College of Health Professions



Handbook 2012-2013

University of Arkansas for Medical Sciences

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SECTION 1.0

GENERAL INFORMATION

1.1 POLICY STATEMENT REGARDING HANDBOOK

Procedures stated in this Handbook require continuing evaluation, review, and approval by appropriate University officials. All statements contained herein reflect policies in existence at the time this Handbook went to press, and the University and College reserve the right to change policies at any time and without prior notice.

1.2 AFFIRMATIVE ACTION POLICY

The University of Arkansas for Medical Sciences fully supports, both in spirit and practice, Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Executive Order 11246, the Rehabilitation Act of 1973 (Sections 503 and 504), Titles I and II of the Americans with Disabilities Act of 1990, and Section 402 of the Vietnam Era Veterans Readjustment Assistance Act of 1974, which prohibits discrimination on the basis of race, sex, color, national origin, religion, age, marital status, ethnic origin, disability and/or disabled veterans and veterans of the Vietnam Era. Student complaints concerning any policy, procedure or practice prohibited by these Acts should be addressed to the Associate Dean for Academic Affairs in the College of Health Professions Dean's Office (501) 686-5732 for assistance in addressing such concerns. The UAMS Office of Human Relations in the Chancellor's Office is also available to assist with these concerns.

1.3 TELEPHONING INFORMATION

1.3.1 UAMS Medical Sciences Campus Dial System

Campus Calls Dial the seven-digit campus number.

Off-Campus Calls Dial the desired number.

Dormitory All Dormitory phones are private.

Overhead Paging Before requesting a page in the Hospital, call the appropriate office or

laboratory; if unable to locate the party, request a page by dialing "0" and giving the operator the name to be paged and the number from which you

(501) 526-2000

are calling.

Display Pagers Dial the display pager number; instructions will ask you to enter your

telephone number; hang up; wait for call back.

Alpha Numeric Pagers Send a page using the e-mail address of the alpha numeric pager (10 digit

pager number@pageme.teletouchpaging.com).

For Telephone related questions, call the Telecommunications Help Desk at (501) 686-6420, Option 1.

1.3.2 Emergency Telephone Numbers

1.3.4

Police	(501) 686-7777
Fire (Code Red)	(501) 686-5333
Medical Emergency (Code Blue)	(501) 686-7333

1.3.3 UAMS Medical Center Emergency Room

Poison Control Center (Emergency) and Drug Information (501) 686-6161 or (800) 376-4766

1.3.5 Rape Crisis Hotline (501) 801-2700 or (877) 432-5368

1.3.6 Central Arkansas Hospitals

Arkansas Children's Hospital Arkansas Heart Hospital	(501) 364-1100 (501) 219-7000
Arkansas State Hospital	(501) 686-9000
Baptist Health Baptist Health Medical Center (North Little Rock)	(501) 202-2000 (501) 202-3000
Central Arkansas Veterans Healthcare System (Little Rock and North Little Rock)	(501) 257-1000
Jefferson Regional Medical Center (Pine Bluff)	(870) 541-7100
North Metro Medical Center (Jacksonville)	(501) 985-7000
Saline Memorial Hospital (Benton)	(501) 776-6145
St. Vincent Health System	(501) 552-3000

1.3.7 Student and Employee Health Services

(501) 686-6565

1.4 EMERGENCY, ACCIDENT, AND INJURY PROCEDURES

1.4.1 Fire Assistance

Activate the nearest alarm box and then dial 686-5333 to inform central control of exact location, floor, wing, room number, what is burning and name of caller. In the education and research buildings, the ringing of a general alarm will signal "Fire/Danger." It is advisable to become familiar with the location of alarm boxes, fire blankets, and extinguishers in the area where you spend most of your time. The fire plan for UAMS is referred to as "CODE RED." "CODE RED" will be put into effect when fire and/or smoke are reported anywhere on campus. The phrase "CODE RED" shall be used as the code for announcing a fire emergency or a fire drill. Under no circumstances should anyone shout "Fire."

1.4.2 Code Black

In the event of an emergency situation requiring a secured campus, a Code Black/Campus Lockdown Alert will be issued. Code Black may be called for an active shooter, hostage situation, terroristic threatening, and other scenarios that include violent events or the threat of such events.

