the clinical facilities for injury and illness exposures which occur during clinical assignments. The UAM SON strongly recommends that each student obtain personal health insurance.

Due to the nature of nursing, students are put in situations which may place themselves at risk for exposure to infectious diseases. This is an occupational risk for persons working in the health care field. Compliance with standards of infection control as they apply to professional conduct is the responsibility of licensed health care workers and those under the jurisdiction of that professional. The SON faculty has adopted the Centers for Disease Control and Prevention (CDC) infection control guidelines known as Standard Precautions (SP) to assist students and faculty to practice safely in the clinical area. Students are expected to adhere to SP during laboratory and clinical learning experiences. Students must wear appropriate personal protective equipment (PPE) when exposed to any body fluids and airborne pathogens. Any exposure to body fluids while in the clinical area must be immediately reported to the clinical instructor. The clinical instructor will follow the procedure for exposure outlined by the health care facility.

### **Student Verification of Program Requirements**

#### **Cardiopulmonary Resuscitation Certification (CPR)**

Students enrolled in clinical courses are to submit documentation verifying current Health Care Provider CPR certification from the American Heart Association to the SON reporting site. Students who do not submit documentation of current CPR certification will not be allowed to participate in clinical activities. Missed clinical activity due to failure to

produce current evidence of CPR will be counted as an absence, resulting in an unsatisfactory grade for the absence. In addition, disciplinary action may be taken toward the student.

### **Tuberculosis (TB) Skin Test/Chest X-Ray**

The TB skin test must be kept current throughout the program of study. A TB skin test must be completed between May 1-31 each year while in the program. It is the responsibility of the student to keep TB skin tests current and to submit proof to the SON reporting site. A chest X-ray is required to rule out the possibility of tuberculosis if the TB skin test is positive. Students who have had positive TB results must sign the *Student Statement of TB Skin Tests* form (Appendix G). Students who do not submit documentation of current TB tests will not be allowed to participate in clinical activities. Missed clinical activity due to failure to produce current evidence of negative TB skin test will be counted as an absence, resulting in an unsatisfactory grade for the absence. In addition, disciplinary action may be taken toward the student.

### **Immunizations**

The UAM SON requires that each student be immunized against Hepatitis B Virus (HBV). The Hepatitis B vaccine series requires several months to complete, and students should begin the series early to follow clinical facility requirements. All students are required to provide proof of injection by date for the following immunizations and skin test: MMR, Tdap, Influenza, Hepatitis B, and Varicella. Immunization records must be uploaded to the immunization tracking system (SentryMD). The SON may require a copy of verification, which students are required to submit. Proof of Varicella may also be provided by titer for proof of illness. Students will not be allowed in the clinical areas without the vaccine on file with the SON. Students will be requested to sign the Authorization to Release Required Clinical Related Information form allowing the SON to release the student immunization status to clinical facilities. It is the student's personal and financial responsibility to maintain current immunization status. Students should upload required documentation into the student screening and compliance system (SentryMD):

- Copies of required immunizations
- CPR certification and TB test results prior to expiration.

Students who do not submit documentation of current immunizations will not be allowed to participate in clinical activities. Missed clinical activity due to failure to produce current evidence will be counted as an absence, resulting in an unsatisfactory grade for the absence. In addition, disciplinary action may be taken toward the student.

Note: All students must complete the SON Authorization to Release Clinical Information form and upload it to SentryMD.

### **COVID-19 or Other Vaccinations**

UAM does not mandate that students who are enrolled in SON programs receive a COVID-19 vaccine series (and any recommended boosters). However, the clinical facilities that partner with UAM establish their own worksite policies, and they may require that faculty members and students be fully vaccinated for COVID-19 or other vaccinations to work in the facility or be

assigned to specific areas. Therefore, students electing not to receive the COVID-19 vaccine series, other required vaccinations, or boosters may not be able to complete program requirements, which will result in non-progression through the program. Clinical facilities may also request information regarding COVID-19 vaccination status for any student and faculty assigned to the site. The SON will hold a copy of COVID-19 vaccination if electively submitted to the SON Administrative Specialist. Should a student not have the COVID-19 vaccine series, it is the student's responsibility to notify the clinical facility to determine if a waiver of vaccination status is allowed.

### **Student Representation on the School of Nursing Committees**

Student representation on the SON committees from the BSN junior and senior, RN-BSN, and AAS in Nursing classes are an avenue for students to actively participate in the governance of the SON. Each year, students volunteer as representatives for the Admissions Committee, Teaching Resources Committee, and the Curriculum Committees. A student representative is also appointed to serve on the UAM SON Advisory Committee. This appointment comes from the Dean of Nursing. Students chosen to serve on these committees should have the time and be able to represent the students' viewpoint. Students who serve on these committees shall have the responsibility of reporting committee activities to their class. Alternates will be selected for each representative. If the representative cannot attend a scheduled committee meeting, the alternate should make plans to attend. According to the SON Bylaws, student representatives on SON committees do not have voting privileges.

#### **Admissions Committee**

The Admissions Committee makes recommendations on all applications for admission and reviews admission criteria. This committee meets at least once per academic semester and as needed. Student representatives, one each from the BSN junior and senior, RN-BSN and AAS in Nursing classes, serve on this committee. Student representatives will be excused when applicants are discussed.

#### **Teaching Resources Committee**

The Teaching Resources Committee serves to review and make recommendations regarding supplies, audio-visual materials, computer software, and library holdings for the SON. Student representatives, one each from the BSN junior and senior, RN-BSN and AAS in Nursing classes, serve on this committee, which meets at least once each academic semester.

#### **Curriculum Committee**

The Curriculum Committee plans, revises, and evaluates the curriculum to assure quality education. The Curriculum Committee assures the program of learning adheres to the criteria established by the Arkansas State Board of Nursing, the Commission for Nursing Education Accreditation (CNEA), and the American Nurses Association. The committee includes student representatives, one each from the BSN junior and senior, RN-BSN and AAS in Nursing classes, serving on the committee.

### **Student Complaints and Appeals Process**

The following steps should be taken regarding informal complaints. Please see the definition of informal complaints.

1. Students should follow the chain of command with complaints. This process includes civil communication between the student and faculty within two (2) class/academic days. If there is no resolution, the student should then go to the course coordinator with the informal complaint. In circumstances where the student feels uncomfortable approaching the faculty with the complaint, the student may bypass the faculty and meet with the course coordinator.
2. After discussing the complaint with the course coordinator, if there is no resolution, the student may proceed to file a written formal complaint to the SON dean within two weeks of the informal complaint discussion.

The following steps should be taken to file a formal complaint.

1. Students should follow the informal complaint process prior to filing a formal complaint.
2. If the student, faculty member, and course coordinator are unable to come to resolution, the student shall take the written formal complaint to the SON dean within two (2) class/academic days following the informal complaint discussion with the faculty member and course coordinator.
  - a. In circumstances where the student feels uncomfortable approaching the faculty or course coordinator, the student may bypass the faculty and/or course coordinator and may meet with the SON dean. The written formal complaint should include a statement regarding why the informal process was not followed, otherwise the formal complaint will be redirected to follow the informal complaint process.
  - b. If the formal complaint involves a faculty member, the faculty member's name and specifics about the complaint should be included in the written document/email. In such cases, the faculty member has the right to read the formal complaint. However, the written formal complaint document/email remains with the dean.
  - c. If the complaint is against the SON dean, students should follow the UAM Student Academic Grievance policy in the UAM Student Handbook, which indicates the formal complaint is directed to the Vice Chancellor of Academic Appeals. In such cases, the dean has the right to read the formal complaint. However, the written formal complaint document/email remains with the Vice Chancellor of Academic Appeals.
3. The SON dean shall attempt to resolve the complaint within two (2) class/academic days by meeting with the student and faculty member. If an investigation by the Dean is warranted, the student and faculty will be notified in writing within 1 week of the meeting.
4. If the student is not satisfied with the dean's solution to the complaint, the student should then follow the UAM Student Academic Grievance Policy.

### **Professional Standards Review Committee**

The Professional Standards Review Committee (PSR) serves as the final step in the appeal process within the SON. Students may be referred to the PSR Committee by the dean or a faculty member or may request a hearing as part of the appeal process. No student representatives serve

on this committee.

### **Disciplinary Process**

The dean of the SON or faculty member requesting disciplinary action must adhere to the following process:

1. Submit a counseling record documenting detail of the violation to the PSR Committee Chair.
2. The PSR Committee Chair will schedule a special meeting within five (5) business days if no regular meeting is scheduled.
3. The Course Coordinator will notify the student of the meeting time and place at least 72 hours prior to the meeting.

### **SON Student Appeal Process**

A student appealing a grade or other disciplinary action is required to adhere to the following process:

1. Submit a written request for a conference to the instructor whose grade or disciplinary action is in question.
2. If the problem is not resolved with the instructor, the student should schedule an appointment with the Course Coordinator.
3. If resolution is still not reached, the student will meet with the dean.
4. The student may then appeal to the Professional Standards Review (PSR) Committee. The student should submit a written request for a hearing to the Committee Chair within 72 hours of the conference with the dean. The PSR Committee Chair will schedule a special meeting within five (5) business days if no regular meeting is scheduled.
5. The student may then appeal the PSR Committee decision to the UAM Academic Appeals Committee using the procedure outlined in the UAM catalog.

### **UAM Student Appeal Process Academic Appeals Process**

A student may appeal an academic decision and/or grade awarded. Please see the information below regarding specific types of appeals and appeal steps.

#### **Appeals of Course Grade**

A student disputing a semester grade should first complete a Grade Appeal/Proof of Mediation form which is online and on the Academic webpage, under the academic forms link. The form is also available in the Office of Academic Affairs. Once the form is completed the student must consult with the instructor of the course. If a resolution is not reached, the student should consult with the SON Dean. If the dispute remains unresolved, the student should consult with the Vice Chancellor of Academic Affairs. If no resolution is found, the Academic Appeals Committee will hear an appeal.

NOTE: The Academic Appeals Committee will only hear grade appeals after mediation of the issue by the Vice Chancellor for Academic Affairs proves unsuccessful.

### **Appeals Due to Suspension for Poor Academic Performance**

Students wishing to appeal suspension or dismissal from the University due to poor academic performance must file an appeal with their campus of enrollment by completing an Academic Appeals Form. Students must file the Academic Appeals Form and supporting documents with the Office of Academic Affairs on the Monticello Campus. Appeals of suspension which affect a student's enrollment for the next academic semester will be heard by the Academic Appeals Committee at its regular meeting during the first day (and longer if necessary) of registration at the start of each semester (fall or spring). Should a student be registered for the same number of hours on any of the campuses that includes the Monticello campus, the Monticello Academic Appeals Committee will resolve the issue. Should a student be registered for the same number of hours at both the McGehee and Crossett campuses, the Academic Appeals Committee at the campus location where the student academic issue originates will hear the appeal.

NOTE: Students denied an appeal and suspended from any campus of the University of Arkansas at Monticello are not permitted to enroll in or attend any other campus of the University of Arkansas at Monticello.

### **Appeals of a Decision by an Academic Officer/Board**

Students wishing to appeal an academic decision originating from a dean, assistant dean, department head, instructor, or departmental ethics/standard board may appeal through the Academic Appeals Committee on the respective campus on which the original violation occurred. Student appeals of this nature should not be an emotional plea but must contain evidence of at least one of the following:

- Irregularities in due process that may have influenced the outcome of the hearing;
- Demonstrated prejudice against the student by any participating board member(s);
- Introduction of new evidence not available at the time of the original decision; or
- The sanction imposed did not fit the offense.

Students wishing to appeal such an academic decision must file an appeal with their campus of enrollment by submitting an Academic Appeals Form and supporting documents with the Office of Academic Affairs on the Monticello campus. A required part of the Academic Appeals Form is a word-processed letter explaining the appeal. A student who does not supply the Academic Appeals Form *and* the supporting letter will be denied an appeal. The Academic Appeal Form contains instructions and requirements regarding the support letter.

The Academic Appeals Form and supporting letter must be received by the Office of Academic Affairs on the Monticello campus within 48 hours following receipt of the original decision. (The date and time of delivery of the original decision to the student should be noted on the original decision letter/form by the originating person or body). If those 48 hours encompass a weekend, holiday, or modified calendar, the Academic Appeals Form and supporting letter must

be received by 8:30 a.m. the next working day. Documents received after this time will be denied and the original decision will stand. The date and time of receipt of the student's appeal form and supporting letter will be recorded on the documents by the Office of Academic Affairs on the Monticello campus. A copy of the Academic Appeals Form indicating date/time of receipt will be provided to the student upon request.

