

**Baptist Health College
Little Rock
School of Nursing
Associate of Applied Science
SCHOOL SPECIFIC SECTION
STUDENT HANDBOOK**

**Fall 2022
Spring 2023**

Owned and Sponsored by: Baptist Health, Little Rock, Arkansas
Operated by: Baptist Health Medical Center-Little Rock

CERTIFICATION STATEMENT

Baptist Health, its schools and their administrators reserve the right to restrict, or limit enrollment in any course and make changes in the provisions (organization, fees, program offerings, curricula, courses, requirements and so forth) in this *handbook* when such action is deemed to be in the best interest of the student or a particular school. The provisions herein do not represent, in any way, a contract between the student, prospective or otherwise, and the administration of a school. This handbook replaces all *handbooks* previously published.

FORWARD

This *handbook* is provided to the student to serve as an overall guide to the Baptist Health College Little Rock-School of Nursing. **Policies contained herein are current at the time of printing; however, policies, procedures and information contained within require continual evaluation, review, and approval. Therefore, the faculty and administration of the school reserve the right to change the policies, procedures and general information at any time without prior notice, according to policy; all new and revised policies are posted on appropriate and designated student bulletin boards, for a defined period of time or students receive electronic notification of new or revised policies. Additionally, changes will be made on the website version. Students are expected to remain informed by checking the schools' website regularly at www.bhclr.edu.**

STATEMENT REGARDING STUDENT HANDBOOK

Students enrolled in the Baptist Health College Little Rock are responsible for information contained in the current Student Handbook and current Catalog. Students enrolled in a program of study are expected to comply with all policies of: a) Baptist Health College Little Rock, b) all institutions with which the schools are affiliated, and c) the respective program of enrollment. Additional details of policies that specifically pertain to a student's specific program of enrollment are applicable and are located herein in the programs respective School Specific section.

First Printed in 1922

Baptist Health College Little Rock-
School of Nursing
School Specific Student Handbook Section

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**SCHOOL OF NURSING
NEW STUDENT**

WELCOME

WELCOME to the Baptist Health College Little Rock (BHCLR) - School of Nursing (BHCLR-SN). This will be an exciting time in which you will learn the principles and practice of professional nursing, achievement in the clinical area, and develop a sense of pride and achievement in your new chosen career.

The purpose of the school specific section *Student Handbook* is to acquaint you with the policies of the School and familiarize you with the processes used to determine your progress through the program.

The contents herein pertain primarily to your education at the school; however, a large portion will also apply to your performance as a professional student in any healthcare setting.

Read this *Handbook* thoroughly and carefully, as you are accountable for the information herein contained. If at any point in the program you need clarification of the contents herein, please contact your respective Coordinator.

Again, welcome to the school. We look forward to teaching and learning with you during your enrollment and being a part of your professional development.

Yours Truly,
Administration and Faculty

INTRODUCTORY

HISTORY

The BHCLR–School of Nursing opened in 1920 to prepare individuals to become registered nurses. Following closure for a nine-year period the School was re-established as a diploma program in 1976. In 1987, the school added the LPN/LPTN to RN Accelerated Program for licensed practical nurses and licensed psychiatric technician nurses to become registered nurses. In 2006, the Accelerated Track began accepting certified paramedics.

In 1990, the school was extended to Northwest Arkansas, Baptist Health School of Nursing Northwest, under the joint sponsorship of Northwest Medical Center and Washington Regional Medical Center. The off-campus extension grew rapidly and in 1998 ownership of the extension of the school was transferred to Northwest Regional Medical Center and Washington Regional Medical Center. A southeast Arkansas extension for the LPN/LPTN to RN Accelerated Program (Baptist Health School of Nursing Southeast), sponsored by the Southeast Hospital Consortia and in cooperation with Great Rivers Technical Institute began in January 1997 at McGehee, Arkansas. The school had full approval status from the Arkansas State Board of Nursing (ASBN) and was accredited by the National League for Nursing Accrediting Commission (NLNAC). The Baptist Health School of Nursing Southeast officially closed December 2007.

In July 2015 BHCLR–School of Nursing enrolled its first associates of applied science (AAS) nursing class. Faculty from an affiliating college provide general education and science courses for nursing students. Due to the trends in healthcare and nursing, BHCLR-School of Nursing saw the need to transition to a degree granting program. The last diploma class graduated in June 2016.

Beginning with its first establishment, the school has served the healthcare community by providing a quality educational program which prepares the graduate for direct, first-time entry into the profession as a registered nurse (RN).

PROGRAM OVERVIEW

The school exemplifies the philosophy and values of Baptist Health (BH) by emphasizing the values of Service, Honesty, Respect Stewardship, and Performance, and by a commitment to providing quality patient care.

Christian beliefs, attitudes, and spiritual perspectives as they apply in providing care for the ill are emphasized, as well as personal and professional conduct.

A competent individual nurse in the healthcare field of today must prove to be proficient in the profession of nursing, but must also possess an appreciation of his or her role within the healthcare field and demonstrate an understanding of the organizational culture within the setting of that practice.

The school is comprised of faculty, students, administrative support staff and a program of study that reflects two (2) different curriculum tracks by which a student may achieve the educational goal of a registered nurse. Each curriculum track is designed for a specific category of student: traditional or accelerated.

The faculty are responsible for planning, implementing and evaluating the total program of study in accordance with Arkansas State Board of Nursing (ASBN) Minimum Standards, the Accreditation Commission for Education in Nursing (AECN) and the Accrediting Bureau of Health Education Schools (ABHES) Standards.

The faculty is committed to providing entry level job competent graduates to the healthcare community by promoting high standards of nursing education and for the professional development of students. The program of study is found in the Catalog.

MISSION STATEMENT

The BHCLR- School of Nursing shapes the health care of Arkansans by educating and mentoring nursing students with excellence and Christian compassion.

VALUES

The BHCLR-School of Nursing supports the Values and Code of Ethical Conduct of BH. These Christian values of Service, Honesty, Respect, Stewardship and Performance provide the framework for all operations within the school.

PHILOSOPHY

Baptist Health College Little Rock-School of Nursing, as an educational unit owned and operated by Baptist Health Medical Center-Little Rock, supports Baptist Health Philosophy, Belief, Mission, Values, and Vision Statement and those of affiliating institutions and communities of interest. The school strives to prepare graduates who demonstrate professionalism by practicing in hospitals, and other contemporary healthcare environments with awareness of health care needs of the local, regional, national, and global communities.

The faculty accomplishes this purpose in the context of the Christian values and the following beliefs: Nursing is a value-directed, culturally sensitive, caring profession which embodies advocacy for the consumer and the healthcare system to improve the quality and delivery of healthcare within the ethical principles and legal standards of safe practice. As a leader in the healthcare system, the nurse focuses on human needs, and facilitates achievement of optimum wellness in individuals, families, and groups. The nurse cares for individuals across the life span by intervening to meet healthcare needs according to the Quality and Safety Education for Nurses (QSEN) competencies.

Education is the formal and informal experience(s) which incorporates past and newly acquired knowledge, skills, and values to affect behavioral change. The process of learning is lifelong and is unique to each individual. Learning occurs with each life experience and is influenced by the developmental level and motivation of the learner. The methodology for teaching nursing best practice is the use of critical thinking, and clinical reasoning to support clinical judgement as the interdependent problem solving method(s) inherent in nursing. The nurse is an integral part of the decision making of the multidisciplinary approach of the health care team. Professional nursing practice requires specialized education incorporating research and evidence-based theoretical knowledge from nursing, medical, behavioral, physical, and natural sciences.

Professional nursing education involves progressive experiences which promote personal and professional development. This education is best acquired in a caring, nurturing environment characterized by opportunities for creativity and self-direction. The faculty is committed to providing an environment which enhances the acquisition of knowledge, skills, attitudes, and values while pursuing customer satisfaction and continuous improvement for individuals from the time of admission through graduation. The program of study provides a framework for progressing the student through a specialized curriculum which integrates policies, classroom instruction, computer learning activities, skills laboratory practice, utilization of a learning management system (LMS), with clinical laboratory practice to optimize the professional development of the student. Therefore, the faculty plans, implements, and evaluates an educational program which includes an organized curriculum, academic advising, counseling services, utilization of LMS, student development, and student government. The faculty is committed to demonstrate scholarship, evidence-based teaching and clinical practices which are then implemented in classroom, skills laboratory, clinical, and distance/hybrid teaching methodologies and to establish a supportive, nurturing environment for students.

Goal

Baptist Health College Little Rock-School of Nursing exists to prepare a graduate who demonstrates critical reasoning and judgement, and a commitment to the nursing profession by continuing personal and professional growth and by serving the community as a competent healthcare advocate, leader, manager, provider and teacher.

BELIEF

The BHCLR-School of Nursing shares the values of Baptist Health. Baptist Health is more than a business; it is a healing ministry. Our healing ministry is based on the revelation of God through creation, the Bible and Jesus Christ. At Baptist Health, care of the whole person, body, mind and spirit, is an expression of Christian faith. We are instruments of God's restorative power and are responsible for giving compassionate care.

PROGRAM OUTCOMES

- I. Integrate theoretical knowledge, clinical decision making, and the nursing process to plan client-centered care in a variety of healthcare settings across the lifespan.
- II. Utilize a culturally competent, holistic approach to execute evidence-based, client centered education and care in a variety of healthcare settings to individuals across the lifespan.
- III. Coordinate client-centered care according to ethical principles and legal standards to promote a culture of safety.
- IV. Exemplify professional nursing skills, attitudes and behaviors while managing, collaborating, and communicating with the client and multidisciplinary healthcare team.
- V. Interpret client data and utilize technology to support decision making and improve safety and quality of care.
- VI. Utilize the principles of pharmacology when providing nursing care for clients across the lifespan.

STANDARDS

The school is comprised of faculty, students, support staff, and a program of studies which offers learning experiences that strive to prepare students for entry in the role of nursing. Faculty are responsible for planning, implementing, and evaluating the total program of studies in accordance with Arkansas State Board of Nursing Standards (minimum requirements), the Accreditation Commission for Education in Nursing, and the Accrediting Bureau of Health Education Schools Standards.

STUDENT PROFESSIONAL DEVELOPMENT

Overall student behavior should reflect development and incorporation of BHCLR-SN Values, a positive and cooperative attitude, capability to benefit from counseling or advising services, compliance with policies of BH, BHCLR and BHCLR-SN, fulfillment of faculty expectations and demonstration of an understanding of the professional role of nursing.

SCHOOL SEAL, PIN, AND EMBLEM

The BHCLR-SN pin and cap are symbols of the school, often used as an insignia. Both were designed in 1921 by Miss Elizabeth Shearer, the first superintendent (Director) of the school. The cap became known and seen on a worldwide basis. In 1993, the last capping ceremony was held, as caps ceased to be part of the student uniform. The cap is on display in the archives room at BHCLR. It is unknown if a description of the pin was written at that time. If it was, somehow it has been lost through the years. The following description was written in 1993:

The design of the solid gold pin is an adaptation of the Maltese Cross. A wide, raised band adorns the

edges of each cross arm. The multiple networks of nursing are represented by an interlocking mesh covering the inside area of each arm. Man's continuum of life is represented by the raised large wide circle surrounding a smooth, raised cross. The raised cross represents the fundamental Christian beliefs of the school and a relationship to our Savior, Jesus Christ and His healing ministry. The rays of light emanating from behind the cross signify eternal hope and salvation. The name of the school is inlaid in blue lettering within the circle.

As the name of the hospital changed through the years, the name of the school changed in concert -
- 1921-1940 Baptist State Hospital Training School of Nurses; 1950-1966 Arkansas Baptist Hospital School of Nursing; 1967

Arkansas Baptist Medical Center School of Nursing; 1968 Arkansas Baptist Hospital School of Nursing; 1976-1987 Baptist System School of Nursing; 1988-1990 Baptist Medical System School of Nursing; 1991-1997 Baptist School of Nursing; 1998-2006; Baptist Health School of Nursing; 2007- 2015 Baptist Health Schools Little Rock School of Nursing, and 2015- Baptist Health College Little Rock – School of Nursing- - as did the name within the circle. The school name reflected on a graduate's pin was current at the time the individual graduated. Each graduate receives a school pin during graduation. Those not graduating at commencement, receive the pin when all graduation requirements are fulfilled.

The R.N. pin guard is not considered, by the school, to be an official part of the symbol; however, many graduates choose to purchase and wear a guard, as added security of the pin.

SCHOOL POEM, PRAYER, AND SONG

The following poem My Cap and prayer, Nurse's Prayer, are the official Baptist Health College Little Rock- School of Nursing poem and prayer. Although few nurses wear caps in current times, it remains the symbol of nursing. The authors are not known, but the words bring hope and inspiration to faculty, students and graduates.

MY CAP

It's only a piece of white muslin
Perched on the top on my head,
Its value to some may mean
nothing, To me it's a symbol
instead.

A symbol of hope, cheer and comfort,
To those who are suffering and ill,
To me it gives strength unbelieving,
My work to perform with a will!

Sometimes I am discouraged,
disheartened, My tasks seem to hopeless to
me,
My cap seems to speak of a promise - -
Of things I want to be!

No jewels adorn its wide brim,
So simple and plain is its line - -
Treat it with reverence and honor,
For there's only one cap of its
kind!

Author Unknown

A NURSE'S PRAYER

My mission; Lord, is, "mercy abide with me that I will not forget." At times, I may weaken after long hours, renew my strength- -
for I am only human.

If my patients and doctors at times become demanding, let me not forget, I above chose to serve with grace and spiritual beauty.

Lord, inspire me on to help mankind.

Author Unknown

Baptist Health College Little Rock- School of Nursing SONG

The Baptist Health College Little Rock- School of Nursing Song was written by Doris Lundghest, an alumnus of the school. The words remain appropriate today.

To BHCLR-SN we will always be true,
We will always be loyal to you,
Unite in purpose we stand,
For the Best Nursing College in the
land, Your praises forever we'll
sing, Throughout all the ages we
will ring, We will always be loyal
to you, We will always be loyal to
you.

Author: Doris Lundghest

The official school emblem shall be the same as that of Baptist Health. The official school seal is applied to the official school transcript and other official documents as determined by the Chancellor. The seal is maintained in a confidential area and accessed only by designated individuals.