Any threat or act of violence witnessed or experienced by a member of the campus community (including students) must be promptly reported to UAMS Police. Those reporting a threat or act of violence should call **686-7777** immediately. Information the caller should provide the dispatcher includes:

Caller's name and location

Description of assailants and location of the incident

Number of assailants (if known)

A Code Black Lockdown Alert is issued over the public address system in all buildings and through the external sirens. The announcement will as follows or similar to:

The UAMS campus is now in a Code Black status. Everyone should immediately move out of any hallway or other open areas into the nearest office, patient room, or classroom. Close and lock the door. Do not leave the building. Do not enter stairwells or hallways until further notice. If you are currently off campus, do not come to campus.

Upon determination by the UNIFIED COMMAND the campus no longer needs to operate within Code Black status, the public address system will broadcast the following announcement three times.

Code Black all clear, Code Black all clear, please return to normal operations.

1.4.3 Campus Police Dialing

Dial 686-7777 and give detailed information. If there is no answer, dial "0."

1.4.4 Medical Emergency

Call 911. You may also call the CHP Emergency Medical Sciences Department at 686-5772 or take the person to the UAMS Emergency Room.

1.4.5 Reporting Accidents

All injuries and accidents involving students and staff and incurred while fulfilling their respective responsibilities must be reported regardless of clinical location.

If on the main campus of UAMS:

- 1. Report it to the instructor or supervisor.
- 2. Call the Employee/Student Health Center at 686-6565.
- 3. Complete the UAMS Employee/Student/Visitor Injury and Accident Report (see form at http://www.uams.edu/safety/Accident.aspx).

If away from the main campus of UAMS:

- 1. Report it to the instructor or supervisor.
- 2. Contact the appropriate department at the clinical location and complete the required forms specific to that institution.
- 3. Complete the UAMS Employee/Student/Visitor Injury and Accident Report (see form at http://www.uams.edu/safety/Accident.aspx).

1.5 ADMINISTRATION

1.5.1 Chancellor

The chief administrative officer of the campus is the Chancellor who is responsible to the President of the University. Under his leadership, campus affairs are conducted in keeping with state laws and policies established by the President and the Board of Trustees.

1.5.2 Vice Chancellors

Directly responsible to the Chancellor are the Vice Chancellor for Academic Affairs, the Vice Chancellor for Administration and Governmental Affairs, the Vice Chancellor for Campus Operations, the Vice Chancellor for Clinical Programs, the Vice Chancellor for Communications, the Vice Chancellor for Institutional Compliance, the Vice Chancellor for Development and Alumni Affairs, the Vice Chancellor for Finance and Chief Financial Officer, the Vice Chancellor for Northwest Arkansas Region, the Vice Chancellor for Regional Programs and Director of the Area Health Education Centers, the Vice Chancellor for Research, and the Assistant Vice Chancellor of Employee Relations.

1.5.3 **Deans**

Deans are the chief administrative officers of their respective UAMS colleges. The college Deans are empowered to execute all University policies applicable to the colleges. They may establish requirements to be satisfied by members of their faculty and/or staff as may be needed to achieve the goals of their respective organizations.

1.5.4 Chairmen

Chairmen are the administrative officers of the various UAMS departments. They are responsible for the overall operation of their departments. Chairmen are empowered to execute all approved departmental and college policies regarding the academic and administrative aspects of their program(s). Chairmen may delegate specific tasks and responsibilities to departmental division or program directors. Chairmen report directly to the Dean of their respective college.

1.5.5 Medical Director/Advisor

Some disciplines represented in the CHP are support services for medical and surgical specialties. In these disciplines, a Medical Director or Advisor, who is a physician, may be required to meet accreditation standards. A Medical Director or Advisor participates in the development and evaluation of the curriculum and may serve the College and Department in other capacities related to the discipline.

1.5.6 Faculty

Faculty members are responsible for student instruction, university, public and professional service, and a variety of scholarly activities. Faculty in the College of Health Professions report directly to their Department Chairman in all areas of responsibilities related to the departmental goals and objectives.

1.5.7 Clinical/Adjunct Faculty

Clinical and Adjunct faculty are appointed to the CHP to assist in the instruction/evaluation of its students. Those faculty usually have primary appointments of employment in other UAMS or University of Arkansas units, the Department of Veterans Affairs Medical Center, or other affiliated institutions.