The Vice Chancellor of Academic Affairs on the Monticello campus will schedule the Academic Appeals Committee meeting within three (3) working days after receipt of the appeal documents. If during those three days, the University experiences a closing or implements a modified calendar, the appeals committee will convene at the earliest day and time possible.

### **Representation at Disciplinary Hearings**

Neither the accused nor the University shall have legal counsel present unless the student also faces criminal charges. Due to FERPA legislations, parents/legal guardians may not attend judicial hearings, unless consent is given by all involved students. In addition, no other visitors are permitted to attend judicial hearings. (See UAM Catalog - Judicial Rights)

### **Name and Address Changes**

Any student whose name changes while enrolled in the nursing program is to notify the Registrar's Office and the SON. Notification is extremely important to effectively maintain documents, filing systems, and data storage. Name changes are particularly important when applying for licensure. Students must be sure the information on their driver's license is correct since criminal background checks and Arkansas State Board of Nursing (ASBN) applications for licensure are verified by driver's license. Address and phone number changes are important for many reasons. Please provide the SON Administrative Specialist with address and phone number changes in case the faculty need to contact you and to maintain current files.

### **Withdrawal from the School of Nursing**

A student who wishes to withdraw from the SON or the University should follow the guidelines in the UAM Catalog. The SON Dean will email the student a link to complete a SON withdrawal survey to gather information regarding the student time in the program.

### **Readmission to the Nursing Sequence**

Any student that has failed/withdrew from the nursing sequence and seeks readmission to the SON is considered a readmit student. A student who discontinues the nursing sequence for any reason must petition the SON dean by December 1 for consideration for readmission in the spring semester, March 1 for consideration for readmission in summer, and May 1 for consideration for readmission in the fall semester. Students are permitted only one readmission. Readmission is not guaranteed. Acceptance for readmission is based on availability of space, documentation of a plan to correct deficiencies, and approval of the nursing faculty and dean. Students who are readmitted to the nursing sequence will meet with the Course Coordinator to complete a Student Performance Improvement Plan. Readmission of students who withdraw from a nursing course for reasons other



than failure will be considered by faculty on an individual basis after the student has reapplied for admission and has submitted a letter explaining how the problems that led to withdrawal have been remedied. Any student seeking readmission who has been out of the program for more than one year must complete another application and submit with a request letter. Students who are readmitted are accountable for the degree requirements in force at the time of readmission. Faculty hold the right to require repeat students to retake a foundational course if warranted.

### **BSN readmission**

BSN applicants who are accepted for readmission and have been out of the program for more than one year must restart the nursing sequence as determined by the dean. Placement of readmitted students within a year of the last nursing course may vary and are determined by faculty and the dean. The Dean will also determine readmission course sequencing. Faculty hold the right to require repeat students to retake a foundational course if warranted.

### **AAS in Nursing readmission**

AAS in nursing applicants who are accepted for readmission and have been out of the program for more than one year must restart the nursing sequence as determined by the dean. Placement of readmitted students within a year of the last nursing course may vary and are determined by faculty and the dean. Faculty hold the right to require repeat students to retake a foundational course if warranted. A student who reapplies for readmission to any Principles course within one year must do the following:

- If failed or withdrew from NURS 10164 (formerly NURS 1015) Principles of Nursing Care I- retake NURS 10164 (formerly NURS 1015) Principles of Nursing Care I and resume the nursing sequence;
- If failed or withdrew from NURS 1246V (formerly NURS 124V) Principles of Nursing Care II- retake NURS 1246V (formerly NURS 124V) Principles of Nursing Care II, pass a skills check-off, and resume the nursing sequence;
- If failed or withdrew from NURS 2256V (formerly NURS 225V) Principles of Nursing Care III- retake NURS 1246V (formerly NURS 124V) Principles of Nursing Care II, pass a skills check-off, and resume the nursing sequence.

### **Confidentiality**

Violation of the privacy rights of any client, family member, co-worker, UAM student, or faculty is considered an extremely serious example of unprofessional conduct and will be treated accordingly. Further, the student is to read the faculty-provided handbook relevant to the Health Insurance Portability and Accountability Act (HIPAA) of 1996. The student is to then give an indication he/she understands the requirements of HIPAA, accepts personal responsibility for adhering to the requirements of HIPAA, and signs a statement to that effect. A student will be dismissed from the SON for any violation of confidentiality.

### **Unlicensed Practice**

Students may perform activities usually restricted to licensed nurses in academic and clinical settings only when practicing under the supervision of assigned faculty. Under the regulations governing the practice of nursing in Arkansas, any unlicensed person who performs activities which are limited to licensed nurses is guilty of practicing nursing without a license. Students are *not* under faculty supervision when employed in health care facilities.

### **Criminal Background Check**

Many healthcare facilities utilized for student clinical experiences require completion of a criminal background check. Therefore, all students entering the UAM SON programs will be required to complete the criminal background check as instructed by the SON.

Students will receive instructions regarding criminal background checks. In addition, the Arkansas State Board of Nursing requires a criminal background check by the Federal Bureau of Investigation and by the Arkansas State Police for graduates of nursing schools before taking the Registered Nurse Licensure Examination (Next Generation NCLEX-RN) as per ACA §17-87-312. Criminal background checks are at the expense of the student and remain confidential.

### **Students Convicted of a Crime**

The Arkansas State Board of Nursing (ASBN) has the authority to deny licensure to any person who has been convicted of a crime. Conviction of a crime may prevent a student from taking clinical courses, the National Council Licensure Examination for Registered Nurses (Next Generation NCLEX-RN) or becoming licensed to practice as an RN. Successful completion of this program does not assure ASBN's approval to take the Next Generation NCLEX-RN per ACA §17-3-102. If you have any questions or have been convicted of crimes of any type, go to the ASBN website for more information and make an appointment with the dean of the SON. Any violations or convictions during nursing school may result in dismissal from the program.

### **Anti-Tobacco Policy**

The University of Arkansas at Monticello is a smoke-free campus. Smoking is prohibited on all University owned or leased property. Property includes, but is not limited to buildings, facilities, sidewalks, roadways, parking lots, athletic fields, and grounds. Smoking is not permitted in either University owned/leased vehicles or personal vehicles parked on university property. The University prohibits the use of any tobacco product inside any University facility or vehicle. The University prohibits the advertising, sale, or distribution of any tobacco product on university owned/leased property. Assistance to individuals in overcoming addiction to tobacco products is available through the local Drew County Health Unit through a program entitled "~~Stamp Out Smoking~~." "Be Well Arkansas." Parties interested in obtaining resources about smoking cessation may call the Drew County Health Unit or contact the UAM Student Health Nurse.

## Drug Use and Testing Policy

The UAM Student Code states, “Possession, use, manufacture, or distribution of alcohol or illicit drugs is prohibited.” This policy applies to students on all University property and at university- sponsored events held off University property. Students should refer to the *Drug-Free Schools and Communities Act Amendments of 1989* and the UAM Drug Policy for sanctions under this policy. UAM is a smoke free campus. SON Drug Testing Policy

The UAM SON recognizes its responsibility to provide a healthy environment within which students may learn and prepare themselves to become members of the nursing profession. The SON is committed to protecting the safety, health, and welfare of its faculty, staff, and students and people who come in contact with its faculty, staff, and students during scheduled learning experiences. The SON follows a zero-tolerance drug policy and prohibits the use, possession, sale, conveyance, distribution, and/or manufacture of illegal, controlled, or abuse-potential substances and the presence of such substances in the body. A student must disclose any positive drug screens from employment.

As a condition of enrollment, each student will sign the Drug Testing Policy and Procedure Consent and the Authorization to Release Required Clinical Related Information forms agreeing to adhere to the SON Drug Policy. There is no initial drug screening prior to or immediately after admission to the SON. All drug screening is random. Random drug testing will occur prior to the 1st day of clinical and for cause/suspicion (see below). All drug screening locations are determined by the SON and may require students to test on site or at designated laboratories. For cause/suspicion drug screening may be requested at the clinical site. Drug testing and all follow-up lab work for positive screens are at the expense of the student. Refusal of a student to submit to drug testing on the day of the request will result in automatic dismissal from the program.

Students are required to submit in writing all medications (over the counter and prescription) prior to the collection of the specimen(s) to the lab collectors. Students must report nonprescription and prescription drug use and provide a copy of prescription medication(s) taken in the last six months to the lab collector, if indicated. Student reports of medications taken and/or provided by the student after the lab sample has been processed, will not be accepted by the SON or the lab. Therefore, students are encouraged to contact their pharmacy for a list of medications taken within the last six months if unable to recall medication taken.

Any nursing student who tests positive for illegal, controlled, or abuse-potential substances, may elect for further testing to prove negative findings. Further testing options are provided to the student according to the drug screening company policies. The SON does not read or report lab findings or medication analysis for effects on the drug screen. Lab results are reported by the drug testing company and any questions regarding results are referred to the testing lab. All lab results are reported to the SON, and reports are filed in the SON for clinical facility reporting. All students testing positive (without proof of over the counter/prescription verification) on drug screening will be dismissed from the program.

Although Medical Marijuana is legal in the state of Arkansas, where it is prescribed for specific medical conditions, it is a Schedule 1 substance under federal law and is therefore considered an illegal substance for purposes of this policy. Any nursing student who tests positive

for marijuana will be dismissed from the program. In addition, any nursing student who is aware that another nursing student is using or is in possession of illegal, controlled, or abuse-potential substances, or is abusing non-prescription or prescription drugs, is obligated to report this information to a SON faculty member or the dean.

The SON determines the testing company for random drug testing. Random drug testing may be performed on-site via urine sample providing instant results. Confirmatory testing is submitted to laboratory partners pre-selected by the testing company. The SON is not responsible for the collection, testing, reading of the results, or the handling of the specimen(s). The testing company will use the following procedure upon drug testing.

1. Students will be informed of the day of drug testing by the SON Faculty/Dean/Administrative Specialist. No student is allowed to leave the building after being informed. Students who leave the building after being informed will be dismissed from the program. If the student must leave the building to obtain payment source or identification from their vehicle, the student must notify the SON Dean/designated faculty and the student will be accompanied to their vehicle. No exceptions are allowed.
2. Students will be given information about testing by the testing company lab collector(s) and given an opportunity to ask questions.
3. Students will complete all required drug screening paperwork, report medication taken per SON drug policy, and provide payment for the screening.
4. Collection of the urine sample will be proctored by the testing company collectors and follow their collection policies. Comparison of student reported medication with the urine lab results will be followed according to the testing company's policy. Outside sources of inferences are not allowed. Only valid prescribed medications (in the name of the student and not expired) will be accepted for review.
5. After collection of the urine sample, the testing company's collector will complete the lab results sheet and provide those results to the SON Dean/designated faculty. Results are then given to the student by the lab collector/SON Dean/designated faculty. Results will be shared in a private location with each individual student. Each student will be required to sign a waiver provided by the testing company granting permission to release results to the SON for reporting.
6. Positive results (without a valid prescription or approved testing company drug interaction) will result in immediate dismissal from the program removing him/her from all nursing courses and receive the grade according to university policy ("W" or earned grade depending on drop time).
7. If the student opts for confirmatory drug testing, the student must verbally make this request to the SON Dean/designated faculty member and then immediately send a written request to the SON Dean via email. No confirmatory testing request is offered or accepted after the student leaves the results meeting with the Dean/designated faculty member.
  - a. The student is directed to the testing company's collector to complete confirmatory testing paperwork and payment. All confirmatory testing expenses are the student's responsibility. The cost for confirmatory testing may range from \$200-\$500. Prices on confirmatory testing will be given to the student by the testing company's collector.

- b. Confirmatory testing will include both urine and hair follicle testing. The initial urine sample will be used. The testing company will follow their policy regarding submitting the original urine sample for confirmatory testing. The testing company will follow their policy regarding hair follicle sampling. Hair follicle sampling will include DNA Isomer testing.
- c. The policy regarding attendance to class/clinical will be enforced during the confirmatory testing period until results are received. The amount of time for confirmatory testing is not controlled by the SON.
- d. When confirmatory results are received from both the urine and hair follicle, the student will be informed of results by the SON Dean/designated faculty. Negative results must be reported on both the urine and hair follicle for the student to continue in the program and resume normal activities. Positive results on either urine or hair follicle confirmatory testing will result in immediate dismissal from the program.

### **Drug Testing Procedures**

Testing will be conducted using the following procedure:

1. Testing will occur on a random date selected by the SON.
2. Refusal to comply will result in immediate dismissal from the program.
3. Collection of urine samples will follow the drug testing laboratory's policy.
4. Results of the drug test will be communicated confidentially to the Dean or designated SON faculty member.
5. The Dean/designated faculty will share all drug results with the student.
6. If the test is positive for substances that violate the SON drug policy, the student may elect for confirmatory testing if the student insists on no drug use. The student will then be offered an opportunity for further testing by the drug testing company, according to their laboratory's policy. The student is responsible for all further testing costs. If the student does not request further testing, the student is immediately dismissed from the SON program.
7. Confidentiality will be maintained, and all testing results will remain the property of the UAM SON and designated drug company.
8. For cause drug testing will follow the below policy (see below).