ACCREDITATION, APPROVAL, LICENSURE AND MEMBERSHIP

The school will provide the student with the highest standards of education and training as identified in the school mission, philosophy and outcomes. The belief, values, mission and Code of Ethical Conduct of BH will help guide the student toward attaining customer satisfaction.

The faculty of BHCLR-SN believes the school should provide a learning environment to the student through the classroom, computer laboratory (if applicable), skills laboratory (if applicable), and clinical laboratory work, inclusive of the BH values of Service, Honesty, Respect, Stewardship, and Performance with a commitment to providing quality patient care.

The Dean, Schools of Nursing is responsible for administrative activities of the school. The Coordinators are responsible for facilitating and managing the day to day operations of the school. Course Leaders assist the Coordinator in managing course activities. The faculty is responsible for admission, maintenance of student records, scheduling, grade reporting, teaching, coordination of classroom teaching and clinical rotation supervision.

The customer in the BHCLR-SN includes the students who have been admitted into the program, the department of nursing in the hospitals, the support staff, and the administrative staff. It is the goal of the school to provide support

to each member of the customer.

BHCLR-SN is approved by the Arkansas State Board of Nursing (ASBN), accredited by the Accreditation Commission for Education in Nursing (ACEN) with conditions and accredited by the Accrediting Bureau of Health Education Schools (ABHES).

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Falls Church, Virginia 22043
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Completion of the program of study and graduation assures eligibility to apply for the National Council Licensure Examination for Registered Nurses (NCLEX-RN). Successful candidates on the NCLEX-RN are recognized as a Registered Nurse, having demonstrated competency and quality performance in the profession.

However, persons that have pleaded guilty or nolo contendere to, or been found guilty of an offense listed in **ACA §17-87-312. Criminal background checks** in the *Nurse Practice Act of the State of Arkansas** may not be eligible to receive or hold a license issued by the Arkansas State Board of Nursing.

Graduation from Baptist Health College Little Rock – School of Nursing does not assure the Arkansas State Board of Nursing’s approval to take the licensure examination. See www.arsbn.arkansas.gov/lawsRules/Documents/SUBCHAPTER_3.pdf. * Below is the ACA § 17-87-312 in its entirety.

17-87-312. 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 Division 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 Division 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 Division of Arkansas State Police shall forward to the board all releasable information obtained concerning the applicant.
- (e) For purposes of this section, the board shall follow the licensing restrictions based on criminal records under § 17-3-102.

(f)

- (1) The board may issue a nonrenewable temporary permit for licensure to a first-time applicant pending the results of the criminal background check.
- (2) The permit shall be valid for no more than six (6) months.

(g)

(1) Any information received by the board from the Identification Bureau of the Division of Arkansas State Police under 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 Division of Arkansas State Police.

(h) Any information made available to the affected applicant for licensure or the person whose license is subject to revocation shall be information pertaining to that person only.

(i) Rights of privilege and confidentiality established in this section shall not extend to any document created for purposes other than this background check.

(j) The board shall adopt the necessary rules to fully implement the provisions of this section.

(k)

(1) The board may participate at the state and federal level in programs that provide notification of an arrest subsequent to an initial background check that is conducted through available governmental systems.

(2) The board may submit an applicant's fingerprints to the federal Next Generation Identification system.

(3) The fingerprints may be searched by future submissions to the Next Generation Identification system, including latent fingerprint searches.

(4) An applicant enrolled in the Next Generation Identification system is not required to re-fingerprint when a subsequent request for a state or federal criminal history background check is required if:

(A) A legible set of the applicant's fingerprints is obtained when the applicant enrolls in the Next Generation Identification system; and

(B) The applicant is subject to the Rap Back service of the Next Generation Identification system.

(l) The Identification Bureau of the Division of Arkansas State Police and the Federal Bureau of Investigation may maintain fingerprints in the Integrated Automated Fingerprint Identification System

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 — 5-64-110, 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;

- () The length of time since the offense was committed;
- (A) Subsequent work history since the offense was committed;
- (B) Employment references since the offense was committed;
- (C) Character references since the offense was committed;
- (D) Relevance of the offense to the occupational license; and
- (E) 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;

(37) Endangering the welfare of a minor in the first degree as prohibited in § 5-27-205;

(38) Adult abuse that constitutes a felony as prohibited in § 5-28-103; and

(39) 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.

Persons who have pleaded guilty, nolo contendere to, or been found guilty of a crime (as identified in Arkansas Code, Act 1208 of 1999 Legislative Session) may not be eligible to receive or hold a license issued by Arkansas State Board of Nursing.

AFFILIATIONS

Academic

The BHCLR-School of Nursing maintains a contractual partnership with a college or university for the provision of required science and general education courses that provide a foundation of knowledge to support the upper division of the nursing major.

General Education courses at BHCLR are offered through Geneva College-Portage division.

The BHCLR – SN works cooperatively with Arkansas Tech University (AR Tech), the University of Central Arkansas (UCA), the University of Arkansas for Medical Sciences (UAMS), Ouachita Baptist University (OBU) and the University of AR (U of A) to offer qualified BHCLR-SN graduates a seamless and online option to complete a Bachelor of Science in Nursing degree. The complete agreement between BHCLR and AR Tech University, UCA, and U of A is student-friendly and accessible. Additional information is located on the school's website at www.bhclr.edu.

Clinical

The BHCLR – School of Nursing has multiple clinical affiliates located throughout the state of Arkansas. These clinical affiliations provide students with learning opportunities in a variety of settings.

ADMINISTRATION, FACULTY AND STAFF

Baptist Health Executive Officers

Troy Wells,..... CEO, Baptist Health

Baptist Health Medical Center- Little Rock Executive Officer

Mike Perkins President, BHMC-LR

BHCLR-SN Administrative Officers

Dr. Judy Pile, Ed.D.....Chancellor

Laura Hamilton, MNsc, RN..... Dean of Nursing

Susan Brock, DNP, RN Coordinator, Schools of Nursing

Amy Morris, DNP, APRN, CNP, CNE.....Coordinator, School of Nursing

FACULTY		
Kimberly Baranski, MSN, RN	Shelley Horst, MSN-ED, RN, CMSRN	Stacy Palmer, DNP, RN
Julie Clark	Nancy Jarrett, DNP, RN	Phillip Prousnitzer, MSN, RN, CEN, TCRN,CCRN, CPEN, CTRN, CFRN
Katherine Crow, DNP, RN	Katherine Jett, PhD, RN, NEA-BC	Betty Rochon, MSN, RN, CMSRN
Whitney Eagle, MSN, RN, CPN	Alana Kaucher, DNP, RN	Jordan Sanders, BSN, RN
Cassandra Fonseca, DHA, BSN, NPD-BC, CNOR	Heather Lawrence, MNsc, RN	Johnnie Schaumleffel, MSN, APRN, FNP-BC, FNP-C, CEN
Lindsey Gates, DNP, APRN, CPNP	Laurie Croft Martin, MSN, RN	Tabori Tidwell, MSN/Ed, RN
Karen Gautney, MSN, RN	Debra McIndoe, DNP, RN	Diane Wood, DNP, RN
Schelista Glenn, DNP, RN, CEN	Heidi Niswander, DNP, RN, BC	
Haley Haile, BSN, RN	Debbie Oglesby, PhD, RN, CNE	
Heather Hartness, BSN, RN	Candice Palmer, BSN, RNC-NIC	

BHCLR PROFESSIONAL STAFF

John Ramsay, BA.....	Senior Systems Administrator
Jamie Clark, Ed.D., MBA.....	Business Office Coordinator
P. Hope Coleman, PhD, CPE, CBC.....	Academic & Spiritual Counselor
Richard Grows, BBA.....	Systems Administrator
Lauren Harper, BSE.....	Disability Services Specialist
Kristin Waddell, BSEd.....	Registrar
Natalie Martin, MS, BS.....	Financial Aid Administrator
.....	BHCLR Head Librarian
LaQuinta Fleming, BS.....	Financial Aid Advisor
Melanie Strawn, MPA.....	Enrollment Coordinator

BHCLR SUPPORT STAFF

Ebony Crawford.....	Financial Aid
Dominique Dumas.....	Student Services Support Staff
Sharon Eubanks.....	Secretary II to the Chancellor and Dean of Nursing
Garrett Gray, BS.....	Enrollment Services Advisor I
Bethany Griffis.....	Enrollment Services Advisor I
LaFanta Jackson.....	Enrollment Services Advisor I
LaTerika McBride.....	Financial Aid Support
Kathleen Peterson.....	Secretary II
Jamie Ramey, BBA.....	Accounting Specialist II
Robin Shepherd.....	Enrollment Services Advisor I
Stacey Sides, AA.....	Assistant Registrar
Stephen Thomas.....	Maintenance Technician
Vanessa Wilson, AA.....	Accounting Specialist III

FACULTY CLASS SPONSORS

Each entering class is assigned a minimum of two (2) faculty sponsors. The sponsors are faculty members who volunteer for the assignment because they consider it a privilege to contribute time, knowledge and expertise to reward student professional development. The general role of class sponsors is as follows:

1. attend class meetings,
2. coordinate class officer elections,
3. assist class as needed,
4. provide guidance according to policies (BH, BHCLR, BHCLR-SN and affiliating college, clinical agencies or university) that relate to class business, and
5. follow class sponsor guidelines and work closely with respective administrative individual or designee and Special Events Committee.

GENERAL INFORMATION

ADMINISTRATIVE SERVICES

School administrative staff provide numerous student services free of charge to the student (except for official transcripts). A student needing such services is required to:

1. Obtain the Administrative Service Request Form from the rack in Suite 1004 or Transcript Request form from the Business Office. These forms can also be found at www.bhclr.edu
2. Submit completed form to designated staff.
3. Administrative staff will follow through with fulfilling the request for the student; two (2) weeks is the usual time period needed to complete most requests.

FACULTY ORGANIZATION

The Faculty Organization (FO) provides each member with the authority and responsibility to accomplish the goal of the school by participating in the planning, development, implementation and evaluation of school outcomes. All faculty are members and serve on various standing committees and task forces. Committees fulfill specific functions that in turn, fulfill the overall functions of the organization. Student representatives are invited, when appropriate, to serve on standing committees, sub-committees and task force.

RE-ENTRY REQUIREMENTS

Please see the Academic Information section of the BHCLR Catalog for information about reentry into the program of study.

STUDENT CLASSIFICATION AND IDENTIFICATION

A student is classified according to the level of study associated with the program.

1. Traditional Track Plus General Education Prep may enroll in general education course(s).
2. Nursing: enrolled in nursing courses according to an educational plan.
3. Freshman: enrolled in Freshman courses as identified by curriculum plan.
4. Sophomore I: enrolled in Sophomore I courses as identified by curriculum plan.
5. Sophomore II: enrolled in Sophomore II courses as identified by curriculum plan.
6. Commencee: eligible to participate in commencement ceremony, but has not yet fulfilled all graduation requirements.
7. Non-graduate: not enrolled in active study and has neither completed the program of study, according to educational plan nor fulfilled all requirements for graduation within a defined period.
8. Graduate: successfully completed the program of study and fulfilled all requirements for graduation; awarded diploma, school pin and cap if requested.
9. Registered nurse: passes NCLEX-RN examination; may sign R.N. credential with name; wear school pin and cap as applicable.

IDENTIFICATION BADGE

A student is identified by a student identification badge (ID) worn at all times in upper left shoulder area, with photo, name and title visible. Failure to wear ID Badge as required may lead to corrective action by the school.

CREDIT BY EXAMINATION

Credit by examination may also be considered in the transfer of certain general education courses. Credit may be obtained through the College Level Examination Program (CLEP) and in Advanced Placement Program (AP) exams. BHCLR uses the following policies for awarding transfer credit by examination to students:

- Transfer credit may be awarded for courses that have received CLEP or AP credit from a regionally accredited institution.
- Students must be currently enrolled at BHCLR before CLEP or AP credit can be posted to the transcript.
- CLEP credit may be awarded for Chemistry, College Algebra, English Composition, Sociology and Psychology,
- AP credit may be awarded for credit for Chemistry, English Composition and Psychology.
- No grade is awarded for credit, and credit is not calculated in the grade-point average (GPA).
- Credit will not be awarded if the class has been taken and a grade of “C” or better has been earned.
- Official CLEP score reports must be submitted to BHCLR.
- Additional information concerning credit by examination policies, tests accepted and required scores is available on the BHCLR website.

Licensed Practical Nurse (LPN), Licensed Psychiatric Technician Nurse (LPTN) or Licensed Vocational Nurse (LVN) students receive advanced placement to the Sophomore I Semester in the Accelerated Track based on successful passage of the National Council for Licensure Examination –Practical Nurse (NCLEX-PN). The school complies with the Arkansas Nursing Articulation Model approved by the National Association of Nurse Educator Programs (NANEP).

Arkansas Certified Paramedics (ACP), and Nationally Registered Paramedics receive advanced placement to the Sophomore I Semester in the Accelerated Track based on successful passage of the Excelsior Examination. A student seeking credit by examination for designated required general education courses contacts the Registrar for information.

DRESS CODE: CAMPUS AND CLASSROOM

Attire while on campus or in classroom is in compliance with the following dress code and the BHCLR Dress Code, as described in the Student Handbook: General Section. Faculty firmly enforces the codes and applies corrective action for non-compliance.

BHCLR-SN specific Campus/Classroom Dress Code policies are identified as follows:

While on campus attending lectures or skills labs, students may wear an official approved navy scrub top or any official BHCLR top given to them by the college with navy scrub pants. Scrub attire must be neat, clean, in good condition, and have a professional fit, including but not limited to no tight fitting, gapping, low rise pants etc. Decorative trim or “piping” is not acceptable.

While on campus attending lectures or skills labs, students will be allowed to wear any official BHCLR top given to them by the college, with scrub pants appropriate in color to their program of study.

While on campus attending lectures or skills labs, students will be allowed to wear any official/approved program specific top purchased by the student, with navy scrub pants.

While on campus attending lectures or skills labs, students will be allowed to wear a BHCLR approved top with a BHCLR logo in any color that is purchased on the BHCLR Spirit Store online with navy scrub pants.