1.6 ADMINISTRATION OFFICERS FOR UAMS

Dr. Daniel W. Rahn Chancellor

Dr. Jeanne Heard Vice Chancellor for Academic Affairs

Mr. Tom S. Butler Vice Chancellor for Administration and Governmental Affairs

Mr. Mark Kenneday
Mr. Richard Pierson
Ms. Pat Torvestad

Vice Chancellor for Campus Operations
Vice Chancellor for Clinical Programs
Vice Chancellor for Communications

Mr. Lance Burchett Vice Chancellor for Development and Alumni Affairs

Dr. Billy Thomas Vice Chancellor for Diversity and Inclusion Mr. Robert W. Bishop Vice Chancellor for Institutional Compliance

Ms. Melony Goodhand Vice Chancellor for Finance and Chief Financial Officer

Mr. David Miller Vice Chancellor for Information Technology Services and Chief Information Officer

Dr. Peter Kohler Vice Chancellor for Northwest Arkansas Region

Dr. Mark Mengel Vice Chancellor for Regional Programs and Director of Area Health Education Centers

Dr. Larry Cornett Vice Chancellor for Research

Dr. Douglas L. Murphy Dean, College of Health Professions

Dr. Debra Fiser
Dr. Lorraine Frazier
Dr. Stephanie Gardner
Dr. James M. Raczynski
Dean, College of Medicine
Dean, College of Nursing
Dean, College of Pharmacy
Dean, College of Public Health

Dr. Robert McGehee, Jr. Dean, Graduate School

Dr. Jeanne Y. Wei Director of the Donald W. Reynolds Institute on Aging Dr. Christopher Westfall Director of the Harvey & Bernice Jones Eye Institute

Dr. Curtis Lowery Director of the Institute for Translation Research and Community Engagement

Dr. T. Glenn Pait Director of the Jackson T. Stephens Spine and Neurosciences Institute Dr. Bart Barlogie Director of the Myeloma Institute for Research and Therapy (MIRT)

Dr. Richard Smith

Director of the Psychiatric Research Institute (PRI)

Dr. Peter D. Emanuel

Director of the Winthrop P. Rockefeller Cancer Institute

(Dr. Donald R. Bobbitt is President of the University of Arkansas.)

SECTION 2.0

COLLEGE OF HEALTH PROFESSIONS (CHP)

Douglas L. Murphy, Ph.D., Dean

Office location: Administration West Building, Third Floor

Telephone: (501) 686-5731

2.1 MISSION OF THE COLLEGE

The College of Health Professions (CHP) serves the state of Arkansas as the primary arm of the University of Arkansas in offering programs that provide education, service, and research in the allied health professions. The College was organized as a separate college within the University of Arkansas for Medical Sciences in 1971.

In fulfilling its mission, the College of Health Professions offers education and training opportunities for students of the allied health professions to prepare them as graduates to assume the roles of the professional. The College curricula coordinate the professional course work with the arts, humanities, and basic and social sciences into a total educational experience that emphasizes life-long learning in the allied health professions.

Patient and public health education is an important part of the mission of the College of Health Professions. In its public service role, programs in the College render patient care services as part of their educational efforts under the supervision of faculty. Technical advice and consultative services are available from the College to institutions and agencies throughout the state. The professional service mission of the College includes the offering of continuing education courses to practitioners to enhance teaching, administration, and professional skills.

Research in the College of Health Professions involves the educational process as well as professional fields. The research mission involves the quest for new information which addresses the health and health care educational needs of the state, and the sharing of this information with the scientific community.

2.2 CHP ROLE AND SCOPE

The CHP mission is achieved through the varied offerings of its departments. The College, the only one of its kind at an academic health science center in Arkansas, has as its main role the education of allied health professionals to serve in the health care delivery system in the state. The specific educational programs currently offered within the College of Health Professions are provided by eleven academic departments. They include: Audiology and Speech Pathology; Dental Hygiene; Dietetics and Nutrition; Emergency Medical Sciences; Genetic Counseling; Health Information Management; Imaging and Radiation Sciences (Diagnostic Medical Sonography, Medical Dosimetry, Nuclear Medicine Imaging Sciences, Radiation Therapy, Radiologic Imaging Sciences); Laboratory Sciences (Cytotechnology, Medical Laboratory Sciences); Ophthalmic Technologies; Physician Assistant Studies; and Respiratory and Surgical Technologies. Programs range from academic requirements of one semester to programs that require four or more years. Academic awards include the certificate and the associate, bachelor, master, and doctoral degrees. Nearly all the programs stipulate prerequisites for admission that must be completed at another (general undergraduate) institution.