### ***Testing for Cause***

Any nursing student who demonstrates behavior changes suspected to be related to drug use, including, but not limited to, alcohol will be subject to testing. The SON faculty's decision to drug test will be drawn from situational facts in light of the experience of the observer, and may be based on, but not limited to, the following:

- observable phenomena such as direct observation of drug use and/or physical symptoms or manifestations of being under the influence of a drug or prohibited substance.

- erratic behavior, slurred speech, staggered gait, flushed face, dilated/pinpoint pupils, wide mood swings, smell of alcohol on breath, smell of marijuana on personal belongs, and/or deterioration of work performance
- conviction by a court, or entering a plea of guilt or nolo contender to a drug, alcohol, or controlled substance criminal charge
- attendance with a pattern of tardiness and/or absenteeism, determined excessive by the course coordinator and SON dean
- unexplainable medication errors in the clinical site or questionable medication administration to a client
- unsafe or hazardous actions in the classroom or clinical setting that cannot be explained to the faculty/dean,
- requirement from a clinical site

Testing for cause will be conducted using the following procedure:

1. The SON faculty member will have another SON faculty member or clinical site RN confirm the suspicious behavior.
2. The student will be asked to leave the area and go with the SON faculty member and witness (another SON faculty or clinical site RN) to discuss the situation in a location ensuring privacy and confidentiality. The discussion will be documented, and the decision to drug test will be made. If the decision to take the drug test is made, the faculty will contact the Chief Nursing Officer or Nursing Supervisor.
3. If warranted, the student will submit appropriate laboratory specimens in accordance with the SON drug testing policy and designated laboratory/clinical facility policy.
4. The student will be suspended from all clinical activities until the results of the drug test are known. Absences from clinical will receive an unsatisfactory grade and may impact student clinical progression grading.
5. If the laboratory test is negative for substances that violate the SON drug policy, the student will be allowed to return to class/clinical; however, any missed class/clinical time is still recorded as an absence, which may impact clinical progression. Arrangement to make up missed class work must be initiated by the student on the first day back to class. There are no arrangements for missed clinical.
6. If the test is positive for substances that violate the SON drug policy, or if the student refused to comply, the student is immediately dismissed from the SON program.
7. Confidentiality will be maintained, and all testing results will remain the property of the UAM SON.
8. The student is responsible for payment for drug testing to the clinical facility/lab.
9. Failure of the student to submit to “for cause” testing will result in dismissal from the nursing program.

### ***Positive Results***

The outcome of a positive drug test will result in immediate dismissal from the SON. A positive result is defined by the SON according to how the drug testing lab reports. The SON has a zero tolerance for drug testing. If the student wishes to challenge the dismissal from the program, the student should follow the appeal process in the UAM Catalog. Any student dismissed following a positive drug test will be eligible for consideration for re-admission to the SON following the

readmission policy in the SON Student Handbook. Re-admission to the SON is not guaranteed. Students will be referred to the University Behavior and Intervention Team (UBIT) for guidance upon a positive drug screen result.

### **Appealing a Positive Result**

Students testing positive on a random or for cause drug screen may choose to have further testing to confirm the positive result. Students are responsible for all testing fees from the drug testing company. Students will follow the drug testing labs policy on confirmatory testing.

Confirmatory Testing of Initial Positive Specimens will be conducted using the following procedure:

1. The student is informed by the SON Dean and on-site lab collector of the initial positive result.
2. The student must immediately request confirmatory testing to the SON Dean or designated faculty member and immediately send a written request via email to the SON Dean. Student requests for confirmatory testing after leaving the testing site will be denied.
3. The drug testing lab (collector) will follow their policies regarding collection of subsequent specimens and submit to their off-site lab as indicated in their policy.
4. The student with the initial positive on-site drug screen report that elects for confirmatory drug testing, will not be allowed to attend clinical until the confirmatory results are reported. The student will be allowed to attend class. Any missed clinical time is recorded as an absence, which may impact clinical progression. There are no arrangements for missed clinical.
5. When the confirmatory report is received by the SON from the confirmatory testing lab (off-site), the Dean will contact the student and share the findings. If the confirmatory testing does not indicate a violation of the SON zero-tolerance drug testing policy, the student will resume normal program activities. If the confirmatory testing reports any violations of the SON drug policy, the student is immediately dismissed from the program.

### ***Negative Results***

An initial or confirmatory negative drug test will result in the student continuing normal SON program activities. A negative result is defined by the SON according to how the drug testing lab reports the findings (example: “negative,” “non-detected,” “none.”) Diluent negative (a urine specimen that has a creatinine and specific gravity below the lab reported levels) results will not be accepted, unless there is a documented reason in the student file (kidney or heart conditions, documentation from physician or pharmacist regarding specific disease and/or medications that can affect creatinine and specific gravity levels). The student with a diluent negative will be required to retest at the student’s expense following the confirmatory testing policy unless a valid medical reason is provided in writing by the student.

### **Clinical Experiences**

Clinical is the site for the student to enact the roles of provider of care, coordinator of care, and member of the discipline or professional. It is designed to allow the student the

opportunity to apply theoretical concepts to practice. Clinical experiences are arranged in a variety of settings.

### **Clinical Competencies**

Clinical competencies are evaluated as Met (M), Progressing (P), or Unmet (U). Met (M) indicates an ability to initiate or perform independently, or with minimal prompting. Progressing indicates progressing but needs improvement. Unmet (U) indicates the student is unable to perform independently, requires repeated prompting, omitted required action(s), and/or performed unsafely. A pattern of “U” in the same areas could lead to an overall unsatisfactory evaluation and/or clinical failure. Any serious client endangerment as well as serious professional misconduct (violation of the ANA Code of Ethics or Professional Standards and HIPAA Regulations) may result in immediate dismissal from the nursing program with final approval by the dean of the SON. A failing grade in either theory or clinical will result in a failing course grade.

### **Clinical Attendance**

See the UAM SON Student Attendance Policy. Additionally, students are expected to have dependable transportation to and from clinical areas. The University does not provide transportation to clinical activities. Students with small children must have reliable childcare, etc. Medical or other appointments during clinical or class time are not acceptable unless it is a case of medical emergency. It is the student’s responsibility to schedule personal appointments at times other than class or clinical time.

In the event a student must be absent from clinical, the student must telephone the clinical facility at least one hour prior to the beginning of the clinical experience for the day. The student should request to speak with the nurse in charge of the assigned area and state his/her name, reason for the absence or tardiness, the name of his/her assigned client(s), and a telephone number where he/she may be reached. The student must also notify the clinical instructor at least one hour prior to the assigned clinical, if possible, in the manner designated by that instructor. In addition, the student is also to notify the SON Administrative Specialist by 8:30 A.M.

### **Clinical Evaluation Process**

The student’s clinical experiences are evaluated at designated times and are reviewed jointly by the student and the instructor. The student is responsible for scheduling the appointment with the instructor to review the evaluation. A narrative of the results is signed by the student and the clinical instructor and becomes a part of the student’s permanent file. The signature is an indication the student has been evaluated and is aware of the results, suggestions, and recommendations of the instructor. Clinical evaluation forms are included in all clinical course syllabi. Clinical performance is progressive throughout the semester and throughout the program of study. The student is expected to progress to a higher level of performance with each succeeding semester. Violations of the ANA Code of Ethics or ANA Standards of Care may result in dismissal from clinical and the program.



## Unsafe Clinical Behavior and Clinical Incidents

A Clinical Incident Report is required when a student exhibits or experiences the following:

1. Student is deficient in personal or client safety involving a client at the clinical facility.
2. Student commits a medication or treatment error.
3. The student fails to meet ability and skills requirements as defined by the SON Skills and Abilities Form in the clinical experience.
4. Occurrence of an accidental needle stick injury or exposure to blood or body fluids as a result of not following appropriate standard precautions.
5. Near Miss incident (adverse event that was caught by a licensed professional before care was given and could have been harmful or fatal to the client or student).

The faculty is required to clearly document the unsafe behavior or clinical incident on the Clinical Evaluation Tool (CET) and institute the proper procedures to ensure the safety of all involved. The student affected will have the opportunity to comment and is required to sign all documentation and follow through with resolution of plan for improvement. Additional reporting and paperwork may be required by the clinical agency where the incident occurred.

### Additional Clinical Guidelines

- Students may be required to attend a clinical orientation as scheduled by the course coordinator. Students receiving instruction off-campus are expected to abide by the policies of the SON and the host institution.
- Students will be permitted to perform nursing procedures at clinical sites *only after* they have been checked-off in Skills Lab, per the host institution's policy, and/or with the instructor's approval. Performance of procedures at clinical sites prior to check-off or without instructor approval will be considered as unsafe practice. Proper body mechanics should be used when performing lifting or transferring clients. An elastic back support may be worn in the clinical setting.
- The student is to maintain cordial and respectful relationships with staff.
- Eating/drinking in client areas, at the nurses' station, or in any unit is not allowed.
- Smoking/smokeless tobacco is not appropriate in the clinical area. Students who smoke must abide by the host institution's policy. Students who smoke should ensure that smoking odors on their clothing or breath are removed before caring for clients.
- Students must remain in the clinical facility during scheduled hours and must not leave for lunch or breaks.
- Beginning in Principles II for the AAS and Adult Health II for the BSN cohorts, students are required to complete a clinical skills card. The card is to be completed and returned to your clinical instructor by the last clinical week each semester. Completion of the card is required for program completion. Failure to submit the completed card will result in a failure of the last clinical course.

### Clinical Equipment

The student is required to purchase the following equipment for clinical and skills lab

activities:

- Bandage scissors
- Watch with a sweep second hand; NO Smart Watches allowed in clinical
- Two black ball-point pens and a small pocket notebook
- Penlight
- Stethoscope

### **Dismissal from Clinical**

Students who are not prepared, or who fail to meet assigned clinical commitments, may be dismissed from the clinical experience. Dismissal from clinical will result in unsatisfactory progress for that clinical assignment. Noncompliance with the SON guidelines may result in disciplinary action by the Nursing faculty. Violation of the ANA Code of Ethics or ANA Standards of Care may result in dismissal from clinical and the program.

### **Student Signature in Clinical**

A nurse's signature is an indication of professionalism and accountability. Students are required to identify themselves as providers of care in the clinical setting by signing their first initial and last name followed by the title, NS (nursing student), UAM (e.g., J. Smith, NS, UAM) or as per agency policy. Clinical agencies require that the clinical instructor or agency RN co-sign all student entries made into the client record.

### **Clinical Dress Code**

Students are expected to be neat, clean, and abide by the dress code of the SON and specific regulations which may be required by the clinical facility. All students should contact the UAM Bookstore for the SON official uniform information regarding ordering. Student may only wear the official SON uniform to clinical, which includes a scrub top, scrub bottom, scrub dress (optional for female students), scrub jacket, and a long white lab coat. The UAM nursing uniform and name pin are to be worn only during school sponsored experiences. Student's must wear the uniform specific to gender (male or female).

The nursing emblem must be adhered to the left sleeve of the lab coat, two (2) inches below the shoulder seam. Emblems must be on uniform jackets and lab coats. The UAM SON patch must be adhered to the left sleeve, two (2) inches below the shoulder seam. A black, long sleeve, underscrub, round collar shirt may be worn under the uniform for an additional layer for warmth. Tattoos may be visible if not offensive (determined by the course coordinator) and not visible above the collar. Any tattoos not meeting those two criteria must be covered for clinical rotation. If a larger size is needed than available in the UAM Bookstore, the student should seek approval prior to purchasing.