Shoes: Shoes with enclosed heels and toes must be worn with scrub attire. Shoes must be clean. Boots, “crocks” (open heel or with holes), or “flip flops” are not acceptable.

Hair: Hair must be neat and clean. Style and color may not be extreme. Hair must be of a natural color; colors including but not limited to green, blue, purple etc. are not acceptable. Hair style and color must reflect a professional appearance as approved by Faculty, Coordinators, or Dean, Schools of Nursing.

Identification badge: Student identification badge is worn at all times and is to be worn on the upper left shoulder area with the picture facing out. Decorative stickers or pins worn on the badge are not acceptable.

the following items are not acceptable:

Head covering of any type, unless required by religious practice;

Sunglasses;

Visible skin ornamentation/jewelry worn on areas, including but not limited to mouth, nose, tongue, earlobe expanders or eyebrows. The face and head are to reflect a professional appearance as approved by Faculty, Coordinators, or Dean, School of Nursing.

The campus dress code is expected to reflect professional dress at all times, and will be monitored by the Faculty, Coordinators, and Dean of Nursing. Noncompliance with required dress code will result in inability to attend learning experience and will result in corrective action.

Denim of any kind is not worn.

DRESS CODE: CLINICAL LABORATORY: OFFICIAL SCHOOL UNIFORM

Attire while in the clinical laboratory is in compliance with the following dress code. Faculty enforces the dress code and applies corrective action for non-compliance.

Female student:

Female students are required to wear solid white scrub pants and white top or solid white scrub dress, knee length or longer, and a solid color navy jacket during scheduled clinical laboratory activities. Attire must be neat, clean, in good condition, and have a professional fit, including but not limited to no tight fitting, gapping, low rise pants etc. Decorative trim or “piping” is not acceptable.

Tee shirts: Tee shirts are optional to wear under the clinical laboratory scrub attire. Tee shirt must be plain white with round or turtleneck (no wording) and may have long or short sleeves, but must be under top and tucked in.

Identification badge: Student identification badge is worn at all times and is to be worn on the upper left shoulder area with the picture facing out. Decorative stickers or pins worn on the badge are not acceptable.

Undergarments: Undergarments are worn at all times and must be of a color appropriate to skin hue, and are not visible or showing through clothing.

Shoes: Shoes must be white, all leather or leather-like with enclosed heels and toes. Shoes must be clean. Clean white shoelaces are worn as appropriate for shoe style.

Hose or socks: White hose or white socks are worn at all times. White hose only, without ornamentation, are to be worn with skirts/dresses. White socks are to be worn with the pants and without ornamentation. Hose or socks of a different color or with decorations, beads, etc. are not acceptable.

Hair: Hair must be neat, clean, well-groomed and off the uniform collar with little or no adornment. Style and color may not be extreme. Hair style must be of a conservative nature. Hair must be of a natural color; colors including but not limited to green, blue, purple etc. are not acceptable. Hair style

and color must reflect a professional appearance as approved by Faculty, Coordinators, or Dean, Schools of Nursing.

Nails: Nails must be clean, short in length. Nail polish allowed includes clear or pale opaque colors. Nail art, or artificial nails are not allowed.

Tattoos: Tattoos must not be visible.

Jewelry: Wedding band or rings; engagement rings are acceptable. One earring per ear is allowed and should be small enough and of an appearance so as not to interfere with equipment or patient care. Visible skin ornamentation/ jewelry as identified in Campus/Classroom Dress Code policies is not acceptable. A watch with a second hand or watch that measures seconds, ball-point pen with black ink, stethoscope, pen light and calculator, if course required are allowed.

Male student:

Students are required to wear solid white scrub pants and white top and a solid color navy jacket during scheduled clinical laboratory activities. Attire must be neat, clean, in good condition, and have a professional fit, including but not limited to no tight fitting, gapping, low rise pants etc. Decorative trim or “piping” is not acceptable.

Tee shirts: Tee shirts must be worn under the clinical laboratory attire. Tee shirt must be plain white with round or turtle neck (no wording) and may have long or short sleeves, but must be under top and tucked in.

Identification badge: Student identification badge is worn at all times and is to be worn on the upper left shoulder area with the picture facing out. Decorative stickers or pins worn on the badge are not acceptable.

Undergarments: Undergarments are worn at all times and must be of a color appropriate to skin hue, and are not visible or showing through clothing.

Shoes: Shoes must be white, all leather or leather-like with enclosed heels and toes. Shoes must be clean. Clean white shoelaces are worn as appropriate for shoe style.

Socks: White socks are worn at all times. Socks of a different color, or with decorations, beads, etc. are not acceptable.

Hair: Hair must be neat, clean, well-groomed and off the uniform collar with little or no adornment. Style and color may not be extreme. Hair style must be of a conservative nature. Hair must be of a natural color; colors including but not limited to green, blue, purple etc. are not acceptable. Hair style and color must reflect a professional appearance as approved by Faculty, Coordinators, or Dean, Schools of Nursing.

Conservative facial hair (beards and mustaches) may be worn (depending on facility policy) if neatly trimmed and does not interfere in patient care.

Tattoos: Tattoos must not be visible.

Jewelry: Wedding band or rings; wedding ring is acceptable. No earrings are allowed. Visible skin ornamentation/jewelry as identified in Campus/Classroom Dress Code policies is not acceptable. A watch with second hand or watch that measures seconds, ball-point pen with black ink, stethoscope, pen light and calculator, if course required are allowed.

ACADEMIC

The process of becoming a registered nurse begins with the basic principles of nursing incorporated with those of sciences and general education. The provision of nursing care, critical thinking, and management of nursing care provided by others, require the transference of knowledge.

ACADEMIC ADVISING

Faculty serve as academic advisors to students. A student is notified of advisor assignment at the beginning of each nursing course. A student is expected to contact his/her academic advisor for an initial conference. Faculty advisors may contact the student to arrange for conferences as needed.

ACADEMIC PROBATION

The status of academic probation indicates that the student's continued enrollment in the school is at risk. Conditions specified must be fulfilled within a defined period of time before the status is changed.

1. A student is placed on probation for academic reasons by the respective Coordinator or designee.
2. Probationary terms are determined on an individual basis by the respective Coordinator or designee.
3. Failure to meet designated probationary terms will result in either academic suspension or academic dismissal.

ATTENDANCE, ABSENCE AND TARDY

Student attendance, including absence and tardy, are described in the following summarized policies:

1. Regular and prompt attendance at all scheduled learning experiences is required for the student in order to meet the outcomes of each nursing course and to demonstrate progressive professional development.
2. Faculty understand a student may be absent from class, because of situations not in student's control; however, it is also understood that an absent student is not gaining benefit of school offerings; therefore, an attendance record is maintained for each student for each nursing course. A record of repeated absenteeism and tardiness will lead to corrective action.
3. The student is required to notify the assigned classroom, computer laboratory, skills laboratory, or clinical faculty of an absence or tardy occurrence prior to the scheduled class, skills laboratory, clinical or activity starting time.
4. Attendance at scheduled learning experiences during inclement weather, including winter storms, is expected unless otherwise notified by Course Leader or school official, unless BHCLR Inclement Weather policy is initiated by administration.
5. A student may be charged a fee if extra faculty time is needed to meet course outcomes as a result of an absence. The fee is due and paid in full, prior to the experience.
6. An absence of five (5) consecutive school days without notification to course faculty may result in Administrative Withdrawal of the student by the college.

10. A student absent from classroom, computer laboratory, or scheduled clinical learning experiences because of a health care provider's order or health problem requiring medical intervention, must provide the course faculty a written clearance from the health physician or advanced practice nurse prior to resuming study. The statement must include clearance to attend classes and to perform course required clinical laboratory activities including school required essential functions upon return to campus.
11. A student absent from classroom, computer laboratory, or scheduled clinical learning experiences, because of a death in immediate family (spouse, parent, sibling, grandparent, or child) must provide evidence of the death on return to school (obituary, funeral program, etc.) or as directed by respective Coordinator or designee. Official documentation must be submitted as requested by the school upon return to campus.
12. If absence or tardy occurs because of an arrest or court order, the student is required to contact either the assigned classroom, computer laboratory, skills laboratory, or clinical faculty regarding expected date or time of return. Official documentation must be submitted as requested by the school upon return to campus.
13. If absence or tardy occurs because of military duty, the student is required to contact either the assigned classroom, computer laboratory, skills laboratory, or clinical faculty regarding expected date or time of return. Official documentation must be submitted as requested by the school upon return to campus.

Attendance Definitions

Absence: Not present as scheduled learning experience.

Excused absence: An absence which does not count against a student attendance record, limited to: court appearances, military duty and approved funeral leave for immediate family member (spouse, parent, sibling, grandparent, or child), and unanticipated, unavoidable, accident or illness resulting in hospitalization. *

The Course Leader will make the decision as to whether the student must pay the makeup fee of \$10 per hour based on the submitted documentation and the overall performance and attendance of the student.

Unexcused absence: Absence which counts against a student attendance record; including (but not limited to) absence due to minor illness, medical condition or a physician's or advanced practice nurse's order.

Theory Attendance

Theory attendance will be recorded as hours missed. Attendance will be recorded per course. Faculty may take attendance at any point during lecture. Attendance will be recorded utilizing the course attendance roster. Any student who is not present at the time that attendance is taken and does not sign the attendance roster at that time will be counted absent. Students are expected to attend class regularly as attendance is consistently found to increase student success.

Corrective Action for Classroom Attendance is as follows:

Students who miss 8% of theory contact hours will receive a Written Warning
 Students who miss 12% of theory contact hours will be placed on Conduct Probation by the Coordinator or designee
 Students who miss 16% of theory contact hours may be Administratively Withdrawn by the Coordinator.

Theory Exam Attendance

All students are required to take every examination as scheduled. Students who are absent for a course examination will be required to take a make-up examination as scheduled on the course calendar to replace the missing grade. Students will only be allowed to replace one examination with a make-up test. Any student missing more than one examination in any course will receive a zero (0) for subsequent missed examinations.

Clinical Laboratory Attendance

Clinical laboratory attendance will be recorded as days missed. Attendance will be recorded per semester and will include time missed in all courses. Any student who is tardy by thirty (30) minutes or more will be counted absent. Students will be required to make-up all clinical laboratory days missed. Students will be given the opportunity to make-up no more than four

(4) days of clinical laboratory. Clinical make-up days include absences and unsatisfactory completion of learning outcomes. Students will be required to attend the scheduled clinical make-up experiences as outlined on the calendar. Any student who fails to attend these make-up experiences will receive an unsatisfactory clinical grade. Students will receive a written warning upon missing their second clinical day. Students will be placed on conduct probation by the Coordinator upon missing their third clinical day. Any student who is absent more than four (4) days will be administratively withdrawn by the Coordinator.

Corrective Action for Clinical Laboratory Attendance is course specific and is found in the course syllabus.

RNA Theory Exam Attendance

All students will be required to take the Comprehensive Final Examination as scheduled. Students who are absent for a course examination will be required to replace the missed examination with the comprehensive examination grade. Students will only be allowed to replace one examination with the comprehensive final. Any student missing more than one examination in any course will receive a zero (0) for subsequent missed examinations.

RNA Classroom Attendance

1. Attendance is based on a percentage of theory clock hours for the current course(s) in which the student is enrolled.
2. Attendance will be tracked throughout the program of study.
3. Attendance will be recorded starting with the beginning of each course. However, Progressive Corrective Action(s) will be applied based on the level of Corrective Action(s) from the previous course(s) starting with the first enrolled course of the first semester. Corrective action will be recorded on the BHCLR Corrective Action Record with a copy given to the student and an original placed in the student file. Criteria for each Progressive action is as follows:

When the student has missed:

*10% of total clock hours for theory in a course = written conference

*15% of total clock hours for theory in a course = written warning

*20% of total clock hours for theory in a course = probation and meet with

Coordinator RNA Clinical Attendance

Clinical Laboratory attendance will be recorded as days missed. Any student who is absent more than 4 days will be administratively withdrawn from the program by the Coordinator. The corrective action steps are outlined below.

Corrective Action for Clinical Laboratory Attendance is as follows:

Students who miss 2 clinical days will receive a Written Warning

Students who miss 3 clinical days will be placed on Conduct Probation by the Coordinator
Students who miss more than 4 clinical days will be Administratively Withdrawn by the Coordinator

BREAKS AND MEAL TIMES

Students are scheduled breaks and meal times during learning activities. Classroom break is typically ten minutes after each fifty minutes of classroom instruction and mealtime is forty-five minutes. Classroom mealtimes are reflected on the course calendar.

Clinical breaks and mealtime may be assigned by the clinical faculty, nurse or preceptor and are based on established policies of the clinical agency or patient care assignments.

To ensure continued patient care and safety, students are required to report to the responsible faculty or clinical nurse responsible for their patients prior to leaving on break or meal and on return to the clinical unit after break or meal.

PROGRAM OUTCOMES

- I. Integrate theoretical knowledge, clinical decision making, and the nursing process to plan client- centered care in a variety of healthcare settings across the lifespan.
- II. Utilize a culturally competent, holistic approach to execute evidence-based, client-centered education and care in a variety of healthcare settings to individuals across the lifespan.
- III. Coordinate client-centered care according to ethical principles and legal standards to promote a culture of safety.
- IV. Exemplify professional nursing skills, attitudes and behaviors while managing, collaborating, and communicating with the client and multidisciplinary healthcare team.
- V. Interpret client data and utilize technology to support decision making and improve safety and quality of care.
- VI. Utilize the principles of pharmacology when providing nursing care for clients across the lifespan.

EDUCATIONAL PLAN

A student's Educational Plan (E.P.) serves as a guide for the sequencing of the required courses reflected in the program of study. School official develops the plan before the selected applicant enrolls. Changes in the plan may be requested by contacting the appropriate Coordinator or Registrar. Student must have Coordinator's approval prior to deviation from the educational plan. Deviation in the EP may jeopardize enrollment and completion of the program of study. Educational Plans reflect all required courses for nursing enrolled students; this plan must be followed by students of all classifications.

GRADING SYSTEM

It is the primary responsibility of the school to provide a teaching, learning BH cultural environment that promotes student maximum learning. Each school has a respective grading system published in the school catalog and student handbook.