Other roles of the College of Health Professions include public and professional service, and research. The College offers professional continuing education opportunities to enhance the abilities of practicing allied health professionals; serves as a resource center for allied health planning, education, and delivery systems in Arkansas, and develops applied research programs in allied health. All of these roles combine to support the overall mission of the College.

2.3 DEPARTMENTAL LISTINGS

The following departments comprise the College:

Audiology and Speech Pathology

Thomas W. Guyette, Ph.D., Chairman

UAMS #702/UALR

Speech, Language, and Hearing Clinic

University of Arkansas at Little Rock

2801 South University Avenue

Little Rock, Arkansas 72204 Telephone: (501) 569-3155

Audiology

Nannette Nicholson, Ph.D., C.C.C.-A., Program Director

Communication Sciences and Disorders

Betholyn Gentry, Ph.D., Program Co-Director

Communicative Disorders

Terri J. Hutton, M.F.A., Graduate Coordinator

Dental Hygiene

Susan Long, Ed.D., Chairman

CHP Building 4, Room 4.G24

UAMS #609

Telephone: (501) 686-5734

Dietetics and Nutrition

Reza Hakkak, Ph.D., Chairman

CHP Building 5, Room 5.G44

UAMS #627

Telephone: (501) 686-6166

Emergency Medical Sciences

Daniel L. Bercher, Ph.D., Chairman

CHP Building 4, Room 4.123

UAMS #635

Telephone: (501) 686-5772

Genetic Counseling

Lori Dean, M.S. L.C.G.C., Interim Chairman

CHP Building 3 UAMS #836

Telephone: (501) 526-7700

Health Information Management

Kathy Trawick, Ed.D., R.H.I.A., Chairman

CHP Building 4, Room 4.G16

UAMS #733

Telephone: (501) 686-8613

Imaging and Radiation Sciences

CHP Building 5, Room 5.108

UAMS #563A

Telephone: (501) 686-5869

Diagnostic Medical Sonography

Anthony L. Baker, M.Ed., Division Director

CHP Building 5, Room 5.144

UAMS #563B

Telephone: (501) 686-5948

Medical Dosimetry

Xin Zhang, Ph.D., D.A.B.R., Division Director

UAMS Radiation Oncology Center, Suite 2010

UAMS #771

Telephone: (501) 526-6490

Nuclear Medicine Advanced Associate

James Bellamy, M.P.H., Program Director

CHP Building 5, Room 5.123

UAMS #714-A

Telephone: (501) 686-6848

Nuclear Medicine Imaging Sciences

Paul D. Thaxton, M.A.T., Division Director

CHP Building 5, Room 5.115

UAMS #714

Telephone: (501) 686-6848

Radiation Therapy

Sheila Randolph, B.S., Acting Division Director

CARTI/St. Vincent PO Box 55050

Little Rock, AR 72215

Telephone: (501) 603-7621

Radiologic Imaging Sciences

Cindy Saylors, M.Ed., Division Director

CHP Building 5A, Room 5A.163

UAMS #563

Telephone: (501) 686-6510

Radiologist Assistant

Dale E. Collins, M.S., Program Director

CHP Building 5, Room 5.108

UAMS #563A

Telephone: (501) 686-7438

Laboratory Sciences

Donald D. Simpson, Ph.D., Chairman

CHP Building 5, Room 5.G15

UAMS #597

Phone: (501) 686-5776

Cytotechnology

Donald D. Simpson, Ph.D., Program Director

CHP Building 5, Room 5.G27

UAMS #597-1

Telephone: (501) 686-8448

Medical Laboratory Sciences

Karen Hunter, Ph.D., M.T.(ASCP), Program Director

CHP Building 5, Room 5.G27

UAMS #597

Telephone: (501) 686-5776

Ophthalmic Technologies

Suzanne Hansen, M.Ed., Chairman

Jones Eye Institute, Room J930

UAMS #523

Telephone: (501) 686-5150

Physician Assistant Studies

Patricia Kelly, Ph.D., PA.-C., Chairman CHP Building 3, Room 3.115

UAMS: 772

Telephone: (501) 686-7211

Respiratory and Surgical Technologies

Erna L. Boone, Dr.P.H., R.R.T., Chairman CHP Building 4A, Room 4A.150B

UAMS #737

Telephone: (501) 526-4490

Respiratory Care

Erna L. Boone, Dr.P.H., R.R.T., Program Director CHP Building 4A, Room 4A.150B

UAMS #737

Telephone: (501) 526-4490

Surgical Technology

Gennie Castleberry, M.Ed., C.S.T., Program Director

CHP Building 4, Room 4.138

UAMS #737

Telephone: (501) 526-4490

2.4 AWARDS AND SCHOLARSHIPS

2.4.1 College-wide Awards