### ***Other Clinical Dress Code***

- Dress in clean wrinkle-free uniform, and/or lab coats.
- Undershirts must be tucked in and not visible below the hem of the uniform shirt.
- Student photo ID must be worn in upper right corner with ID facing outward and

- secured with a clear badge holder. No ornamental badge holders are allowed.
- Metal, magnetic name badge must be worn on the lab coat and positioned on the left side.
  - Shoes must be all white and enclosed. If shoes have strings, the strings must be clean. If shoes have a logo, they must be small. Shoes must be clean, including laces.
  - Socks must be white crew (no ankle, short, or no-show socks will be worn).
  - Hair secured and up off collar. Hair ornamentation must be minimal and the color of hair, uniform, or neutral. Hair should be within the natural range of colors (blonde, brunette, black, auburn).
  - Beards must be neatly trimmed  $\frac{1}{4}$  -  $\frac{1}{2}$  inch in length. Facial and neck areas must be clean-shaven if not covered by a beard.
  - Nails short (should not extend over fingertips). No nail polish, acrylic nails, or artificial nails.
  - Jewelry must be limited to plain gold, silver, titanium, black, brown, or white wristwatch and plain band rings.
  - Only one small stud type earring allowed in each ear (diamonds, pearl, plain gold, or silver).
  - No other forms of visible body piercing allowed. This includes eyebrow piercing, tongue rings, nose rings, cartilage rings, etc.
  - No bracelets or necklaces, hoops, or dangling earrings.
  - No hats or caps.
  - No excessive make up; no eyelash enhancements.
  - No perfume.
  - No body odor.
  - No visible tattoos above the collar or tattoos that are deemed inappropriate by the course coordinator. Tattoos that contain offensive language and/or gestures are considered inappropriate.
  - No gum chewing.
  - No Fitbits, smart watches, or other electronic devices.

Students are responsible for maintaining the integrity of their uniforms throughout the program. The color must be the SON approved uniform color, without stains or discoloration and free from wrinkles or tears. Students who violate the dress code may be dismissed from clinical.

### **Student Identification**

All nursing students are required to wear UAM name badge with photo identification in clinical and practicum areas in accordance with the Arkansas State Board of Nursing Rules and Regulations. AAS and BSN students name badges will automatically be issued during the first semester of enrollment. RN to BSN students should request a UAM Undergraduate Nursing Practicum Student ID by accessing the Student ID Badge Request on the UAM website. A professional photo with neutral background should be uploaded when completing the request form. Students at National Park College should select "National Park College" as the UAM campus " and "student" as the card type for the student degree title. Students can add earned RN credentials under special instructions.

### **Professional Dress Code**

When street clothes are worn during clinical activities, students are not allowed to wear sandals, stilettos, boots, low necklines, sleeveless shirts, tank tops, shorts, cargo pants, blue jeans, or blue jean style slacks. Low heels, flats, or dress shoes are allowed. No gym shoes or open-toe shoes are to be worn.

### **Community Dress Code**

When students participate in community activities, students are required to wear the approved clinical uniform, white lab coat and white shoes as indicated in the dress code. All other rules addressed in the dress code apply.

### **Inclement Weather/Campus Closing**

Faculty and staff hold all authority to make changes to the class and clinical schedules. If the university issues a statement that the campus is closed, NO class or clinical will occur. If the university issues a statement that the campus is transitioning to virtual instruction, for whatever reason, class or clinical may be delayed/canceled/rescheduled at the discretion of the faculty/staff. In the event the university declared inclement weather and the SON decides that clinical will continue or is delayed, students are expected to exercise judgement related to their ability to safely travel to their scheduled clinical experiences. If the student deems it is too dangerous to travel to their assigned clinical location, the student must contact the clinical instructor and course coordinator via instructor preferred method (text/email/blackboard/GroupMe) to explain their situation. An alternate assignment may be given at the discretion of the faculty/staff. Clinical will not be “made up.” Students should monitor the UAM web page for official information regarding closure of the university due to inclement weather, as well as enroll in the university phone notification system and monitor student email. Questions related to campus closing should be directed to the course coordinator.

Online courses will continue as scheduled. If a student has technical issues with Blackboard or accessing course information, the student should contact the instructor using contact information provided in the syllabus.

### **Examinations**

Students are expected to take examinations at scheduled times. If it is impossible to take an examination at the scheduled time, the student is responsible for notifying the Course Coordinator prior to the absence. Failure to notify the Course Coordinator in advance of an absence may result in a failing grade for the examination. On the day the student returns to class, arrangements for a make-up examination must be made with the Course Coordinator. Make-up examinations may vary in type and scheduled at the Course Coordinator’s discretion. Nursing examinations may not be repeated in order to receive a higher grade.

Examinations offered in the SON consist of unit examinations and comprehensive finals for most courses. Examinations will be prepared from various sources of information found in the

assigned readings, computer programs, videos, workshops, or any other sources listed in the course syllabus. Questions will measure student achievement of a course learning objective as cited in the syllabus. A student must have a 75% unit exam average to be eligible to sit for the final.

Faculty have the academic freedom to develop the type of examination needed for the course. In addition, faculty have the right to choose to vary the type of examination given across the course. For example, a faculty may give a written exam for Exam I and II and give the remaining exams as electronic. Partial scoring of select all that apply (SATA) questions is at the discretion of the faculty member when using electronic testing in Blackboard.

Faculty determine the best location for student testing. This could be in the classroom, a proctored testing center, or allow the student to test remotely (proctored or not proctored). If testing is proctored remotely, students should understand that violations of any of the below requirements are considered cheating.

1. The room must be well lit, and the student must be clearly visible.
2. Students must use a functioning webcam and microphone.
3. Students must remove all other electronic devices from the testing room during the exam.
4. There should be no one in the room with students.
5. The use of dual screens/monitors is not allowed.
6. Students may not leave the camera.

The following examples are considered cheating during submission of any graded exam/assignment:

- copying from another student's test paper, Scantron, computer screen, or scratch paper;
- using test materials not authorized by the person administering the test;
- collaborating with or seeking aid from another student during a test without permission from the test administrator;
- knowingly using, buying, selling, stealing, or soliciting, in whole or in part, the contents of a pending test;
- the unauthorized transporting or removal, in whole or in part, of the contents of a test; and
- substituting for another student or permitting another student to substitute for oneself to take a test.

Faculty hold students to the following rules during examination:

1. Use of a cell phone or other portable electronic device is not permitted during any part of the examination or test review. If a student has a cell phone or other non-test electronic device out at any point during a test session, that student's test has been compromised and is to be invalidated (zero grade) due to prohibited behavior, even if the student did not use the cell phone or device.
2. Students are not allowed to wear or access "wearable" technology (such as smartwatches, fitness trackers, Bluetooth headphones) during testing. If a student is wearing such a device during testing, that student's test must be invalidated (zero grade) because the student has access to the device regardless of whether it was used or not.
3. While taking an exam, all personal electronic devices will be silenced and stored away from the student's workspace in the testing area. Students must silence all electronic device(s)

when placed in their backpack/purse. Backpacks/purses are to be placed at the front of the classroom or other designated area during the exam. Any student caught with these items during examination will receive a zero (0) for that exam.

4. No books or papers will be allowed in the workspace during the test. Scratch paper will be provided if deemed necessary by the faculty.
5. Hats with bills must be turned backward or placed in a book bag during testing.
6. Only standard calculators will be allowed. Students will not be allowed to use the calculator on a cell phone. If the electronic examination provides a drop-down calculator, students may use it. The SON has standard calculators that students may use if needed.
7. If special assistive technology is needed to test (screen reader) accommodation will need to be arranged with the instructor one week prior to the test.
8. Only testing students, proctors, and instructors will be allowed in the testing room.
9. When electronically testing, students are not allowed to have anything on the computer screen except for the exam. No additional browsers, websites, or applications are permitted to be open on the computer.
10. No talking or communicating with others by any means during testing or test review, except for a proctor or instructor if necessary.
11. If electronically testing, once a student saves his/her answers and “logs out,” the student will not be permitted to reenter or modify the answers. If a student does not complete all questions and logs out, the student will not be allowed to re-enter the exam and the unanswered questions will be marked as incorrect.
12. Students who arrive late for the exam will not be compensated for missed time.
13. Students who miss a scheduled exam must notify the instructor prior to the exam and follow up with the instructor on the day of return.
14. Permission must be granted from the proctor or instructor during testing to exit and re-enter the testing area.
15. Faculty will remain in the testing site for the duration of the testing and will monitor for student use of electronic devices in accordance with this policy.
16. If Respondus LockDown Browser is used to maintain test security, students will be given directions on how to download.

## **Testing Procedure**

Students are expected to be on time for all examinations. If tardy, extra time will not be allowed to complete the examination. Students will be instructed on the time allotted for the examination at the beginning of each examination period. Examinations will be collected promptly at the end of the period. Purses, books, cell phones/smart watches, and notebooks must be placed at the front of the classroom. Only pencils, Scantron, and the examination are allowed on desks during a paper examination. Only pencils and a blank sheet of paper are allowed for an electronic examination. The designated answer sheet (Scantron) is to be utilized and is the responsibility of the student to obtain for all paper examinations. Students are to use a No. 2 pencil for marking the Scantron. Students are to print their name, the current date, ID number, the name of the course, and the examination number on the Scantron answer sheet.

Students who remove test materials from the room will have their grade for that examination invalidated and they will receive a grade of zero (0). Students are to keep their eyes

on their own paper and are to keep their test and answer sheet flat on the desk. Students are not to take electronic exams in a group setting, unless specifically given permission by the course professor. If a professor/instructor observes behavior that indicates cheating, the student will be asked to turn in the examination and answer sheet, will be ineligible to complete the test, and will receive a grade of zero. Cheating is considered a serious offense and a violation of UAM Academic Conduct Codes and the SON Honor Code. Cheating may result in dismissal from the program. If the student is testing remotely, additionally

- UAM Technical Support is available 8:00 a.m. - 4:30 p.m. Monday-Friday. Students are encouraged to plan to take exams during the hours technical support is available.
- If a remote proctor service is used, the student must follow all rules set forth by the remote proctor service.
- If a webcam is required, it should be placed on the lid of the laptop or where it will have a constant, uninterrupted view of the test taker.
- The student will test in a quiet area, alone, with no communication during the exam.
- The student will complete the exam at one sitting.
- It is a violation of the UAM SON Honor Code to share, copy, or save exam information.

Any student violating the above policy will be referred to the Professional Standards Review Committee for disciplinary action.

### **Test Review**

Undergraduate student attendance and participation in test review is mandatory. Failure to attend a face-to-face test review will be noted following the SON attendance policy. The test review will be conducted according to the following procedure:

1. Test review time will usually occur immediately after a written examination has been graded and items analysis is completed. Otherwise, a designated time will be established.
2. Test review time will occur immediately after the student submits an electronic examination for grading, unless otherwise stated by the course faculty.
3. No pencils or pens are allowed on the student's desk during the test review.
4. No conversation between students is allowed.
5. The written examination booklet and Scranton answer sheet will be available to the student during the review. If the examination is electronic:
  - a. Students will be allowed to review the electronic exams for answers given (correct/incorrect), rationales and source.
  - b. Electronic exams may be reviewed by the student immediately after submitting the exam for grading, unless otherwise stated by the course faculty. Upon completion of the review, the student will not be allowed to reopen the review. Any specific questions related to the exam should be directed to the course faculty. In addition to the electronic review, the course faculty may choose to provide a face-to-face test review.
6. If there are questions related to grading, the student is to see the course coordinator.
7. For students not testing electronically, students will be required to remain in the classroom for the duration of test review and until all written examination materials are collected.

8. Test questions that are reviewed by the course coordinator and/or course faculty after discussion with students will be discussed at the next scheduled class time to provide a conclusive answer to students.
9. Students that wish to see their exam individually must meet with the course coordinator prior to the next exam. Requests to review exams from earlier in the semester after subsequent exams are given are not allowed.

### Grading Policy

The clinical component of any clinical nursing course is evaluated by the instructor and course coordinator based on clinical performance and written work. Clinical work must be satisfactorily completed to pass and to progress to the next level nursing course. An unsatisfactory clinical performance will result in a grade of “D” in the theory component of the clinical course. Achievement of 75% of total possible points is required to pass the theory component of all nursing courses. In addition, **students are required to score  $\geq 85\%$  on a drug dosage calculation examination each semester.** The faculty will decide which course to place the drug dosage calculation examination and include in that specific course syllabus for student notification. The drug dosage calculation examination may be repeated only once and is not calculated into the student’s course grades. **If a student is unsuccessful on the second examination, he/she will fail the course.** The standing grading policy for nursing courses is as follows:

Unit Exams – 75%  
 Final – 20%  
 Miscellaneous – 5%  
 Total – 100%

The SON Curriculum Committee can alter the grading policy for courses that are taught over a shorter timeframe during the semester. If a nursing course has a different grading score than above, the grading scale will be defined in the course syllabus.

### School of Nursing Grading Scale

90% - 100% = A  
 80% - 89% = B  
 75% - 79% = C  
 65% - 74% = D  
 $\leq 64\%$  = F

### Posting of Grades

No grades/scores will be posted on faculty door or in the classroom. In addition, no scores will be given over the telephone. Examination scores may be obtained during class. Final course grades may be given by making an appointment to see the course coordinator. A grade of “C” (75%) is required to pass each course in the nursing curriculum. Students may also obtain final grades via the web at UAM through their Workday account.