The faculty teach and evaluate student learning, judge the quality of student learning and progressive development toward a minimum competency level required for patient safety and public protection. It is the faculty who determines the final evaluation of a student's progress and assigns the final corresponding grades.

Faculty have discretion, both subjective and objective, in the evaluation and judgment of a student's performance in all areas of learning. Students and graduates, in turn, provide information and data to the school and the faculty

related to their level of satisfaction regarding the program of studies, teaching and learning environment and the culture within.

The system of grading adopted by the faculty and the school is for the purpose of grade determination and ultimately the progression, promotion and graduation of students. The grading system of affiliating colleges and universities is reflected in respective course syllabi and publications.

The grading system presented herein is generic to all nursing courses; however, there are exceptions. In some nursing courses, within the clinical and nursing skills laboratory components, a student will receive a numerical score for a written assignment. In those situations, the course faculty determine the numerical score for the rating of satisfactory “S” for that specified course work, as reflected in the specific nursing course guidelines.

The final grade of “C” or above is required for all components of a nursing course which includes theory, clinical laboratory and/or nursing skills laboratory component of a nursing course. If a student achieves less than a final grade of “C” for theory or an Unsatisfactory “U” for clinical laboratory and/or nursing skills laboratory, all components of the nursing course must be repeated.

The school utilizes a grading system to signify student progression and the quality of learning as the student moves through the program of study. A course grade and the Grade Point Average (GPA) is determined and assigned through an established and approved process. The GPA is used for many purposes: to mention a few, but not limited to: Honors recognition at commencement, scholarship awards, and student academic record on the official transcript of the School.

Baptist Health College Little Rock- School of Nursing Grading System

Theory Grade

1. Faculty evaluate student learning and assign a final theory grade at the end of the nursing course based on student achievement of course outcomes in the classroom,

Grade	Percent Range	Quality	Value
A	94-100	Outstanding	4
B	86-93	Above Satisfactory	3
C	77-85	Satisfactory	2
D	70-76	Unsatisfactory	1
F	0-69	Failing	0
I	0	Incomplete	0
W	0	Withdrawal	0
WX	0	Administrative Withdrawal	0

2. Final theory grade is determined according to the following grading scale:
3. Course Faculty determine the theory grade component of a nursing course by utilizing the following process:
 - 3.1 total points possible for theory examinations, assignments, quizzes (if applicable) and/or final exam for each nursing course are determined by the faculty as identified on respective courses syllabus,
 - 3.2 the faculty prepare a computer answer sheet key with correct item responses, which is then compared to the student’s computer answer sheet responses. The number of incorrect responses are

counted, and subtracted from the total number of points possible(questions) on the exam, resulting in a raw score (see example):

50 total points possible on the exam
10 incorrect responses
40 raw score

- 3.3 at course end, all raw scores are summed to determine the total points achieved for the theory grade,
- 3.4 the total points achieved are divided by the total points possible for the theory grade. At this point the computer will perform rounding to convert this decimal to a percentage grade score.

4. The final theory grade is recorded on the official transcript of the school.

NURSING SKILLS LABORATORY GRADE

1. Faculty evaluate student learning in the Nursing Skills Laboratory (NSL) and determine a final nursing skills laboratory grade to be assigned at the end of a nursing course. The grade is based on professional faculty judgment of the student's achievement of the behavioral indicators which measure each course outcome.
2. The Record of Nursing Skills Laboratory Progress (RNSLP) is the evaluation tool used to document the student's performance in the NSL setting and ultimately the student's achievements of the behavioral indicator(s) which measure each course outcome. The RNSLP and evaluation of performance is shared with the student as determined by the nursing course faculty. The student's performance is assigned a quality performance rating symbol using the following:

<u>Quality Performance</u>	<u>Rating Symbol</u>
Satisfactory Progress	SP
Unsatisfactory Progress	UP
Incomplete Progress	IP
Not Applicable	NA
Not Observed	NO
Opportunity Not Available	ONA

PROCESS:

1. Each vertical column of the RNSLP denotes an evaluative time frame in which the student is in the nursing skills laboratory setting. A rating symbol, shown in #2 above, is used to denote the student's quality performance of each behavioral indicator and is placed in the vertical column of the RNSLP.
2. If a student achieves a rating symbol of "IP" or "UP" in the vertical column of the RNSLP, the rating symbol of "IP" or "UP" is assigned to the course outcomes.
3. The faculty review the rating symbol assigned to each course outcome and after analysis determine an Indicator Final Rating (IFR) for each course outcome. Determination of the IFR is accomplished by evaluating the student's progressive development and overall performance in the nursing course. The following is used to document the IFR:

<u>Quality Performance</u>	<u>Rating Symbol</u>
Satisfactory	S
Unsatisfactory	U
Incomplete	I

4. If a student receives an IFR rating symbol of incomplete “I” for the performance of a course outcome recorded on the RNSLP, the symbol “I” is assigned. An incomplete “I” grade indicates the student has not yet fulfilled course requirements and that either additional coursework is needed or make-up work is to be completed. An incomplete will convert to a course grade of “F” if the student is Unsatisfactory “U” or has not completed required work within the identified time frame.
5. If a student receives an IFR rating symbol of unsatisfactory “U” for the performance of any course outcome, achievement of the “U” rating will convert to a course grade of “F” and will be reflected on the official transcript and the student will neither progress nor promote.
6. A student must achieve Satisfactory “S” for all course outcomes to progress or promote.

CLINICAL LABORATORY GRADE

1. Faculty evaluate student learning in the Clinical Laboratory (CL) and determine a Final Clinical Laboratory grade to be assigned at the end of a nursing course. The grade is based on professional faculty judgment of the student’s achievement of the behavioral indicators which measure each course outcome.
- 0.
2. The Record of Clinical Progress (RCP) is the evaluation tool used to document the student’s performance in the CL setting and ultimately the student’s achievements of the behavioral indicators which measure each course outcome. The RCP and evaluation of performance is shared with the student as determined by the nursing course faculty. The student’s performance is assigned a quality performance rating symbol using the following:

<u>Quality Performance</u>	<u>Rating Symbol</u>
Satisfactory Progress	SP
Unsatisfactory Progress	UP
Incomplete Progress	IP
Not Applicable	NA
Not Observed	NO
Opportunity Not Available	ONA

PROCESS:

1. Each vertical column of the (RCP) denotes an evaluative time frame in which the student is in the clinical setting. A rating symbol, shown in #2 above, is used to denote the student’s quality performance of each behavioral indicator and is placed in the vertical column of the RCP.
2. If a student achieves a rating symbol of “IP” or “UP”, in the vertical column of the RCP, the rating symbol of “IP” or “UP” is assigned to the course outcome.
3. The faculty review the rating symbol assigned to each course outcome and after analysis determine an indicator final rating (IFR) for each course outcome. Determination of the IFR is accomplished by evaluating the student’s progressive development and overall performance in the nursing course. The following is used to document the IFR.

<u>Quality Performance</u>	<u>Rating Symbol</u>
Satisfactory	S
Unsatisfactory	U
Incomplete	I

4. If a student receives an IFR rating symbol of Incomplete “I” for the performance of a course outcome recorded on the RCP the symbol “I” is assigned. An incomplete “I” grade indicates the student has not yet fulfilled course requirements and that either additional coursework is needed or make-up work is to

be completed. An incomplete "I" grade indicates the student has not yet fulfilled course requirements and that either additional course work is needed or make-up work is to be completed. An incomplete will convert to a course grade of "F" if the student is Unsatisfactory "U" or has not completed required work within the identified time frame.

5. If a student receives an IFR rating symbol of unsatisfactory "U" for the performance of any course outcome, achievement of the "U" rating will convert to a course grade of "F" and will be reflected on the official transcript and the student will neither progress nor promote.
6. A final clinical laboratory grade of satisfactory "S" is required to progress and for

promote. INCOMPLETE GRADE

1. The assignment of an incomplete grade is at the discretion of the faculty. An incomplete "I" grade indicates the student has not yet fulfilled course requirements and that either additional coursework is needed or makeup work is to be completed. A final judgment and final grade determination of the student's performance is made after the student fulfills the specified course work.
2. The incomplete grade must be cleared by satisfactory completion of all additional required course work designated in writing and within the established time frame set by the faculty.
3. If the incomplete grade is not cleared as described in #2 above, the "I" shall be converted by the faculty as either a final grade of "F" for Theory, "U" unsatisfactory for CL and, if appropriate, the NSL. If a student receives an IFR rating symbol of unsatisfactory "U" for the performance of any course outcome, achievement of the "U" rating will convert to a course grade of "F" and will be reflected on the official transcript and the student will neither progress nor promote.
4. All policies related to expenses incurred by the school associated with a student's clearance of an incomplete grade apply. The Coordinator, Campus and Financial Services must be contacted by the student for information and payment of fee. Payment must be made prior to beginning the specified course work. The receipt is shown to the faculty member before the specified work is allowed.
5. Students who are suspended for investigative purposes and who are reinstated, will be allowed to make up incomplete course work without payment of make-up fees.
6. Dismissed students will not be allowed to make up incomplete course work.

PROMOTION AND PROGRESSION (Clinical Laboratory and Nursing Skills Laboratory)

1. A student must progress each clinical week toward achievement of each course outcome and by course end, have at least performed each course outcome with a Satisfactory "S" rating. The clinical rating symbols of SP, UP, IP, ONA and NA, NO are documented to denote progression of the student toward achievement of the course outcomes by a quality level of performance. The following weekly progress rating is used:
2. Final determination of the student's progress is documented in the column under the heading Indicator Final Rating (IFR) on the Record of Clinical Progress (RCP).
3. The IFR for CL and NSL are determined using the following criteria.
 - 3.1 Satisfactory "S": by course end, the student has achieved the course outcome by performing with progressive learning:
 - 3.1.1 all behavioral indicators related to each course outcome,

- 3.1.2 essential psychomotor skills according to policy and established process(es), and
- 3.1.3 each course outcome without either continual faculty guidance, intensive supervision or maximum assistance from other.
- 3.2 Unsatisfactory “U”: by course end, the student has not achieved the course outcome by performing with progressive learning:
 - 3.2.1 all behavioral indicators related to each course outcome,
 - 3.2.2 consistent progress in the performance of each behavioral indicator related to a course outcome,
 - 3.2.3 essential psychomotor skills according to policy and established process(es), and
 - 3.2.4 each course outcome with either continual faculty guidance, intense supervision or maximal assistance from others.
 - 3.2.5 student dismissed or administratively withdrawn for cause or conduct is automatically assigned a “WX”. Dismissal is reflected on the official school transcript.
- 3.3 An established process is followed by both faculty and students in the notification of the student of outcome grades (progressive or final):
 - 3.3.1 Student progress in the performance of behavioral indicators, which measure clinical outcomes, must be at least a Satisfactory “S”, is documented by the clinical faculty on the RCP and/or RNSLP.
 - 3.3.2 Documentation of Unsatisfactory “U” progress on the RCP and/or RNSLP is shared with a student according to an established process described in the respective course syllabus. The student signs and dates the documentation and is given opportunity to ask questions and write comments.
 - 3.3.3 Upon completion of the course, each student receives a final evaluation and receives final course grade(s).
 - 3.3.4 Faculty member records the final grades according to established policies and

processes. GRADE POINT AVERAGE CALCULATION

1. The faculty utilizes the following GPA schedule, policies and formulas for the calculation of total value points and grade point average (GPA):

1.1	grades and corresponding value points:
A	4
B	3
C	2
D	1
F	0
I	0

2. The total value points are based on the final grades of all general education courses, the required nursing

courses and other required courses reflected in the program of study.

3. The GPA is based on the final grades of all courses completed at an established point-in-time. The statistic reflects all general education courses (either taken or transferred), final grades of all required nursing courses and the final grades of all other courses required in the program of study.

CUMULATIVE GRADE POINT AVERAGE CALCULATION (CGPA)

1. Value points are calculated by multiplying the number of course credits by the corresponding grade value of the final letter grade(s) of each required course completed. The sum of value points is the total value points.
 - 1.1 Course credits are multiplied by the course grade value points = Total Value Points.
2. GPA is calculated by dividing the total value points by the total credits completed. The dividend is the GPA.
 - 2.1 Divide total value points by the total credits = GPA. The GPA (dividend) is recorded to the hundredth (two numbers to the right of the decimal point). Rounding is not used in the calculation.
3. The CGPA is calculated by dividing the total value points by the total credits of all required courses (only those reflected in the program of study) completed to date. The dividend is the CGPA.
 - 3.1 Divide the total value points of all required courses by the total credits of all required credits
1. = CGPA. The resulting CGPA (dividend) is carried to the hundredth (two numbers to the right past the decimal) and recorded.
4. The GPA and CGPA are calculated by using all final course grades reflected on the official school transcript.
5. Original grade of repeated course, if applicable, is reflected on the official transcript in parentheses but is not used in GPA or CGPA. All final course grades are reflected on the official school transcript.

HONORS

BHCLR-SN recognizes student academic excellence at Commencement. The following Academic Honors scale is used:

Honors	=3.00-3.74
High Honors	=3.75-4.00

PROGRESSION AND PROMOTION

Progression and promotion policies give direction for the retention of students, as they progress through the program of study. In addition, an individualized Educational Plan is developed and signed on entry and must be followed as written.

1. A student is expected to satisfactorily fulfill requirements for all nursing courses as outlined in the course syllabus and materials in order to progress within, promote through, and graduate from the program of study.
2. The minimum final grade for a nursing course to progression is a "C".
3. Each student's Educational Plan must be followed to ensure progression and promotion through the program of study and graduate on schedule.
 - 3.1 If a student does not follow the Educational Plan, their status will be changed by the respective Coordinator from full-time to either BH/PTC or academic suspension.

- 3.2 If a student chooses to not follow the Educational Plan, neither progression nor promotion will occur, until the student provides evidence that he/she is in compliance with the plan.
- 3.3 Written approval to deviate from the Educational Plan from the respective Coordinator is required. Otherwise, the student's continuation in the program and planned graduation is at risk.
 - 3.3.1 A student who does not achieve the minimum final required grade of "C" in each nursing course, on re-entry and does not achieve at least the minimum final grade in that same or a different nursing course may not continue in the program and is administratively withdrawn.
 - 3.3.2 A student who does not achieve a final grade of "C" in a required general education course will be reviewed by the appropriate Coordinator for continued enrollment in the School of Nursing.