Chancellor's List: A student is eligible for the Chancellor's List if he or she has completed twelve (12) semester credits of the required departmental courses and has achieved a 4.0 cumulative grade point average for those semester credits. In the event that general education electives are taken concurrently with the twelve (12) SC of departmental course work, the grades for those general education courses will be included in calculating the GPA. To be eligible for the Chancellor's List in future semesters, the student must complete an additional twelve (12) SC in the respective program since the last Chancellor's List report and again achieve a 4.0 cumulative grade point average (e.g., a student can accumulate 3 SC semester one, 6 SC semester two, and 3 SC semester three and again become eligible for the Chancellor's List). If in the semester that the 12 SC is accumulated, the student takes more than the 12 hours, the SC in that semester will be used to calculate the GPA. The GPA will be calculated on the subsequent hours completed including concurrent general education course work. This procedure will be followed for all semester equivalents as appropriate for a given program of study.

Dean's List: A student is eligible for the Dean's List if he or she has completed twelve (12) semester credits of the required departmental courses and has achieved a 3.70 to 3.99 cumulative grade point average for those semester credits. In the event that general education electives are taken concurrently with the twelve (12) SC of departmental course work, the grades for those general education courses will be included in calculating the GPA. To be eligible for the Dean's List in future semesters, the student must complete an additional twelve (12) SC in the respective program since the last Dean's List report and again achieve a 3.70 to 3.99 cumulative grade point average (e.g., a student can accumulate 3 SC semester one, 6 SC semester two, and 3 SC semester three and again become eligible for the Dean's List). The GPA will be calculated on the subsequent hours completed including concurrent general education course work. This procedure will be followed for all semester equivalents as appropriate for a given program of study.

2.4.2 College-wide Scholarships

Arkansas Hospital Auxiliary Association Scholarship: The Arkansas Hospital Auxiliary Association Scholarship was established in the UAMS College of Health Professions (CHP) in 2005. The Arkansas Hospital Auxiliary Association is an advocacy organization that assists its member hospitals through volunteerism and initiatives to facilitate the integration and improvement of health care service delivery throughout Arkansas. The annual scholarship is awarded to one CHP student each year.

James O. Wear, Ph.D. Scholarship: The James O. Wear, Ph.D. Scholarship was established in 2011 in honor of Dr. James Wear, chairman of the former Biomedical Technology program in the UAMS College of Health Professions (CHP). After the Biomedical Technology program was discontinued at UAMS, Dr. Wear continued to provide service to the community and support for the College of Health Professions. The annual scholarship will be awarded to one CHP student beginning in the fall of 2011.

Neil and Clara Spain Endowed Scholarship: The Neil and Clara Spain Endowed Scholarship was established to provide financial assistance to students in financial need in the College of Health Professions (CHP). The annual scholarship will be awarded to one CHP student each year beginning in the fall of 2011.

Ronald H. Winters, Ph.D. Endowed Scholarship: The Ronald H. Winters, Ph.D. Endowed Scholarship was established in 2011 in honor of Dean Emeritus Ronald H. Winters, who retired from the UAMS College of Health Professions (CHP) in February 2011. Dr. Winters served as Dean of the College of Health Professions for nearly 29 years. The annual scholarship will be awarded to one CHP student each year beginning in the fall of 2011.