## **Incomplete Grades**

The option of taking an *Incomplete* (I) is available to students when, for unusual circumstances acceptable to the Course Coordinator and the dean of the SON, they are unable to complete course requirements prior to the end of the course term. Review the UAM catalog for guidelines regarding an incomplete grade.

## **Written Assignments**

Students are held responsible and accountable for scholarly preparation on all submitted assignments. Scholarly preparation includes correct spelling, grammar, and use of American Psychological Association (APA) 7<sup>th</sup> edition format in addition to the specific guidelines stated in the course syllabus. Written work includes, but is not limited to, evidence-based practice summaries, journals, nursing care plans, drug formats, and papers. Assignments for miscellaneous points are not optional and are required for progression through the program. Faculty may return written work ungraded to the student when there is evidence of multiple spelling errors, punctuation, and/or inappropriate grammar. Plagiarism is considered a serious offense and a violation of the UAM Academic Conduct Code as stated in this handbook. Students will upload written assignments to Blackboard as instructed by faculty.

### **Arkansas Nursing Students' Association (UAM Chapter)**

The UAM Chapter of the Arkansas Nursing Students' Association (ANSA) is a dedicated, extremely active, and award-winning group. It is open to all nursing majors. Students work closely with a faculty advisor involved in the Arkansas Nursing Students' Association. Meetings are held monthly. The Cabinet of the UAM Chapter of the ANSA consists of an elected student President, Vice President, Secretary, Treasurer, and Historian. The purpose of the organization is to inform nursing students of current health issues and to facilitate professional nursing role socialization.

The UAM Chapter works with ANSA to initiate change, maintain quality in health care, and shape a better state of living for all individuals through projects, legislation, and individual responsibility. Students can apply for membership online at the official National Student Nurses' Association (NSNA) website Membership. Once on the website, choose "Join or Renew Now" and "Sign Up for New Membership." A hard copy application may be completed and mailed with dues and is available online at the same site by choosing the "Membership" and "Membership Brochure." The application to be mailed is on page 7 of the brochure. Current members of NSNA may access the same site and renew or update existing memberships. If a student does not receive their membership card or *Imprint*, they are to call NSNA at (718) 210-0705 or email [nsna@nsna.org](mailto:nsna@nsna.org). Memberships require 4-6 weeks to be processed so students must complete application forms and pay dues to NSNA no later than September 1 to establish chapter size and qualify for delegate status at convention.

The Arkansas State Nursing Students' Association holds its annual convention in the fall semester each year in conjunction with the Arkansas Nurses Association Convention (ARNA). Students enrolled in nursing courses are required to attend the state convention in order to fulfill objectives regarding the professional role of the nurse. Attendance at the NSNA Convention every

spring is strongly encouraged but not required. Expenses from attending conferences are the responsibility of the student.

The SNA mailbox is in the Administrative Specialist's office. The *Imprint*, the official journal of the NSNA, is widely circulated upon delivery to the SON. Nursing students/members of NSNA are expected to uphold the responsibilities and the code of conduct of NSNA. See the following link to: [NSNA Bill of Rights and NSNA Code of Academic and Clinical Conduct. NSNA Code of Ethics](#)

### **Sigma Theta Tau International Honor Society of Nursing**

For more than 90 years, Sigma Theta Tau has been recognizing and celebrating excellence in scholarship, leadership, and service within nursing and midwifery. Six nursing students at Indiana University [in the United States of America] founded the honor society, today known as Sigma Theta Tau in 1922. From those six founding members, our organization has grown to more than 135,000 active members, in more than 600 chapters, in over 100 countries around the world. Sigma also collaborates with several global organizations to improve the health of the world's people, including representation at the United Nations. This offers members the opportunity to extend their reach outside of their own communities.

Sigma members are leaders at all levels of the healthcare industry. The society only extends an invitation of membership to students in a baccalaureate or graduate level program. The potential member must have demonstrated superior academic achievement by being in the top 30% of their class, academic integrity, and professional leadership potential. Our membership includes top-notch nursing executives, clinicians, educators, researchers, policymakers, entrepreneurs, and others.

Criteria for admission to Sigma Theta Tau include:

- The potential member must have completed at least half of the nursing curriculum (courses with a nursing prefix). Students in basic programs shall be eligible for membership if they have achieved excellence according to the standards approved by the Society.
- For universities/institutions of higher education that use a 4.0 grade point average (GPA) system to measure academic achievement, undergraduate students must have a GPA of at least 3.0. GPAs should be computed cumulatively according to the policies of the university. For universities/institutions of higher education that do not use a GPA scale, the student must rank in the upper 35 percent of the graduating class. Class means the group anticipated to graduate within a given academic, calendar year, or semester. If the lowest grade point average in the upper 35 percent falls below 3.0, only those students with a 3.0 and above are eligible.
- Registered nurses continuing their studies to earn a Baccalaureate Degree or the equivalent and must have completed at least half of the nursing curriculum, courses with a nursing prefix. Students in baccalaureate programs shall be eligible for membership if they have achieved excellence according to the standards approved by the society. For universities/institutions of higher education that use a 4.0 grade point average (GPA) system to measure academic achievement, baccalaureate students must have a GPA of at

least 3.0. GPAs should be computed according to the policies of the university. UAM students eligible for induction to Sigma Theta Tau become members of the Gamma X chapter.

### **Application for NCLEX-RN**

The application information to take the NCLEX-RN in Arkansas is provided by the dean while students are meeting the requirements of NURS 45064 (formerly NURS 4504) Leadership and Management in Professional Nursing course (BSN) and NURS 2256V (formerly NURS 225V) Principles of Nursing Care III (AAS in nursing). The student is responsible for completing the online application process and paying the testing fee. A criminal background check is required by the Arkansas State Board of Nursing when applicants apply to take the licensure examination (NCLEX-RN). A fee is charged for the criminal background check. Finger printing and completion of online forms are the student's responsibility. All application fees for NCLEX-RN testing are the responsibility of the student. The dean authorizes all graduates to move forward with NCLEX-RN registration after completion of the live NCLEX-RN review course at the end of the spring semester.

Graduates not testing in Arkansas are held accountable for investigating the process for licensure in the state the student plans on testing. The dean is not required to investigate such processes but will help students complete the paperwork needed. Graduates testing in other states outside of Arkansas must provide the dean with required paperwork and instructions to complete the process of program completion verification for scheduling of the NCLEX-RN.

When the NCLEX-RN testing exam date is scheduled, all graduates should notify the SON dean of the testing date.

### **NCLEX-RN Testing Policy after Three Years of Graduation**

Graduates who do not test within three years of graduation will be required to enroll in and successfully complete a UAM SON approved licensure examination preparatory course before receiving validation to test.

### **Graduation Pins and Pictures**

The UAM SON pin and composite pictures are ordered each year in the spring semester by the graduating class. Pin purchasing is not optional for students and the expense is the responsibility of the student. To be pinned at the annual Graduate Recognition Ceremony held before graduation, a UAM SON pin is required. Attendance at the Senior Recognition Ceremony is highly encouraged. All students will be listed on the Senior Recognition Ceremony program.

Students are required to pay for the Senior Pictures, regardless of obtaining a picture. If a student is not pictured, names will be included on the class picture.

### **Reference Letters**

Upon request, the SON Dean may supply a letter of good standing or reference to an agency employing a student or a graduate school, if the student has signed a waiver for the release of information and left the school in good standing. If a waiver has not been signed, a letter is sent to the requesting party stating that they do not have written permission to release information. If the student does not leave the SON in good standing, a letter of attendance may be sent.

### **Good Standing**

The SON defines “good standing” as student departure from the program voluntarily and/or departure does not affect eligibility for readmission, and that the student is eligible to register for nursing classes in the upcoming semester.

- If a student does not progress through courses due to failure, but is eligible for readmission into the program, the student is in good standing.
- If the student does not progress through courses due to failure, and is not eligible for readmission into the program, the student is deemed to be not in good standing with the SON. A notation will be made that the student is not in good standing due to program limits of only one readmission.
- If a student is dismissed for cheating, behavioral concerns, or other policy violations, the student is noted to not be in good standing. The reason for not being in good standing will be noted as “disciplinary.”

### **Children/Dependents in the Workplace**

The SON is committed to a safe and secure environment for all its faculty, staff, students, and visitors. It is the expectation of the SON that children will not be brought into the learning environment. Adherence to this expectation will minimize job performance interference, learning, contribute to the University’s appearance of professionalism, reduce personal and property liability, and protect the welfare and safety of employees, students, and children. The SON may not be used as an alternative for childcare. When childcare arrangements break down, a student should seek alternatives to bringing children to the learning environment. A child is defined as a person under the age of 18 who is in the legal custody or supervision of a nursing student. The learning environment is defined as situations where the student is studying, attending class/clinical/lab, or practicing nursing skills.

This policy does not apply to participation in structured nursing events that are advertised or announced as public functions. Participation in an organized, approved, educational, or entertaining event that permits children to observe and/or participate is acceptable. In such events, the expectation remains that all visiting children will be accompanied by a supervising adult who will assume responsibility for the visiting children at all times. Failure to comply with this policy will result in disciplinary action.

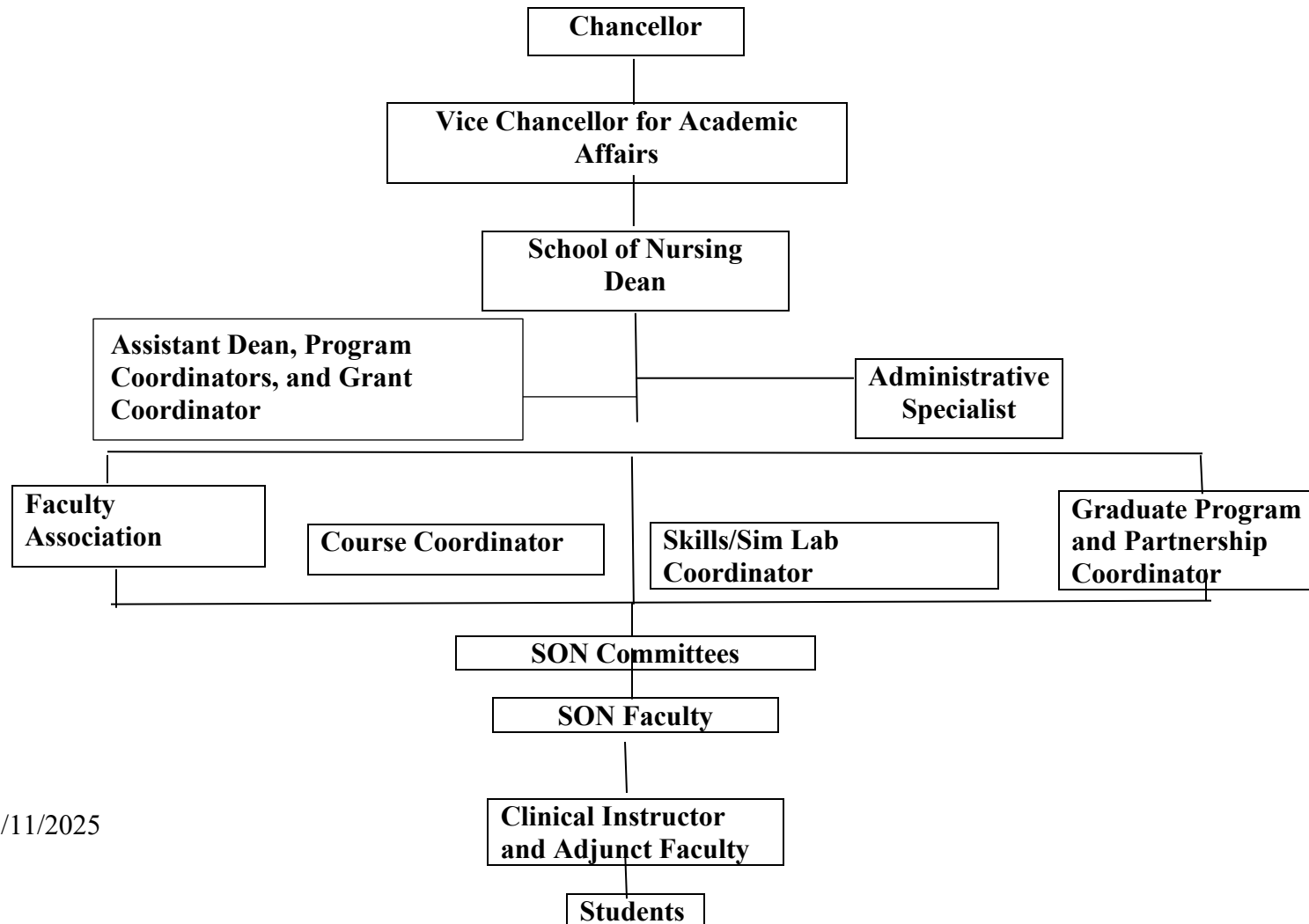
## **APPENDICES**

**APPENDIX A**

**GOVERNANCE OF THE SCHOOL OF NURSING**

## SON Organizational Chart

### Governance of the School of Nursing



Revised 12/11/2025

**APPENDIX B****WAIVER OF ACCESS TO CONFIDENTIAL LETTERS**



**WAIVER OF ACCESS RIGHTS TO CONFIDENTIAL LETTERS OR STATEMENTS OF RECOMMENDATIONS PURSUANT TO PUBLIC LAW 93-380, "FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974," AS AMENDED**

The Federal Family Educational Rights Act of 1974 provides the student the right of access to materials such as letters of recommendation for admission to educational programs, letters of recommendation of securing employment and letters of recommendation for receiving honorary recognition or other honors. The law provides that students may examine letters of recommendation placed in their educational record after January 1, 1975.