Progression

Freshman:

A Freshman student may be promoted to Sophomore I nursing courses after satisfactory fulfillment of all Freshman requirements, which includes all freshman nursing courses, school requirements and be in compliance with the Educational Plan. Freshmen are required to complete 3 hours of community service in order to progress to Sophomore I.

Sophomore I:

A Sophomore I student may be promoted to Sophomore II nursing courses after satisfactory fulfillment of all Sophomore I requirements which include all Sophomore I nursing courses, school requirements and be in compliance with the Educational Plan. The student must complete required standardized testing and remediation as applicable by the established date in the course syllabus.

1. An Accelerated Sophomore I student must successfully complete Sophomore I course requirements prior to progressing to Sophomore II courses. The student must complete required standardized testing and remediation as applicable by the established date in the course syllabus.
2. An Accelerated student is expected to complete the program of study in a twelve (12) month calendar year. Failure to do so will result in change of status from full-time to non-graduate; all applicable policies for reentry will be applied.

Sophomore II:

A Sophomore II may be promoted to graduation candidate status after satisfactory fulfillment of all sophomore II and graduation requirements. The student must complete required standardized testing and remediation as applicable by the established date in the course syllabus. Must have completed 3 hours of community service as a sophomore I or sophomore II.

Commencee:

A student, who participated in commencement rehearsal and ceremony.

Graduate:

A graduation candidate achieves graduate status after all requirements for graduation are fulfilled Non-graduate:

An individual that has not met the graduation requirements.

Promotion:

A student may be promoted through the program of study and graduate on the basis of faculty recommendation for graduate candidate status by the following criteria:

1. achieve at least a minimum final grade of “C” in all required courses, and
2. fulfill school requirements.
3. fulfill graduation requirements.

Sophomore I:

1. current immunization record, which includes MMR and tetanus,
2. vaccination record for Covid-19 that shows being fully vaccinated or an approved medical or religious exemption,
3. Varicella (chickenpox): documentation of 2 doses separated by 28 days or documentation of immunity to disease by results of titer,
4. Current Tuberculin Skin Test or chest x-ray with annual questionnaire, prior to all sophomore I courses,
5. Current Hepatitis B vaccine,
6. Current influenza immunization,
7. Current cardiopulmonary resuscitation (CPR), Present an American Heart Association BLS Provider current card prior to the first clinical laboratory experience,
7. community service, 3 hours, as a Freshman, and three hours as a Sophomore I or Sophomore II,
8. complete required computer modules,
9. completion of BH automated medication system course during the freshman course,
10. completion of BH computer documentation course during the freshman course,
11. be in full compliance with Educational Plan.

Accelerated Sophomore I:

1. current immunization record, which includes MMR and tetanus,
2. Varicella (chickenpox): documentation of 2 doses separated by 28 days or documentation of immunity of disease by results of titer,
3. current Tuberculin Skin Test or chest x-ray with annual questionnaire, prior to sophomore I,

4. current Hepatitis B vaccine,

5. Current influenza immunization,
6. Vaccination record for Covid-19 that shows being fully vaccinated or an approved medical or religious exemption,
7. current cardiopulmonary resuscitation (CPR), Present an American Heart Association BLS Provider current card prior to first clinical laboratory experience,
8. community service, 3 hours, as either Sophomore I or Sophomore II,
9. completion of BH automated medication system course during the Sophomore I course,
10. completion of BH computer documentation course during the Sophomore I course,
11. final grade of “C” in required general education courses as reflected in Accelerated Sophomore I Educational Plan,
12. complete required computer hours and supervised NCLEX-RN preparatory test,
13. be in full compliance with Educational Plan.

Sophomore II:

1. current immunization record, which includes MMR and tetanus,
2. vaccination record for Covid-19 that shows being fully vaccinated or an approved medical or religious exemption,
3. Varicella (chickenpox): students are required to complete the Documentation of Varicella (chickenpox) Disease Form,
4. Hepatitis B vaccine,
5. current cardiopulmonary resuscitation (CPR), Health Care Provider Course, American Heart Association standards and present card prior to first clinical laboratory experience,
6. community service, 3 hours, as either Sophomore I or Sophomore II,
7. complete Educational Plan as scheduled.

Commencement Requirements for students choosing to participate in commencement ceremony:

1. participate in commencement rehearsal and
2. wear required school attire at the ceremony.

Graduation Requirements

1. See Catalog for specific graduation requirements.

PROMOTION AND COMPUTER ASSIGNMENTS/ EXAMS

As the student moves through the program of study, the faculty requires completion of computer assignments/exams. Thus, it must be understood by the student that successful completion of a nursing course alone does not ensure progression and promotion.

The purpose of this requirement is to validate the student's professional knowledge base in the Freshman, Sophomore I and Sophomore II courses.

STUDENTS WHO DO NOT CLEAR

All graduate candidates are expected to complete the BHCLR curriculum according to his/her Educational Plan. Failure to follow the Educational Plan, initiated on entry, or deviating from the Educational Plan without prior Coordinator or Registrar approval will result in Administrative Withdrawal. Upon successful completion of Educational Plan requirements, progression and promotion and graduation requirements, a student may qualify as a graduate candidate. All graduate candidates are required to complete the clearance process as scheduled at the end of the Sophomore II semester. In the event that a student does not complete the clearance process as scheduled, the rationale is categorized as non-academic or academic and the following policies apply:

Non academic

A student not clearing for graduation, because of non-academic reasons, must complete the clearance process within thirty (30) calendar days after the end of the Sophomore II semester. Nonacademic reasons may include, but are not limited to: failure to provide photograph for composite display; financial outstanding balance; missing CLEP scores; missing official transcript(s) and any additional information required by the school.

1. The student shall be reclassified to non-graduate status, thirty (30) calendar days after the end of the Sophomore II semester.
 - 1.1 Non graduate status will result in the withholding of approval signatures on documents qualifying graduate to write the licensure examination.
 - 1.2 Further action may include additional requirements, including but not limited to: repeating Sophomore II nursing courses, repeating the NCLEX review course, and completion of additional work to enhance the chances of successful performance on the licensure examination. Once additional requirements have been successfully met, reclassification from non-graduate status to graduate candidate status will occur and completion of the clearance process is required.

Academic

A student not clearing for graduation, because of academic reasons must complete the clearance process within identified timeframe as delineated by policy herein. Academic reasons may include, but are not limited to: Incomplete "I" course work, lacking required general education courses, or other.

1. The student that receives an “I” on course work must successfully complete academic deficiencies according to faculty requirements or within a maximum of two (2) calendar months after the end of the senior semester.
 - 1.1. The student is required to fulfill additional academic requirements, at student expense, as determined by the faculty.
 - 1.2. The student shall be reclassified to non-graduate status, in the event he/she is unsuccessful in completing academic deficiencies or within two (2) calendar months after the end of the Sophomore II semester. Non graduate status will result in the withholding of approval signatures on documents qualifying graduate to write the licensure examination.
 - 1.3. Further action may include, additional requirements, including but not limited to: repeating Sophomore II nursing courses, repeating the NCLEX review course, and completion of additional work to enhance the chances of successful performance on the licensure examination.

2. The student that lacks all required general education courses must successfully complete academic deficiencies within a maximum of six (6) calendar months after the end of the Sophomore II semester.
 - 2.1. The student shall be reclassified to non-graduate status, in the event he/she is unsuccessful in completing all required general education courses within six (6) calendar months after the end of the Sophomore II semester. Non-graduate status will result in the withholding of approval signatures on documents qualifying graduate to write the licensure examination.
 - 2.2. Further action may include, additional requirements, including but not limited to: repeating Sophomore II nursing courses, repeating the NCLEX review course, and completion of additional work to enhance the chances of successful performance on the licensure examination.

An individual that is not successful in meeting requirements and remains classified as non-graduate may apply for reentry, if he/she qualifies, according to the reentry policy located herein. Application for reentry is required in order to be considered for resumption of study. All reentry policies apply. Reentry is not guaranteed.

Classroom Behavior Expectations

Baptist Health College Little Rock faculty strive to maintain an environment that is conducive to learning. As a student progresses through the course, the faculty expects, from the student, behaviors that exemplify Baptist Health Values of Service, Honesty, Respect, Stewardship, and Performance. Further, there is the expectation of the highest standards of civility, professionalism and cooperation during conducting of business both inside and outside the classroom. Students are to conduct themselves in respectful and professional manner in academic setting at all times. Faculty has the authority to enforce Classroom Behavior Expectations, including but not limited to sending the student out of the learning activity. Further, students are to adhere to the Student Rights and Responsibilities as described herein the Student Handbook.

Behavior that does not exemplify Baptist Health Values and Code of Ethical Conduct is subject to corrective action. Refer to Corrective Action Policies located in the General Section of the Student Handbook.

The following are expectations for promoting a positive, professional learning environment:

1. Students are to address the faculty by the surname and not by the first or given name.

2. Students that are assigned learning experiences in the classroom/skills laboratory or computer laboratory setting shall arrive on time and in approved dress code.
 - 2.1. Arriving past the scheduled time is disruptive to the class faculty and peers and is counted as a

tardy.

3. Students will be prepared for and remain in each class until the faculty has completed the learning activity and dismissed the class.
 - 3.1. Students are to leave the learning activity only during scheduled breaks and return within the identified break time.
 - 3.2. Students are accountable for all materials presented in each scheduled learning activity including but not limited to handouts and required readings. Preparation for learning activity includes reviewing the outcomes and completing the required readings and assignments prior to class or learning activity.
4. Students are expected to listen and follow directions without continued faculty prompting and respect the rights and property of others.
5. Students' identification badge must be worn at all times on upper left shoulder area, with photo, name and title visible.
6. Students are held to the honor code and not participate in any academically dishonest behaviors, including but not limited to cheating on examinations, photographing examination items, or reconstructing examination items after the examination. Examsoft/Examplify are utilized for online testing. Please refer to the course syllabus for specifics and processes related to online testing.
7. Students are to refrain from disruptive behavior(s) in the classroom. Disruptive behavior is identified as anything that disturbs other students or faculty during the learning experience, including but not limited to the following:
 - 7.1 Electronic devices:
Use of personal electronic devices, including but not limited to; cell phones, iPads, apple watches, iPods, and MP3 players is not permitted during classroom/ skills laboratory or computer laboratory learning experiences.
 - 7.1.1 Use of any personal electronic device during examinations, quizzes, or examination reviews is not permitted. These devices are not allowed in the classroom during the testing or review situation (skills/examination/test review). If such devices are heard or observed, faculty has the ability to hold devices until testing activity is concluded.
 - 7.1.2 If a student carries these devices while in classroom/skills laboratory or computer laboratory learning experiences, the devices must be placed in either "off", "silent" or "vibrate" mode.
 - 7.1.3 Use of electronic devices (including sending or receiving texts or calls, listening to MP3 players or iPods) is limited to break and meal times.
 - 7.1.4 Use of a personal lap top or iPad while in classroom/ skills laboratory or computer laboratory learning experiences must be pre-approved by the respective faculty. Its use is limited to activities associated with the learning experience. Surfing the internet, participating in social networking sites,

playing games or participation in other activities not relevant to class is not allowed. Faculty has the authority to require a student to discontinue its use if deemed disruptive.

7.1.5 Use of auditory taping devices for recording of lectures must be pre-approved by the respective faculty.

7.2 Talking:

Side conversations (talking) are disruptive to the classroom learning experience. A student may respectfully contribute to the class discussion and ask questions by raising his/her hand to be recognized. The student is expected to treat everyone in class and on campus with respect.

7.2.1 Conversations that are not relevant to classroom discussion should be conducted outside the learning environment.

7.2.2 Dominating classroom discussion, interrupting or belittling other students, challenging faculty authority, arguing, making offensive remarks or other inappropriate means of communicating are not allowed. Faculty has the authority to remove the student from the learning experience as necessary.

7.2.3 Classroom “announcements” and emails must be approved by respective Course Leader, prior to addressing the class as a whole.

7.3 Overt inattentiveness:

Activities that demonstrate overt inattentiveness are disruptive to the classroom learning experience and should be avoided. These activities include, but are not limited to:

Sleeping during class

Reading material that is not relevant to learning activity
Conducting other activities during class (texting, games)
Staying too long for breaks and returning late
Making disruptive noises.

8. Students should conduct themselves in an “onstage” professional manner when using cell phones or having conversations outside the classroom and refrain from loud talking in the halls.

CLINICAL LABORATORY POLICIES AND EXPECTATIONS

Policies related to student conduct in the clinical laboratory are fundamental to patient or student safety and necessary for a high quality of service and overall operations within the clinical area. Students provide the care required for assigned patient(s) according to level of learning and competency, or as directed by clinical faculty, preceptor or responsible staff Registered Nurse (RN). The following policies are in effect beginning with the first scheduled clinical day. Failure to follow Clinical Laboratory Policies and Expectations will result in corrective action by the school.

1. Students that are assigned learning experiences in the clinical laboratory setting shall arrive in dress code, on time, remain on site, take breaks and meal times and depart from clinical site according to school policies, Student Handbook and course requirements as reflected in the course syllabi and guidelines for the course in which enrolled.