2.4.3 Program Awards

Audiology and Speech Pathology

Clinician of the Year in Audiology Clinician of the Year in Speech Pathology Scholar of the Year in Audiology Scholar of the Year in Speech Pathology

Cytotechnology

Faculty Gold Key

Dental Hygiene

American College of Dentists' Award
Arkansas State Dental Hygienists' Association Award
Colgate STAR Award
Faculty Gold Key
Hu-Friedy Golden Scaler Award
International College of Dentists' Award
J. D. Jordan Award
Patterson Award for Clinical Performance
Richard D. Hardin Award for Excellence
Sigma Phi Alpha National Honor Society

Diagnostic Medical Sonography

Faculty Gold Key

Dietetics and Nutrition

Maxine Hinton Faculty Gold Key

Emergency Medical Sciences

Faculty Gold Key
The Don R. Fletcher Piranha Award
The EMS Glow Award

Health Information Management

Faculty Gold Key

Medical Dosimetry

Faculty Gold Key

Medical Laboratory Sciences

Faculty Gold Key

Nuclear Medicine Imaging Sciences

Faculty Gold Key Greater Gift Award

Ophthalmic Technologies

Faculty Gold Key

Radiation Therapy

Darrel Wayne Martin Outstanding Student Award Doug Meiner Scholastic Achievement Award Faculty Gold Key

Radiologic Imaging Sciences

Academic Award (Little Rock, Texarkana, and Fayetteville)

Award of Excellence (Texarkana and Fayetteville only)

Dr. and Mrs. Lee Parker Award (Fayetteville only)

Dr. Ray Laevell Memorial Award (Texarkana only)

Faculty Gold Key (Little Rock and Texarkana)

Outstanding Clinic Award (Little Rock only)

Outstanding Student Award (Texarkana and Fayetteville only)

Patrick K. Bean Faculty Gold Key (Little Rock only)

Vicki Lynn Ables Memorial Award (Little Rock only)

Respiratory Care

Clinical Practitioner Award

Faculty Gold Key

Peer Award

Outstanding Academic Achievement Award

Surgical Technology

Faculty Gold Key

Peer Award

Outstanding Academic Achievement Award

2.4.4 Program Scholarships

Audiology and Speech Pathology

Leah Katayama Wilkins Memorial Scholarship

Cytotechnology

Wanda L. Culbreth Memorial Scholarship

Dental Hygiene

Alice Marie Kelly Kuntz Endowed Scholarship

Arkansas Implant Study Group Scholarship

ASDHA Endowed Scholarship

Delta Dental Plan of Arkansas Endowed Scholarship

Diagnostic Medical Sonography

Terry J. DuBose Scholarship

Medical Laboratory Sciences

Bobby Morgan Scholarship

Jerry Brummett Scholarship

M. Gene Hall Memorial Scholarship

Paula Peacock Scholarship

Sharon Edwards Gibbert Memorial Scholarship

Radiation Therapy

H.O. McKenzie Scholarship

Radiologic Imaging Sciences

Dr. and Mrs. Cyrus P. Klein Scholarship (Texarkana only)

Dr. and Mrs. W. R. Brooksher, Jr., Scholarship (Little Rock, Texarkana, and Fayetteville)

Joseph R. Bittengle Scholarship (Little Rock, Texarkana, and Fayetteville)

Kenneth C. Pedersen Scholarship (Little Rock only)

2.4.5 Graduation with Honors and High Honors

Students whose transcript grade point averages (TGPA) are 3.5 or higher will graduate with honors from the CHP. Those students whose TGPA's are 3.7 or higher will graduate with high honors. The TGPA is computed after the end of the preceding fall semester for students likely to be eligible to participate in the following May Commencement (for listing honors recipients in the Commencement Program) and again at the end of each student's academic program (completion of all requirements for the degree). If the TGPA falls below the requisite level for honors after computation for May Commencement, or if the TGPA subsequently rises to the honors level, the student's final program TGPA will be used to determine eligibility for honors or high honors. This means it is possible a student will be listed in the Commencement Program as receiving honors (due to the submission time for program listings), but will not actually be eligible by the time Commencement occurs, OR, that a student eligible for honors at Commencement will not be listed because the requisite TGPA level was not reached until the end of spring or summer semester. To insure students who earn honors will be so notified and appropriately recognized in their records, students will be notified by mail at the end of their academic program if they have earned honors or high honors, and their final transcripts will list these awards.