The law provides that a student may, if he chooses, waive that right of access to letters of recommendation for the areas listed above.

You should determine for yourself whether your interest will be best served by confidential recommendations or recommendations which are accessible for your perusal. Confidential recommendations will be written and submitted by the deans, faculty, and other referees with the explicit understanding that they will be read only by the party to which applicants request that they be sent. In no event will the recommendations be available for examination by any other person, including the applicant about who they are written.

Please record your decision below.

- ☐ I wish access to recommendations. I request that recommendations be sent to individuals requesting information about my educational record with respect to admission to other educational institutions, the applications for employment, and the receipt of an honor or honorary recognition.
- ☐ I expressly waive my statutory right to access the confidential letters of recommendation. I request that confidential recommendations be sent to individuals requesting information about my educational record with respect to admission to other educational institutions, the applications for employment, and the receipt of an honor or honorary recognition.

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Signature

---

(Please print name)

---

Date

**APPENDIX C**  
**STUDENT HANDBOOK AGREEMENT**

**University of Arkansas at Monticello  
School of Nursing  
Student Handbook Agreement**

I, \_\_\_\_\_, have read and understand the UAM School of Nursing Student Handbook. I have been given a chance to ask questions I may have had regarding the Undergraduate Nursing Student Handbook and have received answers to my satisfaction. I hereby agree to abide by the policies and procedures outlined in the Undergraduate Nursing Student Handbook. Also, I understand this statement will become a permanent part of my file.

---

Student Signature

Date

**APPENDIX D**  
**HIPAA REGULATIONS**

**University of Arkansas at Monticello  
School of Nursing  
Student Agreement**

I have read and understand the requirements of the Health Insurance Portability and Accountability Act (HIPAA) of 1996. I realize I am to abide by the confidentiality provision of HIPAA when providing nursing care for clients or in any clinical learning situation in any capacity as a nursing student in any health care circumstance. I realize that violations of HIPAA can result in fines and/or imprisonment. I further understand that violations of client confidentiality are a serious matter and may result in my dismissal from the nursing program in which I am enrolled in the School of Nursing at the University of Arkansas at Monticello. I agree to comply with HIPAA regulations during the time I am a student in the School of Nursing at the University of Arkansas at Monticello.

---

Student Signature

Date

**APPENDIX E**

**AUTHORIZATION TO RELEASE REQUIRED CLINICAL RELATED  
INFORMATION**

**University of Arkansas at Monticello**  
**School of Nursing**  
**Authorization to Release Required Clinical Related Information**

Public Law 93-380 (The Education Amendment of 1974), effective November 20, 1974, declares it unlawful for a school to release personal information unless the student files a written consent for release of said information.

I, \_\_\_\_\_, authorize UAM and UAM's School of Nursing Faculty to release to clinical agencies where SON clinical course requirements are to be met, any required clinical related information, including but not limited to current immunization and tuberculosis skin test, chest x-ray status, or Student Statement for TB Skin Test, drug test results, special needs status if any, cardiopulmonary/basic life support certification status, criminal background information, email addresses, last four digits of social security number, phone number, home address and birth date.

Additionally, I authorize release of information to clinical agencies that I have been informed of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 requirements and regulations, and that I have been informed of actions which could constitute client assault. Further, I authorize the release of information about my student nurse liability insurance coverage to said clinical agencies.

---

Student Signature

Date

**APPENDIX F**  
**HONOR CODE AGREEMENT**



**University of Arkansas at Monticello  
School of Nursing  
Honor Code Agreement**

The Nursing profession is an honorable profession. We, the faculty and staff of the School of Nursing, take your professional development throughout this program very seriously. This document is provided to allow mutual understanding of our expectations of you, the nursing student, throughout your course of study with us.

The following agreement summarizes the basic integrity expected of a nursing student and a nurse.

An honorable person does not lie, cheat, steal or display inappropriate verbal or nonverbal behaviors toward self or others. An honorable person does not tolerate such conduct by others.

I, the nursing student, am honor bound to refrain from conduct that would make me less than an honorable person.

I, the nursing student, am honor bound to report violations of the honor code committed by myself or by others.

My signature on any School of Nursing document, including homework and electronic submission of coursework, and my behavior in all settings associated with the School of Nursing, represents my affirmation of the Honor Code, and demonstrates compliance with the UAM Conduct Code found in the UAM Student Handbook.

I understand and agree that my placement in the School of Nursing is a privilege, not a right that is conditional upon my being an honorable person. Any direct violation of the Honor Code will result in an appearance before the PSR (Professional Standards Review) committee with the possibility of being dismissed from the program.

---

Student signature

Date

**APPENDIX G**

**STUDENT STATEMENT FOR TB SKIN TEST**

**University of Arkansas at Monticello  
School of Nursing  
Student Statement for TB Skin Test**

I, \_\_\_\_\_, a student in the School of Nursing at the University of Arkansas at Monticello do so profess to be the truth that my TB skin test is positive. My last chest X-ray was negative years ago. I believe it is dangerous to one's health to have unnecessary chest X-rays and I prefer not to have one performed annually. I currently have none of the following symptoms of pulmonary tuberculosis:

1. Fever
2. Anorexia
3. Weight loss
4. Night sweats
5. Fatigue
6. Chest pain
7. Cough
8. Sputum production (mucopurulent sputum/hemoptysis)

---

Signature

Date

**APPENDIX H****DRUG TESTING POLICY AND PROCEDURE CONSENT FORM**

**University of Arkansas at Monticello  
School of Nursing  
Drug Screening Policy Signature Form**

**Student:** I have read and understand the drug screening policy. I was given an opportunity to ask questions regarding this policy and all my questions were answered. I understand this signature form will be filed in my UAM SON student file as a record of my understanding of the drug screening policy.

Student Printed Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

**APPENDIX I**  
**CRIMINAL BACKGROUND CHECK POLICY**

**University of Arkansas at Monticello  
School of Nursing  
Criminal Background Check Policy**

Many healthcare facilities utilized for student clinical experiences require completion of a mandatory background check. Therefore, all students entering the UAM SON programs will be required to complete a criminal background check at their own expense before being unconditionally admitted to the program. The background check is to be completed through the designated organization and should be submitted directly to the UAM SON. If the background check indicates that an applicant has been convicted of a crime, the applicant will be notified of the result and will be provided with an opportunity to correct or clarify items identified in his or her background before a final admission decision is made. A criminal conviction may prevent an applicant from being admitted to the program. It is a requirement of the Arkansas State Board of Nursing to complete another background check and fingerprinting through the Arkansas State Police and FBI during the senior year before taking the Registered Nurse Licensure Examination (Next Generation NCLEX-RN). Instructions will be given to the student on the first day of classes. The results will remain confidential.

**Students Convicted of a Crime**

The Arkansas State Board of Nursing (ASBN) has the authority to deny licensure to any person who has been convicted of a crime. Conviction of a crime may prevent a student from taking clinical courses, the National Council Licensure Examination for Registered Nurses (Next Generation NCLEX- RN) or becoming licensed to practice as an RN. Successful completion of this program does not guarantee ASBN's approval to take the NCLEX-RN per ACA §17-3-102.

**ACA 17-87-312. Criminal background checks.**

Any students found guilty of any of the following will never be allowed to practice as a Nurse.

Graduating from a nursing program does not assure obtaining Arkansas State Board of Nursing's approval to take a licensure examination. Criminal background checks

- (a) (1) Each first- time applicant for a license issued by the Arkansas State Board of Nursing shall apply to the Identification Bureau of the Department of Arkansas State Police for a state and national criminal background check, to be conducted by the Federal Bureau of Investigation. (2) At the time a person applies to an Arkansas nursing educational program, the program shall notify the applicant in writing of the provisions and requirements of this section.
- (b) The check shall conform to the applicable federal standards and shall include the taking of fingerprints.
- (c) The applicant shall sign a release of information to the board and shall be responsible to the Department of Arkansas State Police for the payment of any fee associated with the criminal background check.
- (d) Upon completion of the criminal background check, the Identification Bureau of the Department of Arkansas State Police shall forward to the board all information obtained concerning the applicant in the commission of any offense listed in the subsection (e) of

this section.

(e) Except as provided in subdivision

(1) (10) of this section, a person shall not be eligible to receive or hold a license issued by the board if that person has pleaded guilty or nolo contendere to or has been found guilty of any of the following offenses by a court in the State of Arkansas or any similar offense by a court in another state or any similar offense by a federal court: (1) Capital murder as prohibited in § 5-10-101; (2) Murder in the first degree as prohibited in § 5-10-102 and murder in the second degree as prohibited in § 5-10-103; (3) Manslaughter as prohibited in § 5-10-104; (4) Negligent homicide as prohibited in § 5-10-105; (5) Kidnapping as prohibited in § 5-11-102; (6) False imprisonment in the first degree as prohibited in § 5-11-103; (7) Permanent detention or restraint as prohibited in § 5-11-106; (8) Robbery as prohibited in § 5-12-102; (9) Aggravated robbery as prohibited in § 5-12-103; (10) Battery in the first degree as prohibited in § 5-13-201; (11) Aggravated assault as prohibited in § 5-13-204; (12) Introduction of a controlled substance into the body of another person as prohibited in § 5-13-210; (13) Aggravated assault upon a law enforcement officer or an employee of a correctional facility, § 5-13-211, if Class Y felony; (14) Terroristic threatening in the first degree as prohibited in § 5-13-301; (15) Rape as prohibited in § 5-14-103; (16) Sexual indecency with a child as prohibited in § 5-14-110; (17) Sexual extortion § 5-14-113; (18) Sexual assault in the first degree, second degree, third degree, and fourth degree as prohibited in § § 5-14-127; (19) Incest as prohibited in § 5-26-202; (20) Felony offenses against the family as prohibited § § 5-26-303 – 5-26-306; (21) Endangering the welfare of an incompetent person in the first degree as prohibited in § 5-27-201; (22) Endangering the welfare of a minor in the first degree as prohibited in § 5-27-205 and endangering the welfare of a minor in the second degree as prohibited in § 5-27-206 (23) Permitting abuse of a minor as prohibited in § 5-27-221(a); (24) Engaging children in sexually explicit conduct for use in visual or print media, transportation of minors for prohibited sexual conduct, pandering or possessing visual or print medium depicting sexually explicit conduct involving a child, or use of a child or consent to use of a child in a sexual performance by producing, directing, or promoting a sexual performance by a child as prohibited in § § 5-27-303 – 5-27-305, 5-27-402, and 5-27-403; (25) Computer child pornography as prohibited in § 5-27-603; (26) Computer exploitation of a child in the first degree as prohibited in § 5-27-605; (27) Felony adult abuse as prohibited in § 5-28-103; (28) Felony theft of property as prohibited in § 5-36-103; (29) Felony theft by receiving as prohibited in § 5-36-106; (30) Arson as prohibited in § 5-38-301; (31) Burglary as prohibited in § 5-39-201; (32) Felony violation of the Uniform Controlled Substances Act, § § 5-64-101 – 5-64-510, as prohibited in the former § 5-64-401 and § § 5-64-419 – 5-64-442; (33) Promotion of prostitution in the first degree as prohibited in § 5-70-104; (34) Stalking as prohibited in § 5-71-229; and (35) Criminal attempt, criminal complicity, criminal conspiracy as prohibited I § § 5-3-201, 5-3-202, 5-3-301, and 5-3-401, to commit any of the offenses listed in this subsection.