- 1.1. Students are required to be in their assigned clinical area either prior to or at their scheduled time; Arriving past the scheduled time is a tardy, refer to Clinical Attendance policy.
 - 1.2. Students in a clinical laboratory setting that requires surgical attire must wear a laboratory coat over the scrubs when leaving the area. Surgical attire shall not be worn out of the department or hospital.
2. At no time during the assigned clinical laboratory activity (day, evening etc.) shall a student leave the clinical area, or facility (hospital, clinic, agency and so forth) without first receiving permission to do so from the Clinical Faculty or assigned preceptor.
3. Students must obtain permission from assigned clinical faculty or respective staff nurse before leaving the clinical laboratory area or facility for any reason, including but not limited to class attendance (if applicable), patient care activities (physical therapy, GI lab, off campus transport, etc.) or learning opportunities away from assigned area or unit.
 - 3.1. Students must obtain permission from the Faculty or Course Leader before leaving early from assigned clinical laboratory activity.
 - 3.2. Students must give “report” on assigned patient status and care to staff RN or respective clinical faculty prior to leaving the clinical area.
4. Students must obtain permission from the respective staff RN or assigned clinical faculty before going on break: two (2) breaks (one (1) in morning and one (1) in afternoon) if on a twelve hour shift; time allowed for each break is fifteen (15) minutes or as identified in course guidelines.
 - 4.1. Meal breaks are taken according to respective course guidelines. A student may, on occasion, be asked to delay meal or break to assist in cases of emergencies. The evening shift meal break is as assigned.
 - 4.2. Students must give “report” on assigned patient status and care to staff RN or respective clinical faculty prior to leaving the clinical area.
5. Student’s identification badge must be worn at all times on upper left shoulder area, with photo, name and title visible.
6. Students are expected to be courteous in the use of facility elevators, including but not limited to; allowing patients, family members and visitors to have priority on elevator use, limiting number of students on an elevator to a maximum of four (4), and utilizing elevators number one (1) through six (6) at the BHMC-LR campus. Students are encouraged to utilize the stairs when going up only one flight or down only two (2) flights.
7. Food or beverages are not permitted in the clinical laboratory except in employee lounges or cafeteria, or as approved by Clinical Faculty.
8. Use of personal electronic devices including but not limited to; cell phones, iPods, lap tops, MP3 players, and iPads, is not permitted during clinical laboratory in any patient care area or while providing patient care. Faculty has the authority to require a student to discontinue its use if deemed disruptive.
 - 8.1. If a student carries a cell phone while in clinical, the devices must be turned to silent. Use of cell phones (including texting or calling) is limited to break and meal times in off stage areas only;

never in the presence of patients or their family members.

- 8.2. Texting, taking photographs, videoing, participating in online social networking sites (Facebook, Twitter, MySpace, etc.) or conducting Internet activities is not permitted during clinical. Exception to Internet access is allowed in the event the student is directed to do research and/or complete an assignment by the respective clinical faculty.
- 8.3. Students must never send or post patient information via any personal electronic device. This includes pictures or video.
4. Gum chewing is not permitted in clinical laboratory.
5. Students are to maintain professional boundaries with patients, peers, faculty and staff members at all times. Students are not allowed to have personal visitors while in the clinical laboratory area.
6. Students are expected to immediately report any accident or error to the assigned clinical faculty of the area regardless of how minor it might seem to be.
7. The Clinical Faculty is responsible for the clinical education and conduct of his or her assigned student(s).
 - 12.1. Students must follow directions for patient care from the responsible staff RN in order to maintain safety and continuity of patient care.
 - 12.2. During clinical laboratory, students are under the direct supervision of an RN and the Clinical Faculty. The student is responsible for informing the course leader and their respective Coordinator if direct supervision does not occur.
 - 12.3. When the student is not busy, he/she is expected to check with the Clinical Faculty, preceptor, or individual in charge, for additional clinical assignments and learning experiences. During rotations in non-hospital areas, when not busy, the student may be dismissed early but is required to contact clinical faculty or course leader for further instruction.
8. Students must give a final “report” to the staff nurse responsible for the patient prior to departing the clinical area and facility at the end of the clinical assigned time.
 - 13.1. The report must include all nursing care provided by the student to assigned patient,
 - 13.2. Status of patient’s condition, and
 - 13.3. Other as indicated, as course requires.
9. If a Clinical Faculty, responsible RN, clinical supervisor, or designee directs the students to remain in the area or in the facility, beyond the clinical assigned time, the student must remain until released to leave. This is especially true in the following situations:
 - 14.1. Controlled substance (narcotics, etc.) count is deemed erroneous,
 - 14.2. Medication error(s), related to assigned patient,
 - 14.3. Assigned patient’s condition warrants,

- 14.4. Theft of property (patient, employee or others),
 - 14.5. Questions regarding the assigned patient's medical record,
 - 14.6. Time of "Disaster" as defined by Baptist Health, and
 - 14.7. "Dr. Red Stat" periods.
9. Additional requirements may be found in a respective nursing course syllabus and/or other situations as deemed necessary by the assigned Clinical Faculty.
 10. In situations regarding patient safety and care provided by a student, and the student and faculty have left the facility, they must comply with the facility's request, up to and including return to facility.
 11. Students are only to access Epic in the clinical setting. Students are not to access Epic from off campus or from home.

PRECEPTORS

Clinical preceptors may be engaged in selected clinical nursing courses within the program of study. Students are assigned with clinical preceptors by course faculty. Throughout the clinical rotation, preceptors facilitate student learning, directly supervise student's performance and participate in clinical evaluation of assigned student(s).

While assigned with preceptors, students are required to comply with all applicable school policies, dress code, course requirements and policies of clinical facility related to patient care.

Faculty and students evaluate preceptors at course end; individualized reported outcomes are shared with the preceptor(s) involved.

MAKE-UP COURSE WORK

The opportunity to make-up missed course work, including clinical and examinations may be available to a student who has been absent. Faculty and students have the primary responsibilities in the make-up course work. Faculty have the discretion, with prior Coordinator approval, in permitting the student to make-up missed course work, including examinations. The student has the responsibility to follow-through and succeed. Two factors are important in the consideration of a make-up request: the student's follow-through with policy regarding the absence and the student's previous attendance record. All absences are subject to verification by faculty or school administration. A fee is charged to cover the school's expense associated with the make-up work or examination preparation, proctoring and grading. The following process is followed:

1. The student completes the Course Make-up Work Request form. The form can be obtained from the forms rack inside Suite 1004 or outside the Business Office.
2. Submit the completed form to the respective faculty for consideration and action.
3. If approval is granted, the student pays the required fee in the Business Office and obtains a receipt.
4. The student shows the receipt to the course faculty.
5. A student with a pattern of missing examinations may be denied approval.

6. A make-up examination is administered only after prearrangement; and approval by course faculty.
7. Failure to take scheduled, prearranged make-up examination on the day and time designated by course end will result in a test score of zero (0) for that examination. The score will be included in calculation of final theory grade. Failure to complete prescheduled clinical makeup may result in a “U” in the clinical and an “F” in the course.
8. Clinical make-up is accomplished by same process described in the above 1 - 7.
9. Make-up fees are established by the Business Office. In general, the fees charged are based on the administrative cost per hour for examination make-up and per clock hour for clinical time made up.
 - 9.1. Students are not charged the make-up fee in the following circumstances which have been validated:
 - 9.1.1. absence occurred as a result of faculty instructing student to leave learning activity related to student health issue,
 - 9.1.2. absence supported by physician or nurse practitioner documentation,
 - 9.1.3. death of immediate family member,
 - 9.1.4. hospitalization of student,
 - 9.1.5. court appearance or jury duty,
 - 9.1.6. military purposes.

MEDICATION ADMINISTRATION SAFETY

The student shall adhere to the principles and processes of safe medication administration to patients according to established school policies and processes and clinical agency policies.

1. A student failing to demonstrate the principles and the processes of safe medication administration in clinical performance has committed a medication error according to established BHCLR-SN criteria.
2. A student prevented from breaching principles and processes of safe medication administration to a patient, by faculty or clinical staff intervention, has committed a medication error according to established BHCLR- SN criteria.
3. A student who commits a medication error will:
 - 3.1. immediately report medication error to a clinical faculty and the registered nurse responsible for care of the patient. Failure to report a medication error to clinical faculty will result in corrective action,
 - 3.2. follow the clinical faculty’s guidance regarding nursing intervention for patient safety,
 - 3.3. work with clinical faculty to follow guideline as established by the faculty to contact the physician,

- 3.4. document the medication error according to respective clinical setting policy. The clinical faculty will co-sign all documentation related to the error.
 - 3.5. submit original documentation to supervisor of clinical setting and a copy of the documentation to the clinical faculty,
 - 3.6. receive an unsatisfactory progress (UP) on course outcome for safe medication administration on the record of clinical progress for that course clinical week,
 - 3.7. meet with BHCLR Medication Safety Committee and comply with outcome decision of committee,
 - 3.8. satisfactorily repeat the demonstration of medication administration process in the presence of a clinical faculty,
 - 3.9. be restricted to medication administration only in the presence of a clinical faculty prior to approval for resuming independent medication administration in a clinical setting,
 - 3.10. make up fees apply if additional clinical time is required in order for the student to meet clinical outcomes.
4. The Medication Safety Committee:
- 4.1. has authority to determine number of unsafe medication administrations occurrences committed by a student in a given incident. The number determined by the committee is recorded on Medication Safety Committee form.
 - 4.2. will review each medication error and may require additional learning opportunities. The student's respective clinical evaluation outcome will reflect incomplete progress "IP" until all additional learning opportunities are satisfactorily completed and submitted to the Medication Safety Committee Chairman.
 - 4.3. may recommend a plan of action, non-progression, probation, suspension or dismissal of a student citing unsafe nursing care as the rationale.
 - 4.4. The following occurrences are defined as unsafe medication administration (list is non-inclusive):
 - 4.4.1. incorrect medication,
 - 4.4.2. incorrect dosage,
 - 4.4.3. incorrect day or time,
 - 4.4.4. incorrect patient,
 - 4.4.5. incorrect route of administration,
 - 4.4.6. incorrect assessment,
 - 4.4.7. incorrect transcription of physician's medication order,

- 4.4.8. incorrect evaluation,
- 4.4.9. incorrect documentation of administration of medication,
- 4.4.10. incorrect I.V. therapy regulation or administration,
- 4.4.11. incorrect I.V. rate calculation,
- 4.4.12. omission of medication as ordered,
- 4.4.13. medication administered to patient who has a recorded allergy to the medication,
- 4.4.14. medication not ordered by physician is administered to patient,
- 4.4.15. failure to provide nutritional supplement (snacks, fluids) as scheduled,
- 4.4.16. failure to follow clinical setting procedure(s) for administration of medications,
- 4.4.17. faculty intervention preventing a student from breaching principles of safe medication administration to a patient,
- 4.4.18. student prevented from breaching principles or processes of safe medication administration by nursing staff intervention,
- 4.4.19. failure to follow any of the “ten rights”.

NURSING STUDENT ROLE: MEDICATION ADMINISTRATION

Nursing student adheres to the policies and procedures of the assigned clinical institution, and administers medication(s) only within the student’s scope of practice.

Process:

Student demonstrates medication administration competencies as required according to BHCLR Medication Administration Policy as follows:

Student administers medication(s) under the supervision of the clinical faculty. Student administering any medication(s) without prior clinical faculty notification will be subject to corrective action.

All students are accompanied by a clinical faculty during medication administration and must always have the faculty verify medication(s) prior to administration. Sophomore II students may, at faculty discretion, independently administer medication(s) (with exception of subcutaneous, intramuscular or Intravenous Therapy, including Intravenous Push (IVP) as indicated below).

All students are always accompanied by assigned clinical faculty for administration of any subcutaneous, intramuscular or Intravenous Therapy including Intravenous Push (IVP) medication (s). A student does not administer Intravenous Push (IVP) narcotic medication(s).

Student administers medications according to specific course guidelines.

Student may not copy or take a picture of any part of the Medication Administration Record (MAR).

Student documents medication administration according to assigned clinical institution policy.

The student is activated in the PYXIS System by the assigned faculty and follows all BH policies related to medication administration utilizing the PYXIS System.

Student does not witness any consent form and does not take any telephone or verbal order from a physician. Other restrictions may apply on a unit specific basis and may include medication administration, procedures, and other activities.

In the event of accidental needle stick or exposure, student must report all exposure(s) to clinical faculty and comply with all policies regarding the follow-up.

STUDENT DIRECT COST

Detailed information about the program cost(s) may be found on the school specific Cost Plan, available at the Business Office and online [at www.bhclr.edu](http://www.bhclr.edu).

STUDENT GOVERNANCE

The school's form of student governance is a Student Government Organization.

1. The BHCLR-SN grant each class the privilege to self-govern within the values, policies and philosophies of the school and BH.
2. School policies and Student Government rules and procedures provide the framework for conduction of business, projects and activities.
3. The BHCLR grants to each class the privilege of representation on specified BHCLR-SN standing committees.
4. Class presidents serve as student representatives on the Grievance Panel for situations involving a student with the same classification on their respective campus.
5. Class meetings and activities are scheduled by the president when classes are not in session. School policies and student class government rules of procedures provide the framework for conduction of business, projects and activities.
6. A class may conduct fund raising activities as approved by the Dean, Schools of Nursing or designee. Class funds may be used only for purposes recommended by the class and approved by the BHCLR respective Coordinator or Dean, Schools of Nursing or designee.
7. A student either on probation, suspension, or an academic reentry student is not eligible to hold a class officer position in Student Governance. Student Governance nominations must be cleared through the Coordinator and Dean, Schools of Nursing prior to creation of the class ballot.

STUDENT GOVERNMENT RULES OF PROCEDURES

According to the school philosophy, the school provides the opportunity for students to participate in their own government, into the overall operation of the school and have input in the management of the school. Through the

participation, a student experiences leadership, citizenship development and the democratic process as part of their professional and personal growth.

ARTICLE I - NAME

The name of the student government organization shall be the Baptist Health College Little Rock- School of Nursing Student Government Organization.

ARTICLE II – PURPOSE

The purpose of the Organization is to provide students an opportunity to learn and participate in the democratic process, develop leadership skills and to contribute to the overall operation and continuous improvement of the school.

ARTICLE III – GOAL

The overall goal of the Organization shall be to encourage each student to participate in the democratic process by working together toward common goals and problem solving.

ARTICLE IV – MEMBERSHIP

Membership in the Organization shall consist of Sophomore I and Sophomore II nursing students. Students not currently enrolled in nursing courses are not eligible to hold office.

ARTICLE V - OFFICERS AND DUTIES

Section 1 - Elected

Officers of the class shall be elected by Sophomore I and Sophomore II nursing students. Officers include:

1. President,
2. Vice President,
3. Secretary,
4. Treasurer,
5. Historian,
6. Three Student representatives

Officers must maintain a grade point average (GPA) of 2.1 or greater.