(f) (1) (A) The board may issue a nonrenewable temporary permit for licensure to a first-time applicant pending the results of the criminal background check. (B) The permit shall be valid for no more than six (6) months. (2) Except as provided in subdivision (1)(1) of this section, upon receipt of information from the Identification Bureau of the Department of Arkansas State Police that the person holding the letter of provisional licensure has pleaded guilty or nolo contendere to, or has been found guilty of, any offense listed in



- subsection (e) of this section, the board shall immediately revoke the provisional license.
- (g) (1) the provisions of subsection (e) and subdivisions may be waived by the board upon the request of: (A) An affected applicant for licensure; or (B) The person holding a license subject to revocation. (2) Circumstances for which a waiver may be granted shall include, but not be limited to, the following: (A) The age at which the crime was committed; (B) The circumstances surrounding the crime; (C) The length of time since the crime; (D) Subsequent work history; (E) Employment references; (F) Character references; and (G) Other evidence demonstrating that the applicant does not pose a threat to the health or safety of the public.
  - (h) (1) Any information received by the board from Identification Bureau of the Department of Arkansas State Police pursuant to this section shall not be available for examination except by: (A) The affected applicant for licensure or his or her authorized representative; or (B) The person whose license is subject to revocation or his or her authorized representative. (2) No record, file, or document shall be removed from the custody of the Department of Arkansas State Police.
  - (i) Any information made available to the affected applicant for licensure or the person whose licensure is subject to revocation shall be information pertaining to that person only.
  - (j) Rights of privilege and confidentiality established in this section shall not extend to any document created for purposes other than this background check.
  - (k) The board shall adopt the necessary rules and regulations to fully implement the provisions of this section.
  - (l) (1) For purposes of this section, an expunged record of a conviction or a plea of guilty or nolo contendere to an offense listed in subsection (e) of this section shall not be considered a conviction, guilty plea, or a nolo contendere plea to the offense unless the offense is also listed I subdivision (1)(2) of this section. (2) Because of the serious nature of the offenses and the close relationship to the type of work that is to be performed, the following shall result in permanent disqualification: (A) Capital murder as prohibited in § 5-10-101; (B) Murder in the first degree as prohibited in § 5-10-102 and murder in the second degree as prohibited in § 5-10-103; (C) Kidnapping as prohibited in § 5-11-102; (D) Aggravated assault upon law enforcement officer or an employee of a correctional facility § 5-13-211, if a Class Y felony; 17-87-309. Disciplinary actions. (a) The Arkansas State Board of Nursing shall have sole authority to deny, suspend, revoke, or limit any license or privilege to practice nursing or certificate of prescriptive authority issued by the board or applied for in accordance with the provisions of this chapter or to otherwise discipline a licensee upon proof that the person: (1) Is guilty of fraud or deceit in procuring or attempting to procure a license to practice nursing or is engaged in the practice of nursing without a valid license; (2) Is guilty of a crime or gross immorality; (3) Is unfit or incompetent by reason of negligence, habits, or other causes; (4) Is habitually intemperate or is addicted to the use of habit-forming drugs; (5) Is mentally incompetent; (6) Is guilty of unprofessional conduct; (7) Has had a license, privilege to practice, certificate, or registration revoked or suspended or has been placed on probation or under disciplinary order in any jurisdiction; (8) Has voluntarily surrendered a license, privilege to practice, certification, or registration and has not been reinstated in any jurisdiction; or (9) Has willfully or repeatedly violated any of the provisions of this chapter. (b) The board shall refuse to issue or shall revoke the license of any person who is found guilty of or pleads guilty or nolo contendere to any offense listed in § 17-87-312(f) unless the person

requests and the board grants a waiver pursuant to § 17-87-312(h). (c) Proceedings under this section shall be as provided in the Arkansas Administrative Procedure Act, § 25-15-201 et

### **ACA § 17-3-102. Licensing Restrictions Based on Criminal Records.**

(a) An individual is not eligible to receive or hold a license issued by a licensing entity if that individual has pleaded guilty or nolo contendere to or been found guilty of any of the following offenses by any court in the State of Arkansas or of any similar offense by a court in another state or of any similar offense by a federal court, unless the conviction was lawfully sealed under the Comprehensive Criminal Record Sealing Act of 2013, § 16-90-1401 et seq., or otherwise previously sealed, pardoned or expunged under prior law:

- (1) Capital murder as prohibited in § 5-10-101;
- (2) Murder in the first degree and second degree as prohibited in §§ 5-10-102 and 5-10-103; (3) Manslaughter as prohibited in § 5-10-104;
- (4) Negligent homicide as prohibited in § 5-10-105;
- (5) Kidnapping as prohibited in § 5-11-102;
- (6) False imprisonment in the first degree as prohibited in § 5-11-103;
- (7) Permanent detention or restraint as prohibited in § 5-11-106;
- (8) Robbery as prohibited in § 5-12-102;
- (9) Aggravated robbery as prohibited in § 5-12-103;
- (10) Battery in the first degree as prohibited in § 5-13-201;
- (11) Aggravated assault as prohibited in § 5-13-204;
- (12) Introduction of a controlled substance into the body of another person as prohibited in § 5-13-210;
- (13) Aggravated assault upon a law enforcement officer or an employee of a correctional facility as prohibited in § 5-13-211, if a Class Y felony;
- (14) Terroristic threatening in the first degree as prohibited in § 5-13-301;
- (15) Rape as prohibited in § 5-14-103;
- (16) Sexual indecency with a child as prohibited in § 5-14-110;
- (17) Sexual extortion as prohibited in § 5-14-113;
- (18) Sexual assault in the first degree, second degree, third degree, and fourth degree as prohibited in §§ 5-14-124 — 5-14-127;
- (19) Incest as prohibited in § 5-26-202;
- (20) Offenses against the family as prohibited in §§ 5-26-303 — 5-26-306;
- (21) Endangering the welfare of an incompetent person in the first degree, as prohibited in § 5-27-201;
- (22) Endangering the welfare of a minor in the first degree as prohibited in § 5-27-205;
- (23) Permitting the abuse of a minor as prohibited in § 5-27-221;
- (24) Engaging children in sexually explicit conduct for use in visual or print media, transportation of minors for prohibited sexual conduct, pandering or possessing visual or print medium depicting sexually explicit conduct involving a child, or use of a child or consent to use of a child in a sexual performance by producing, directing, or promoting a sexual performance by a child, as prohibited in §§ 5-27-303 — 5-27-305, 5-27-402, and 5-27-403;
- (25) Computer child pornography as prohibited in § 5-27-603;

- (26) Computer exploitation of a child in the first degree as prohibited in § 5-27-605;
  - (27) Felony adult abuse as prohibited in § 5-28-103;
  - (28) Theft of property as prohibited in § 5-36-103;
  - (29) Theft by receiving as prohibited in § 5-36-106;
  - (30) Arson as prohibited in § 5-38-301;
  - (31) Burglary as prohibited in § 5-39-201;
  - (32) Felony violation of the Uniform Controlled Substances Act, §§ 5-64-101 — 5-64-510, as prohibited in the former § 5-64-401, and §§ 5-64-419 — 5-64-442;
  - (33) Promotion of prostitution in the first degree as prohibited in § 5-70-104;
  - (34) Stalking as prohibited in § 5-71-229;
  - (35) Criminal attempt, criminal complicity, criminal solicitation, or criminal conspiracy, as prohibited in §§ 5-3-201, 5-3-202, 5-3-301, and 5-3-401, to commit any of the offenses listed in this subsection; and
  - (36) All other crimes referenced in this title.
- (b)
- (1) If an individual has been convicted of a crime listed in subsection (a) of this section, a licensing entity may waive disqualification or revocation of a license based on the conviction if a request for a waiver is made by:
    - (A) An affected applicant for a license; or
    - (B) The individual holding a license subject to revocation.
  - (2) A basis upon which a waiver may be granted includes without limitation:
    - (A) The age at which the offense was committed;
    - (B) The circumstances surrounding the offense;
    - (C) The length of time since the offense was committed;
    - (D) Subsequent work history since the offense was committed;
    - (E) Employment references since the offense was committed;
    - (F) Character references since the offense was committed;
    - (G) Relevance of the offense to the occupational license; and
    - (H) Other evidence demonstrating that licensure of the applicant does not pose a threat to the health or safety of the public.
- (c) If an individual has a valid criminal conviction for an offense that could disqualify the individual from receiving a license, the disqualification shall not be considered for more than five (5) years from the date of conviction or incarceration or on which probation ends, whichever date is the latest, if the individual:
- (A) Was not convicted for committing a violent or sexual offense; and
  - (B) Has not been convicted of any other offense during the five-year disqualification period.
- (d) A licensing entity shall not, as a basis upon which a license may be granted or denied:
- (1) Use vague or generic terms, including without limitation the phrase "moral turpitude" and "good character"; or
  - (2) Consider arrests without a subsequent conviction.
- (e) Due to the serious nature of the offenses, the following shall result in permanent disqualification for licensure:
- (1) Capital murder as prohibited in § 5-10-101;
  - (2) Murder in the first degree as prohibited in § 5-10-102 and murder in the second degree as prohibited in § 5-10-103;

- (3) Kidnapping as prohibited in § 5-11-102;
  - (4) Aggravated assault upon a law enforcement officer or an employee of a correctional facility as prohibited in § 5-13-211, if a Class Y felony;
  - (5) Rape as prohibited in § 5-14-103;
  - (6) Sexual extortion as prohibited in § 5-14-113;
  - (7) Sexual assault in the first degree as prohibited in § 5-14-124 and sexual assault in the second degree as prohibited in § 5-14-125;
  - (8) Incest as prohibited in § 5-26-202;
  - (9) Endangering the welfare of an incompetent person in the first degree as prohibited in § 5-27-201;
  - (10) Endangering the welfare of a minor in the first degree as prohibited in § 5-27-205;
  - (11) Adult abuse that constitutes a felony as prohibited in § 5-28-103; and
  - (12) Arson as prohibited in § 5-38-301.
- (f) This chapter does not preclude a licensing entity from taking emergency action against a licensee as authorized under § 25-15-211 for the sake of public health, safety, or welfare.
- (g) The permanent disqualification for an offense listed in subsection (e) of this section does not apply to an individual who holds a valid license on the effective date of this chapter.

If you have questions, or have ever been convicted of any type of crime, go to the following website for more information,

(<http://www.arsbn.org/Websites/arsbn/images/NursePracticeAct.July.2015.SubChapter3.pdf>) (<http://www.arsbn.org/Websites/arsbn/images/CBCDocumentation.pdf>), and make an appointment with the dean of the SON. Any violations or convictions during nursing school may result in dismissal from the program.

---

Student Signature

Date

**APPENDIX J**  
**HANDHELD TECHNOLOGY USE POLICY**

**University of Arkansas at Monticello  
School of Nursing  
Handheld Technology Use Policy**

Overall Goal: To support the infusion of technology into the nursing curriculum which will allow enhanced evidenced-based information and data usage. Students will be able to rapidly and efficiently access pertinent nursing data upon which to base safe and appropriate clinical judgments using handheld technology.

**During the Clinical Experience:**

1. Students must adhere to HIPAA which establishes standards for use, disclosure, and protection of personally identifiable health information. Students must handle all health information with care to prevent unauthorized use or disclosure of protected health information.
2. Students shall not remove, download, or copy confidential client information on to their device.
3. Students will not store passwords, verification codes or electronic signature codes onto the device.
4. Only client data that is non-identifying (age, race, height, weight) may be input into the device (i.e., for formula/drug calculations).
5. Because electronic messages may be intercepted by other people, the student will not use the device's email capabilities.
6. Students will not use the camera feature at any time.
7. Students will not use the device in the presence of clients or family members.
8. Students will not abuse the privilege of using the device by making personal calls or texting in the clinical area.
9. Students will not post client or clinical facility information to a social media (i.e. Facebook, Twitter, Instagram, Snapchat, etc.).
10. Students shall adhere to the UAM School of Nursing Honor Code and report any violations of the policy to the clinical instructor.
11. If students do not follow this use policy, disciplinary action up to and including being dismissed from the program may occur.
12. Using cell phones in any clinical setting is not allowed. Students should not have cell phones on their person during clinical hours. Students may elect to have a cell phone in their bag stored in the designated area. The cell phone must be on silent when stored in a personal bag while at clinical. Violations of this policy will result in disciplinary action.

**During Classroom Instruction:**

1. Students will not have cell phones/smart watches on their desks.
2. Students will turn off cell phones/smart watches.
3. Students will not receive or place phone calls.
4. Students will not text.
5. Students will not post to social media networks (i.e., Facebook, Twitter, etc.).