The President shall:

1. schedule and preside at all meetings,
2. generally supervise all activities of the class,
3. serve on the grievance panel according to school policy, when another student has initiated the

grievance procedure,

6. co-sign all receipts of funds collected by class,
7. may be invited to BHCLR-SN Faculty Organization/ BHCLR Advisory Board meetings,
8. meet with school official(s) as appropriate,
9. present class proposals to BHCLR Administration,
10. appoint or call for election of members of class committees.
11. represent the class by attending Medication Safety Committee Meetings.

The Vice President shall:

1. in the absence of the president, assume all duties, authority and responsibility of the president,
2. preside as Chairman of the Class Program Committee, and
3. may be invited to the BHCLR Department meeting/ BHCLR Advisory Board meeting.
4. represent the class by attending Retention Committee Meetings.

The Secretary shall:

1. record the minutes of each class meeting using school format,
2. maintain class records,
3. attend all class meetings or arrange for one of the other officers as a substitute to take minutes,
4. perform other duties include those that usually pertain to the office, and
5. represent the class by attending Student Development Committee

meetings. The Treasurer shall:

1. manage class funds with Faculty class sponsor in an orderly, ethical and legal manner,
2. establish a receipt book with sequential numbers on the receipts (obtained from the school office),
3. coordinate class financial information with the Faculty Class Sponsor,
4. give treasurer's report at all class business meetings, and
5. represent the class by attending Student Development Committee

meetings. The Historian may work with class members and Faculty Class Sponsor:

1. develop a class scrapbook or DVD that includes mementos, photos and other articles of historical significance related to the class, and
2. place class scrapbook or DVD in the school archive collection after graduation of the respective class and,
3. represent the class by attending Special Event Committee Meetings

The student representatives shall:

1. serve on standing committees of the Faculty Organization as a class representative if not designated by elected officer or committee position,
2. represent the class on the following respective standing committees of the Faculty Organization or BHCLR:
 - 2.1. Medication Safety
 - 2.2. Student Development
 - 2.3. Special Events
 - 2.4. Retention

Section 2 - Appointed

Class committee chairmen represent their respective class on standing committees of the Faculty Organization as described in Article VI.

ARTICLE VI - TERMS OF OFFICERS

Class officers shall be elected in accordance with Article X, Sections I and 2 and serve the following terms:

Sophomore I/Sophomore II	Begins when elected in the sophomore I semester and ends upon commencement. Accelerated Track officers are elected as sophomore I students.
Student Representatives	Begins when respective class officers are elected and terminates when successor is appointed or elected.
Members at Large	Begins when respective class officers are elected and terminates when successor is appointed or elected.
Committee Chairs	Begins when elected or appointed by respective class president and terminates when successor is appointed or elected.

ARTICLE VII - MEETINGS

Class meetings are as scheduled based on need and announced to the class. Activities and meetings shall be conducted within the framework of school policies and Student Government Rules of Procedure. Attendance is strongly suggested in order to fulfill the purpose and achieve the goal of the student government organization. Called class meetings and activities maybe scheduled by the president when course classes are not in session.

ARTICLE VIII - COMMITTEES

Section 1 - Special Committees and Process Teams

Special committees and process teams shall be created as needed by the president. Committee chairmen and team leaders shall give progress reports at each class meeting and submit a written report to the class secretary for inclusion in class records.

Section 2 - Program Committee

The program committee shall consist of three class members elected or appointed by the president. The vice president serves as chairman. Functions of the committee include:

1. plan, organize and conduct program events for the class (program events may include, but are not limited to, socials, holiday celebrations, fund raising programs such as talent shows, plays and video productions),
2. chairman represents the class by serving on the Special Events Committee of the Faculty Organization., and
3. chairman shall give progress reports at each class meeting and submit a written report to the class secretary for inclusion in class records.

Section 3 - Nominating Committee

The nominating committee shall consist of an elected chairman and two elected class members. Functions of the committee include:

1. prepare the slate of nominees for class officers who agree to serve before election by class membership,
2. prepare the ballot,
3. manage the election,
4. ballots are counted by class sponsors,
5. provide list of new officers to class sponsors for announcement to faculty and for publication, and
6. provide names of nominees to president for offices vacated between established election years.

ARTICLE IX – QUORUM

Members attending class meetings, committee meetings, council meetings and all other student meetings, except the nominating committee, shall be considered a quorum.

ARTICLE X - ELECTIONS AND VOTING

Section 1 - Elections

Nominations by the student body shall be made within two (2) weeks following the beginning of each election period.

The nominating committee develops a ballot reflecting a slate of officer nominees and disseminates among class members for voting five (5) school days prior to the next scheduled class meeting.

Sophomore I/Sophomore II officers shall be elected at the end of the freshman semester and serve until commencement.

Accelerated Sophomore I officers shall be elected within four (4) weeks following beginning of the semester and serve until commencement.

Section 2 – Voting

Elections shall occur through secret ballot. Voting outcomes shall be tallied by two (2) class sponsors. Class sponsors announce voting outcome.

ARTICLE XI - VOTING ON CLASS ISSUES

The majority rule will prevail during class meetings. A minimum vote of 51% of class members present will determine passage of a motion. Class business voting is by show of hands, voice vote or as designated by president. Certain business matters requiring a vote can be made by secret ballot if agreed upon by 51% of those present.

ARTICLE XII - VACANCY OF OFFICE

In the event the president is unable to complete service of elected term of office, the vice president shall assume full duties and responsibilities of the office. A special election shall be held to fill the position of vice-president within two (2) weeks after the presidential vacancy occurs or after a new semester begins.

In the event of vacancies in other offices, a special election shall be held within two (2) weeks after the vacancy occurs or after a new semester begins.

ARTICLE XIII - CLASS DUES

The decision to collect class dues and the amount there of, shall be voted on by each class, for that class, at the first class meeting.

ARTICLE XIV - AMENDMENTS

Student government rules of procedure may be amended, adopted or repealed as a recommendation by the student body at any regular class meeting. The recommendation then is forwarded to BHCLR Dean, Schools of Nursing and BHCLR-SN Faculty Organization for consideration. Revisions shall become effective after adoption by the total student body and final approval by the BHCLR-SN Faculty Organization.

ARTICLE XV - PARLIAMENTARY AUTHORITY

Robert's Rules of Order, current edition, will prevail as parliamentary authority during meetings.

Adopted by Classes: 1985 & 1986

Approved: May 1985 ([Admin. Com.](#))

Edited: May 1986 ([Admin. Com.](#) And 1986 Class President)

Amendment to Article XIII - Voting on Class Issues

Approved by Admin: Com., July 1, 1986

Amendment to Article XIII - Voting on Class Issues - Adopted 1990

Amendment to Article X - Elections and Voting - Adopted 1991;

Approved: by L.T. August 1991

Revision and Amendments - Adopted September 1994; BHSNAH
Approved: December 1994.
Edited: December 2003
Edited: April 2007
Revised: July 2008
Revised: February 2010
Amendment to Article VIII Section 4 - History Committee - Deleted 2012 \

CALENDAR

The BHCLR- SN Academic Calendar is available in the BHCLR Catalog [at](#)

www.bhclr.edu. **PROFESSIONAL CURRICULUM**

The Baptist Health College Little Rock- School of Nursing Professional Curriculum is available in the BHCLR All Schools Catalog [at www.bhclr.edu](http://www.bhclr.edu).

BAPTIST HEALTH COLLEGE DEFINITIONS

Academic Advising:

Guiding students during their progression through the Program of Study.

Academic Advisor:

One who advises, encourages, counsels, cautions, warns, recommends, and apprise students.

Academic Dismissal:

Administrative termination of student's academic relationship with Baptist Health College Little Rock (BHCLR).

Academic Probation:

Status assigned to indicate a student is at risk for continued enrollment in the school for academic reasons. It usually carries specific conditions which must be fulfilled before status is removed.

Academic Progression:

Students must make satisfactory academic progress toward completion of an associate of applied science degree or certificate. "Satisfactory academic progress" is defined separately by each program in their respective policies related to grading scales, progression and promotion, grading, commencement, and graduation.

Academic Suspension:

Removal from school campus for a defined period of time due to academic performance. Counseling, treatment, remedial work, and other condition(s) may be set forth before resumption of study is allowed.

Academic Year: Student

The annual period of session of BHCLR, beginning in July and ending in May or June.

Accountability:

Refers to the state of being answerable and liable for the quality of one's own actions.

Active Learning Activities/Strategies:

Defined broadly as strategies requiring the students to be interactively involved in the classroom or online learning: using teaching strategies other than faculty lecturing or playing media and students listening/watching. Examples might include case-based learning, group discussion, role-playing, flipped classroom, game-based learning one-minute papers or summaries, concept maps, brainstorming challenges, peer instruction, or polling

Adjunct Faculty-Teaching:

A faculty member who facilitates fulfillment of the Mission, Beliefs, and Values of Baptist Health and Baptist Health College Little Rock by exemplifying the Baptist Health values and temporarily assisting course teaching faculty in instruction and clinical supervision of students as the need arises.

Administrative Dismissal:

Administrative termination of student's relationship with BHCLR.

Administrative Probation:

Status assigned to a student indicating the student is at risk for continued enrollment in school based on performance in student development

Administrative Suspension:

Removal from academics, student development activities, and school campus for a defined period of time. Counseling, treatment, remedial work, and other condition(s) may be set forth before resumption of study.

Administrative Withdrawal:

Status assigned indicating a student's behavior is not in keeping with school policy and values.

Adult Education:

The teaching and learning process that result in knowledge, growth, and development in responsible, self-directed individuals.

Advanced Placement Students (APS):

A student who is authorized for admittance into the BHCLR by the Selection III Committee with nursing course credit awarded by another school of nursing.

Advocacy:

The act of demonstrating Baptist Health values of Service, Honesty, Respect, Stewardship, and Performance while assisting the healthcare system to improve the quality and delivery of healthcare.

Advocate:

One who assists the consumer or client to achieve a state of optimum wellness.

Affiliating Institutions:

An established organization with which Baptist Health and/or BHCLR are closely associated. The association may be formal or informal with written agreements.

Allied Health Course:

A specific set of learning experiences in a classroom and clinical laboratory designed to achieve specific objectives within a given time period.

Allied Health Practices:

Actions which require specialized knowledge and skills for the promotion, maintenance, and restoration of health.

Allied Health Skills Laboratory Practice:

A period of supervised instructor practice of skills in the laboratory setting.

Allied Health Student:

A student who is currently enrolled in an Allied Health School and in active study in the Program of Study.

Attendance:

Behavior modification policies and processes are initiated when student attendance record does not exemplify expectations reflected in attendance policies established by BHCLR. The school may also take disciplinary action as a result of excessive absenteeism or tardiness. Such action may include, but is not limited to, additional course work, grading penalty, make-up examinations, standardized examinations, repeat course(s), administrative withdrawal, suspension, or dismissal.

Attrition:

Voluntarily withdrawn, administratively withdrawn, or dismissed and no longer eligible to return to study; beyond 1.5 length of program.

Break Week:

A five (5) school day period when students do not attend class or clinical laboratory settings.

Caring:

A response to others in a manner that expresses awareness and respect for a person as an individual.

Cheating:

A form of dishonest conduct that includes, but not limited to, behaviors prior to, during and after the taking of a course examination; course work, plagiarism and any other acts that are generally considered to be attempts to give one an unfair benefit of achieving the minimum required or higher score, grade, or evaluation.

Christian Values:

Beliefs and standards for living which are taken from the characteristics exemplified in the life of Christ and include but are not limited to the School's values.

Class:

A cohort group sharing the same definite graduation year.

Classroom Learning Experiences:

A room in which one learns or gains experience through multiple learning tools including; face-to-face lecture, power point presentations, learning objectives, and outlines.

Clinical Laboratory Learning Experience:

An environment which provides actual learning experiences and opportunities to apply theoretical knowledge.

Clinical Judgement:

Clinical Judgement is defined as the observed outcome of critical thinking and decision making. It is an iterative process that uses knowledge to observe and assess presenting situations, identify a priority client concern and generate the best possible evidence-based solutions in order to deliver safe client care.

Clinical Reasoning:

The process by which cues are observed, information is processed, the client's problem(s) or situation is understood, a plan is developed, interventions are implemented, evaluation and outcomes are reflected upon and learning occurs from this process of critical thinking.

Collaborating:

The interactive relationship among individuals who share the same goals, philosophy, and purpose; who understand each other's professional and personal skills; and who value each other's unique characteristics.

Commencement:

The ceremony in which the diploma and the school pin may be awarded.

Commitment:

A complex affective response characterized by a convergence between one's desires and one's obligations, and by a deliberate choice to act in accordance with them.

Communicating:

Passing a message from sender to receiver with the expectation that the information exchanged will be understood as the sender intended.

Communities of Interest:

A gathering of people assembled around the common interest of BHCLR. Its members take part in the community to exchange information, and to improve the processes of BHCLR.

Community:

Groups of individuals living in an area, having a common interest, or belonging to the same organization.

Competent:

Achieved BHCLR curriculum outcomes/objectives at a satisfactory level; the ability to practice safely by applying theoretical knowledge through professional skills and tasks according to established standards and principles.

Computer Learning Experience:

Instruction or scholarship knowledge gained from computer programs rather than from direct personal experience.

Consistent Progress:

Steady movement toward achievement of course outcomes/objectives; evidence of progressive personal and pre-professional development.

Consumer:

One who uses the services of the healthcare system.

Consumer Education:

Providing information to individuals or groups who utilize health services to enable them to make decisions about health promotion, maintenance, and restoration.

Contact Hours:

A period of time in which there is instructor-student contact in either the classroom, nursing skills laboratory, computer laboratory, or clinical laboratory.

Continuing Education:

An instructional program that brings participants up to date in a particular area of knowledge or skills.

Continuous Improvement:

Enhanced value or excellence that is uninterrupted.

Corrective Action:

Action(s) taken by BHCLR or designees to modify or correct a student's conduct which may include verbal coaching up to administrative dismissal for cause.

Coordinating:

The process of linking together the various health team members and guiding their activities toward the achievement of mutual goals.

Counseling:

To assist the student to attain optimum personal growth and development.

Counseling Services:

Guidance offered by the BHCLR counselor to help a person resolve social or personal problems.

Course:

A series of interrelated studies which begins and ends within a defined time frame and may include practical application and/or experiential learning.

Creativity:

The ability to transcend traditional ideas, rules, patterns, relationships, or the like, and to create meaningful new ideas, forms, methods, interpretations, etc.; originality, progressiveness, or imagination.

Credit Hours:

Number of hours credited are based on national standards or formulas established by the schools.

Crime:

All criminal offenses including misdemeanors. Not limited to felonies.

Critical Thinking:

Skills in reasoning, analysis, decision making, and problem solving relevant to the discipline of the healthcare professional.

Culture:

A shared, learned, symbolic system of values, beliefs and attitudes that shapes and influences perception and behavior.

Culture Competent:

Being aware of variations in a population with beliefs, values, and traditions which guide behaviors.

Cumulative Number First Time Entry:

Total cohort selected to enter for full-time study.

Curriculum:

Course offerings that make-up the program of study.

Curriculum Cycle:

The time period between which a course is initially offered in an academic year until the course is offered again the next academic year.

Curriculum Plan:

The list of courses, the academic credit they carry and the suggested sequencing.

Customer:

A customer (also known as a client, buyer, or purchaser) is the recipient of a good, service, product, or idea, obtained from a seller, vendor, or supplier for a monetary or other valuable consideration.

Customer Satisfaction:

The satisfaction one experiences from receiving a service.

Decision Making Model:

A unique process that involves the correlation between knowledge of pre-existing pathological conditions, explicit client information, nursing care and experiential learning.

Development:

The sequential acquisition of the ability to learn, reason, and analyze that begins in infancy and progresses as the individual matures.

Developmental Level:

The maturation of an individual determined by life experiences and individual achievements

Dignity:

Demonstrating, conduct, or speech indicative of self-respect or appreciation of the formality or gravity of an occasion or situation.

Distance Learning Experience:

A formal educational process in which all of the instruction occurs when a student and instructor are separated by place and/or time. Instruction may be synchronous or asynchronous and may employ audio, video, or other computer technologies.

Educational Plan:

A plan developed for a student enrolled in BHCLR that must be followed in order to meet graduation requirements.

Educational Program:

The totality of school activities derived from the philosophy that is designed to achieve specific educational goals.

Educational Unit:

A component of BHCLR that focuses on classroom instruction and supervised practice in healthcare settings.

Enrolled:

Registration process completed, listed on the initial course roll and attended first day of program courses.

Environment:

The sum total of all the conditions and elements that make-up the surroundings and influence the development of an individual.

Essential Psychomotor Skills:

Essential skills which every student must perform safely prior to progression and/or promotion.

Ethical Principles:

A framework for decision making based on a set of values and a moral code.

Evaluation:

Systematic method of reviewing the planned and implemented scheme or design to assess the attainment of specific outcomes/objectives.

Evidence-Based Practice:

Entails making decisions about how to promote health or provide care by integrating the best available evidence with practitioner expertise and other resources, and with the characteristics, state, needs, values and preferences of those who will be affected. This is done in a manner that is compatible with the environmental and organizational context. Evidence is comprised of research findings derived from the systematic collection of data through observation and experiment and the formulation of questions and testing of hypotheses.

Faculty: Teaching

One who facilitates fulfillment of the Mission, Goals, and Vision of BH and BHCLR by exemplifying BH values, educating students for entry into health professionals and participating in Continuous Quality Improvement. Their principal responsibility is to prepare competent graduates.

Faculty: Non-teaching

One who facilitates fulfillment of the Mission, Goals, and Vision of BH and BHCLR by exemplifying BH values, assisting teaching faculty in testing registered nurse applicants and students and participating in admission and recruitment activities.

Families:

Units of interacting persons related biologically and/or non-biologically whose central purpose is to create and maintain a common culture which promotes the physiological, psychological, social, cognitive, and spiritual development of each of its members.

Family Centered Care:

Family-centered care is made up of a set of values, attitudes, and approaches to service for children and their families. Family centered care recognizes that each family is unique: that the family is the constant in the child's life; and that they are the experts on the child's abilities and needs. The family works with service providers to make informed decisions about the services and supports the child and family receives. In family-centered service, the strengths and needs of all family members are considered.

First Time Entry:

Registered for the first time as a student.

Formal Experiences:

Student learning experiences/activities which are scheduled or assigned by faculty.

Full-Load:

Enrolled in the total number of required courses, as reflected in the program of study, offered during a semester.

Full-time Student:

Enrolled in 12 or more credit hours per Fall or Spring Semester. Graduation track and course load of credit hours may not reflect full-time student load.

Goal:

The desired outcome of effort expended.

Good Standing Status:

Behavior and performance reflect: fulfillment of academic requirements, compliance with school, hospital, and agency policies, the Student Honor Code, School Values, BH Code of Ethical Conduct, and no financial obligations outstanding.

Graduate:

One who fulfilled all requirements of the respective BHCLR of enrollment.

Graduation:

The awarding of a diploma and the appropriate School Pin signifying the successful completion of the program of study and fulfillment of all graduation requirements; not always simultaneous with Commencement Ceremony.

Groups:

A number of individuals considered together because of certain similarities.

Growth:

The progressive maturation of thought, reasoning, and intellect. Growth also involves the development of personality, judgment, and temperament; it evolves throughout life, as experiences in work, play, and emotional interactions with others broaden.

Health:

State of physical, mental, social, and spiritual wellness rather than merely the absence of disease.

Health Promotion:

The provision of information and/or education to individuals, families, and communities that-encourage family unity, community commitment, and traditional spirituality, that make positive contributions to their health status.

healthcare:

Services for promoting, maintaining, and restoring the health of individuals, families, and groups within the community.

Healthcare Needs:

Physiological, psychological, social, cognitive, and spiritual requisites for achieving and maintaining optimum wellness.

Healthcare Settings:

Any environment in which healthcare is provided.

Healthcare System:

An organized network for providing services for promoting, maintaining, and restoring the health of individuals, families, and groups within the community.

Healthcare Team:

Several individuals working together, who may be from different health disciplines, having predetermined outcome.

Health Teaching:

A process by which individuals, families, and groups are assisted to achieve and maintain optimum wellness. This can occur through the use of formal or informal methods.

Holistic Care:

The medical consideration of the complete person, physically and psychologically, in the treatment of a disease.

Hospital:

An institution in which sick or injured persons are given medical or surgical treatment.

Human Worth:

The quality that makes a human being desirable, useful, or valuable.

Hybrid Learning Experience:

An educational process in which instruction is delivered through a combination of both face-to-face instruction and distance education technology. The face-to-face components may incorporate experiences such as examinations, theory, and/or clinical experiences when the student is required to be present on campus or at an associated clinical affiliate.

Illness:

A condition marked by deviation from the normal state of health.

Indicator:

Specific descriptor of clinical behavior that contributes to the measurement of student's ability to apply theory and skills in the clinical laboratory practice settings.

Individual:

Single human being.

Informal Experiences:

Integrating unplanned events into client care that must be managed and communicated efficiently.

In-services:

Training that is given to employees during the course of employment.

Leader:

One who coaches, assists, and creates a learning environment and acts proactively.

Leadership Role:

The ability to facilitate the movement of a person, family, group, or community toward the establishment and attainment of goals pertaining to health.

Learning:

Incorporation of knowledge resulting in a change in behavior.

Legal Standards:

Regulations based on law.

Lifelong Learning:

The continuous building of skills and knowledge throughout the life of an individual.

Lifespan:

The period of time between inception of life and life's end.

Managed Care:

A health care delivery system that supports cost-effective, client outcome-oriented care.

Manager:

One who directs, oversees, or has charge of an entity.

Managing:

Achieving goals through planning, organizing, directing, and controlling human and physical resources and technology.

Motivation:

The process that initiates, guides, and maintains goal-oriented behaviors. Motivation is what causes us to act, whether it is getting a glass of water to reduce thirst or reading a book to gain knowledge. It involves the biological, emotional, social and cognitive forces that activate behavior.

Multi-disciplinary Approach:

Method used by several areas of expertise to integrate different ideas and achieve a specific goal.

National Patient Safety Goals (NPSG):

According to the Joint Commission, the National Patient Safety Goals are standards that help accredited organizations address specific areas of concern in regards to patient safety.

Nursing Care:

Care essential to or help in the promotion, maintenance and restoration of health and well-being or prevention of illness in clients of all ages. It includes a "head, hand and heart" approach which integrates practical knowledge and technical skill with empathetic understanding to provide humane and sensitive care.

Nursing Process:

A systematic method of providing safe and effective nursing care utilizing the framework of assessing, planning, implementing and evaluation.

Nursing Roles:

Autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying clients.

Nursing Skills Laboratory Experience:

A process where students practice skills prior to proceeding to clinical practice. The experience enables students to apply theory to practice. The overall aim is to acquire psychomotor skills as well as, to develop interpersonal skills, direction and confidence.

Nursing Student:

Current enrollment in a nursing course.

Nutrition:

The process of taking in nutrients, assimilating, and utilizing them.

Nurturing:

To promote and sustain growth and development.

Part-time Student:

Enrolled in less than 12 credit hours per Fall Semester or Spring Semester and less than 6 credit hours per Summer Semester.

Pathophysiology:

The physiology of abnormal states, specifically, the functional changes that accompany a particular syndrome or disease.

Pathophysiological Disorders:

Unhealthy states related to abnormal variations in structure and/or function of body parts, organs, or systems. Usually long term disorders which may involve one or more body systems.

Personal Development:

A continuous expansion of an individual's self-awareness and knowledge resulting in positive change.

Perioperative:

Preoperative, intraoperative, and postoperative phases of the patient's surgical experience.

Physiology:

A branch of biology that deals with the function and activities of life or living matter (organs, tissues, or cells) and of the physical and chemical phenomena involved.

Planning:

Predetermining a course of action in order to arrive at a desired outcome.

Principle:

Comprehensive and fundamental laws, doctrine, truths, or sets of facts that form the basis of established rules of action.

Principles of Pharmacology:

The basis of established policies and process for action in the safe administration of medication.

Problem Solving:

A series of decision making steps designed to organize thought to reach the best solution to a problem.

Process:

A series of acts or progressive changes toward a desired goal.

Professional:

A person who has competence in a particular field or occupation; one who is accountable.

Professional Activities:

Pursuits that lead to self-improvement, career enhancement, and lifelong learning in the occupation.

Professional Development:

Continued acquisition of knowledge through education, professional activities, and participation in the research process.

Professionalism:

Conduct which manifests the educational requirements, legal standards, ethical principle, and requirements of practice based on the philosophy of specialized field of study.

Program of Study:

Experience that students have while enrolled at BHCLR.

Progression:

Movement from one course to another within the same student classification.

Progressive Experience:

A concept based on the principle that learning occurs gradually through discovery and experience.

Promotion:

Advancement in student classification.

Psychomotor Skills:

Physical activity associated with mental processes and the related performance of skills and tasks.

Quality and Education for Nurses (QSEN):

Competencies that reflects a new identity for nurses which demonstrates knowledge, skills and attitudes (KSA). QSEN emphasis is on quality and safety in patient care

Reentry Applicant:

A student previously enrolled in the school to which reentry is sought. Study resumed after Academic Suspension, or Voluntary Change of Status. Discontinued study for some reason; reapplied, selected, entered, and studies resumed.

Registration Process:

A class schedule obtained, necessary forms completed, and required tuition and fees paid or payment arranged.

Resources:

Assets which support the educational endeavors of the school.

Restitution:

Reimbursement to school for damage to or misappropriation of property.

Retention:

Enrolled in a course, eligible to progress according to program of study, eligible for reentry, or graduated. May not be enrolled at a given time, but remains eligible to resume study within 1.5 times length of program of study.

School Campus:

All areas where student instruction is provided; includes affiliate and contracted clinical settings.

Selected Individuals:

Applicants who are selected for entry by a respective selection committee to a specific BHCLR program of study according to established criteria, requirements, and processes.

Self-Concept:

Perceived status of self.

Self-Directed:

Self-determined actions toward goal achievement.

Semester:

A specific time period during which one or more courses are taught.

Sensory Perception:

Recognition and interpretation of the environment through the physiological senses.

Situational Crisis:

Response to a situation that is sudden or unavoidable.

Skills:

Proficiency, competency, or dexterity that is acquired or developed through training or experience.

Spiritual Care:

Responds to basic universal human needs - needs that are not necessarily religious, nor limited to end-of life concerns.

Standards:

Morals, ethics, habits, etc., established by authority, custom, or an individual as acceptable.

Stress:

A physical, chemical or emotional response that may have a positive or negative impact on the state of wellness.

Stressor:

A stimulus which causes stress.

Student Development:

Activities that promote the professional and personal development of a student to fulfill the role of a beginning healthcare professional.

Student Government:

Privilege of self-governance which fosters leadership and citizenship within the policies and philosophy of BHCLR, BHMC-LR, and BH.

Sub-concept:

Elements which are derived from the concepts and provide direction when determining course content.

Syllabus:

A summary, in school approved outline format, listing the main points of the course; evaluation methods, objectives/outcomes, content, teaching plan, and specific policies as applicable.

Teaching Methodologies:

The techniques or strategies used by faculty to promote learning.

Test Proctors-Non-teaching:

A faculty member who facilitates fulfillment of the Mission, Beliefs, and Values of Baptist Health and Baptist Health College Little Rock by exemplifying the Baptist Health values, assisting teaching faculty in administering test to applicants and students, and end of course evaluations according to established guidelines.

Theoretical Knowledge:

A sum of what an individual knows about the subject matter of a discipline based on information and principles related to a set of facts, a science, or an art.

Theory:

A set of interrelated ideas that give a systematic review of phenomena that is explanatory and/or predictive in nature.

Therapeutic Interpersonal Relationship:

Interaction that is goal directed and purposeful.

Thought Process:

Sequential cognitive operations.

Value Based:

Guided by a set of interrelated ideas, principles, rules, or codes which are related according to their relative estimate of worth, merit, or desirability.

Wellness:

Multidimensional state of being, describing the existence of positive health in an individual as exemplified by quality of life and a sense of well-being.

Worth:

A value measurement of quality, quantity, and/or esteem.