**During Testing:**

1. Use of a cell phone or other portable electronic device is not permitted during any assessment or exam.
2. While taking an exam, all personal electronic devices will be stored away from the student's workspace of the testing area.
3. Students must place the device in silence if placed in their backpack. Backpacks will be placed at the front of the classroom during the exam.
4. Violations of this policy may result in a grade of zero for the exam. Continued violations may result in referral to the PSR Committee.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**APPENDIX K**  
**PHOTOGRAPHY CONSENT FORM**



**UNIVERSITY OF ARKANSAS AT MONTICELLO  
PHOTOGRAPHY CONSENT FORM**

I hereby grant full permission to the University of Arkansas at Monticello to use either my photograph and/or name (if necessary) in all forms of media, for all promotional purposes including advertising, display, and audiovisual use.

This consent also serves to waive all rights of privacy or compensation which I may have in connection with the use of my photograph and/or name.

_____ Name (Please Print)	_____ Mailing Address
_____ Signature	_____ City, State, Zip
_____ Date	_____ Phone Number

**APPENDIX L**

**ATTENDANCE POLICY SIGNATURE FORM**

**University of Arkansas at Monticello  
School of Nursing  
Student Attendance Policy**

I, \_\_\_\_\_, have read and fully understand the attendance policy for class and clinical.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**APPENDIX M**

**STUDENT PERFORMANCE IMPROVEMENT PLAN**

**University of Arkansas at Monticello  
School of Nursing  
Student Performance Improvement Plan**

Student \_\_\_\_\_ Course \_\_\_\_\_ Date \_\_\_\_\_

Submit this form to your instructor by \_\_\_\_\_ (date).

**Assessment**

Please identify any concerning factors which are affecting your course performance:

**Expected Outcome(s)**

**Plan**

Identify strategies to implement that will help improve your academic/clinical performance:

**APPENDIX N**  
**ABILITIES AND SKILLS FORM**

**University of Arkansas at Monticello**  
**School of Nursing**  
**Abilities and Skills Form**

The professional nurse must possess the knowledge and ability to effectively assist his or her client's biophysical, psychological, social, cultural, and intellectual domains. Further, the professional nurse must competently analyze the assessment data through intellectual processing to arrive at a definition of the client's status or problem, plan independently or collaboratively for a full range of therapeutic interventions, execute all or part of the plans through nursing acts, and evaluate the care delivered and the client's responses to it.

A candidate for professional nursing must have the abilities and skills necessary for use of the nursing process. These skills and abilities include observation; communication; motor ability; conceptualization; integration and quantification; and behavior/social acceptability. Technological compensation can be made for some handicaps in certain of these areas, but a candidate should be able to perform in an independent manner. The use of a trained intermediary is not acceptable, in that a candidate's judgment must be mediated by someone else's power of observation and selection.

The following abilities and skills are necessary to meet the requirements of the curriculum:

1. **Observation:** The candidate must be able to observe a client accurately at a distance and nearby. Observation necessitates the functional use of the sense of vision and somatic sensation. It is enhanced by the functional use of the sense of smell.
2. **Communication:** The candidate must be able to speak, to hear, and to observe clients in order to elicit information; describe changes in mood, activity, and posture; and perceive nonverbal communications. A candidate must be able to communicate effectively and sensitively with clients. Communication includes not only speech but reading and writing. The candidate must be able to communicate effectively and efficiently in oral and written form with all members of the healthcare team.
3. **Motor:** Candidates should have sufficient motor function to elicit information from clients by palpation, auscultation, percussion, and other assessment maneuvers. A candidate must have sufficient motor skills to gain access to clients in a variety of care setting and to manipulate the equipment central to the treatment of clients receiving professional nursing care. Such actions require coordination of both gross and fine muscular movement, equilibrium, and functional use of the senses of touch and vision.
4. **Intellectual-Conceptual, Interactive, and Quantitative Abilities:** These abilities include measurement, calculation, reasoning, analysis, and synthesis. Problem solving, the critical skill demanded of nurses, requires all of these intellectual abilities. In addition, the candidate should be able to comprehend three dimensional relationships and to understand the spatial relationship of structures.
5. **Behavioral and Social Attributes:** A candidate must possess the emotional health required for full utilization of his or her intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the care of clients, and the development of mature, sensitive, and effective relationships with clients. Candidates must be able to tolerate physically taxing workloads and to function effectively under stress They

must be able to adapt to changing environments, to display flexibility, and to learn to function in the face of uncertainties inherent in the clinical problems of many clients. Compassion, integrity, concern for others, interpersonal skills, interest, and motivation are all personal qualities necessary for professional nursing.

I agree that I must possess and maintain the abilities and skills as indicated above for admission to and progression within the nursing curriculum at the University of Arkansas at Monticello.

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**



**APPENDIX O**  
**CLINICAL INCIDENT REPORT**

**University of Arkansas at Monticello  
School of Nursing  
Clinical Incident Report**

This form should be completed when any of the following incidents have occurred:

1. Student is deficient in personal or client safety involving a client at the clinical facility.
2. Student commits a medication or treatment error.
3. A student fails to meet ability and skills requirements as defined by the SON Skills and Abilities Form in the clinical experience.
4. Occurrence of an accidental needle stick injury or exposure to blood or body fluids as a result of not following appropriate standard precautions.
5. Near Miss incident (adverse event that was caught by a licensed professional before care was given and could have been harmful or fatal to the client or student).

Place a copy in the student's file and notify the course coordinator if a remediation plan is required; faculty and coordinator will sign off on the remediation plan; once all remediation documentation is completed, notify the coordinator, and submit all documentation to the Dean.

Documentation must include the date and nature of the event, name of student and clinical faculty, assessment of findings, and suspected causes related to the incident.

<b>Description of Incident:</b> Attach witness documentation as applicable & include all people involved.
<b>Resolution of Incident/Remediation Plan for improvement:</b>
<b>Comments:</b>

**Remediation Completion Date:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**Instructor Signature:** \_\_\_\_\_

**Coordinator Signature:** \_\_\_\_\_

**Dean Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**APPENDIX P**  
**TEACHING-LEARNING PRINCIPLES**

**University of Arkansas at Monticello**  
**School of Nursing**  
**Teaching/Learning Principles**

The teacher and learner facilitate learning by using various strategies based upon the following Teaching/Learning principles:

1. If learners know what they are expected to learn, they will learn more efficiently.
2. Learners should be given frequent reinforcement for exhibiting desired behaviors, attitudes, and skills, thus, enhancing progress.
3. Learned skills or bits of knowledge repeated often will be remembered longer.
4. Active participation enhances learning.
5. Practicing what is learned in a variety of situations facilitates the transfer of learning to new situations.
6. Learning built on previous knowledge and experience is more meaningful and occurs at a faster rate.
7. A moderate amount of anxiety is essential for learning to occur but high levels of anxiety hamper learning.
8. Individuals must be motivated in order to learn. Learning is a strong motivator for some, whereas others need more tangible external reinforcement.
9. Varying teaching techniques enhances learning and facilitates achievement of objectives.
10. Learners learn at different rates.
11. Learners are motivated when they: are interested; can see the end of the learning process; can recognize the material is directly related to a realistic goal; and are convinced they can reach the goal.

**APPENDIX Q**  
**ERICKSON'S DEVELOPMENTAL STAGES AND TASKS**

**University of Arkansas at Monticello  
School of Nursing  
Erickson's Developmental Stages and Tasks**

**INFANCY (BIRTH TO 18 MONTHS) TRUST VS. MISTRUST**

Establishing oneself as a very dependent being  
Beginning the establishment of self-awareness  
Developing a feeling for affection  
Becoming aware of the alive as against the inanimate, and the familiar as against the unfamiliar  
Developing rudimentary social interaction  
Beginning to adjust to the expectations of others  
Adjusting to adult feeding demands  
Adjusting to adult cleanliness demands  
Adjusting to adult attitudes toward genital manipulation  
Developing physiologic equilibrium  
Developing eye-hand coordination  
Establishing satisfactory rhythms of rest and activity  
Exploring the physical world  
Developing preverbal communication  
Developing verbal communication  
Forming rudimentary concepts

**EARLY CHILDHOOD (18 MONTHS TO 3 YEARS-TODDLER) AUTONOMY VS. SHAME AND DOUBT**

Achieving physiologic stability  
Learning to become physically independent while remaining emotionally dependent  
Expanding verbal communication  
Learning to control the elimination of body wastes  
Learning to coordinate large muscles and small muscles

**LATE CHILDHOOD (3 TO 5 YEARS - PRESCHOOL) INITIATIVE VS. GUILT**

Learning sex differences and developing sex modesty  
Learning to give affection and to share affection  
Beginning to interact with age-mates  
Relating emotionally to parents, siblings, and others  
Learning to identify with male and female adult roles  
Learning simple concepts about the social and physical world  
Learning to distinguish right and wrong, being obedient, and developing a conscience

**SCHOOLAGE (6 TO 12 YEARS) INDUSTRY VS INFERIORITY**

- Building a wholesome attitude toward oneself
- Developing and refining skills in the use of small muscles
- Learning to form friendships with peers
- Learning to give as much love as one receives
- Learning appropriate behaviors for the masculine and feminine role and identifying with contemporaries of the same sex
- Learning to use language to exchange ideas or to influence listeners
- Learning more rules and developing a beginning sense of values, inner moral control, and respect for moral rules

### **ADOLESCENCE (12 TO 20 YEARS) IDENTITY VS ROLE CONFUSION**

- Accepting changing body size, shape, and function in relation to others and understanding the meaning of sexual and physical maturity
- Achieving a socially accepted and satisfying masculine or feminine role and recognizing the distinctions and similarities in each
- Achieving new and more adult relationships with peers of both sexes
- Selecting and preparing for an occupation and economic independence
- Developing a workable set of values, ideals, and standards as a guide for behavior

### **YOUNG ADULTHOOD (20 - 40 YEARS) INTIMACY VS. ISOLATION**

- Select a life partner
- Choose an occupation or career
- Establish independence from parents and financial self-sufficiency
- Establish intimate relationships
- Establish a social network
- Form a personal philosophy and ethical structure

### **MIDDLE ADULTHOOD (40 - 65 YEARS) GENERATIVITY VS STAGNATION**

- Accepting the changes of middle age
- Investing in a new generation
- Adjusting to the needs of aging parents
- Reevaluating life's goals and accomplishments

### **MATURITY OR LATE ADULTHOOD (65 YEARS TO DEATH) INTEGRITY VS DESPAIR**

- Accepting diminishing abilities and limitations
- Adjusting to retirement
- Adjusting to reorganized life patterns
- Accepting loss and death with serenity

**APPENDIX R**  
**ERICKSON'S DEVELOPMENTAL LEARNING NEEDS**



**University of Arkansas at Monticello  
School of Nursing  
Erickson's Developmental Learning Needs**

People learn from the day of birth to the day of death. Nurses should be aware of the normal learning needs of their clients and families during the lifespan and support these needs when appropriate. Consider the developmental learning needs in identifying what you should teach.

Stage

Infancy: Trust vs Mistrust, learns to love & be loved.

Needs:

1. Learns by exploring the environment with his senses.
2. Learns best from primary care giver.
3. Learns best in structured, familiar routine.

Stage

Early Childhood: Autonomy vs Shame, learns to be independent & make decisions for self.

Needs:

1. Learns best if activity leads to independent functioning.
2. Learns if activity is presented as a game.
3. Praise reinforces learning.

Stage

Late childhood: Initiative vs Guilt, learns how to do things (basic problem solving) & that doing things is desirable.

Needs:

1. Instructions should be geared to child's vocabulary.
2. Learns by observing & is able to return demonstrate a skill.
3. Learning centers on one characteristic at a time.
4. Learning is limited by short attention spans (5 minutes).

Stage

School age: Industry vs Inferiority, learns how to do things well.

Needs:

1. Learning in short separate stages is most effective.
2. Immediate rewards & reinforcement increases learning.
3. Teaching plan must be modified to school & social schedule.
4. Teaching must be consistent to meet child's sense of "right & wrong."

Stage

Adolescence: Identify vs Role Confusion, learns who he is.

Needs:

1. Learning should take place separately from parents.
2. Resist learning activities that make them different or conspicuous.
3. Adolescents are oriented to the present, they learn procedures & new information best if they can see how it will benefit them immediately.

### Stage

Young adulthood: Intimacy vs Isolation, learns to establish meaningful relationships.

#### Needs:

1. Learning is related to change in relationships & environment.
2. Learning is best accomplished if cause & effect is presented.
3. Expectation of changes in roles & life-style are a great concern.

### Stage

Middle adulthood: Generativity vs Stagnation, learns to be productive & creative in work & leisure.

#### Needs:

1. Learning relates to adjustments necessitated by health problems, physiologic changes & anticipated retirement.

### Stage

Maturity: Integrity vs Despair, learns to accept the worth & uniqueness of one's own life.

#### Needs:

1. Learning is most concerned with diminishing physical capacities.
2. Learning may be limited by diminished mental capacities.
3. Learning is often difficult for an elderly person, repetition enforces learning