2.5 OFFICE OF STUDENT AFFAIRS

The CHP Office of Student Affairs is staffed by the Associate Dean for Student Success, the Director of Student Affairs, Registrar, and the Admissions Officer. The Office assists the Dean and the academic departments in the recruitment, selection, and admission of students; student retention; maintenance of student records; and other student affairs. The Office is located in the CHP Dean's Office suite on the third floor of the Administration West Building. The Office is open 8:00 AM - 4:30 PM, Monday through Friday. Appointments may be made by telephoning (501) 686-5730.

2.6 CHP STUDENT COUNCIL

2.6.1 Constitution

Article I (Name)

The organization shall be named the Student Council of the University of Arkansas for Medical Sciences, College of Health Professions.

Article II (Purpose)

The purpose of this Student Council shall be to assist in the development of policies for students; determine ways to communicate policies to students; select representatives to appropriate College committees; and assist in planning student affairs, such as social activities, orientation, reception for friends and parents at graduation, field trips, reception during orientation, and College-wide awards convocations, or other such student affairs as seems appropriate.

Article III (Membership)

Membership in this Student Council shall consist of two elected representatives from each discipline* in the College of Health Professions; a voting member and an alternate, both selected by a method determined by each discipline. For disciplines with students in more than one professional year, it is preferable that the alternate member be a beginning student who will become the voting member upon entering the second professional year. Alternate members will attend meetings of the Student Council but will vote only in the absence of the voting member.

Each class representative must attend the monthly meeting. The alternate must attend if the representative cannot attend the meeting. If the representative misses three meetings, the alternate becomes the representative and the discipline will elect a new alternate.

Each discipline is to have one representative on the Associated Student Government Council. The voting members of the Student Council of the College of Health Professions will represent their respective disciplines on the Associated Student Government Council.

Article IV (Meetings)

Section 1

Regular meetings of the Student Council shall be held monthly during the fall and spring semesters.

Section 2

Special meetings shall be called at any time by the President, by a majority vote of the Student Council, or by a written request of twenty members of the student body of the College of Health Professions. This meeting must be publicly announced at least one week prior to the meeting date.

Article V (Officers)

Section 1

The officers of this group shall be a President, a President-Elect, a Secretary, and a Treasurer, selected from the voting members. Candidates for the position of President-Elect must be students in the first year of a two-year academic program.

Section 2

The officers of this Council shall be elected by majority vote by the voting members of the Council. Voting members of the Council shall elect a President-Elect, a Secretary, and a Treasurer at the first regular meeting of the school year. The President-Elect from the previous year shall assume the position of President. In the event that the President-Elect does not return for a second year, the voting members shall elect a President.

Section 3

Vacancies in office may be filled at any regular meeting by vote of the Council.

Article VI (Amendments)

The Constitution and By-laws may be amended by a two-thirds majority of the votes cast by the student body and approved by the Associate Dean for Student Affairs.

*The disciplines are: Audiology, Cytotechnology, Dental Hygiene, Diagnostic Medical Sonography, Dietetics and Nutrition, Emergency Medical Sciences, Health Information Management, Medical Dosimetry, Medical Laboratory Sciences, Nuclear Medicine Imaging Sciences, Ophthalmic Medical Technology, Radiation Therapy, Radiologic Imaging Sciences, Respiratory Care, and Surgical Technology.

2.6.2 **By-Laws**

Article I (Duties of Officers)

Section 1

The duties of the President are to

- 1. preside at all meetings of the Council;
- 2. officially represent the student body of the College of Health Professions;
- 3. appoint any committees necessary to conduct the functions of the Student Council;
- 4. alert the Council members in writing when a special meeting is to be held and to state the purpose of the session.

Section 2

The duties of the President-Elect are to

- 1. act for the President in his/her absence;
- 2. perform other duties as assigned by the President;
- 3. serve as an apprentice for all duties of the President.

Section 3

The duties of the Secretary are to

- 1. keep minutes of all meetings;
- 2. notify all officers of their election and committee members of their appointments;
- 3. present a written annual report at the last regular meeting of the academic year.

Section 4

The duties of the Treasurer are to

- 1. pay all bills and keep a record of all moneys received and expended, giving a report at each meeting:
- 2. coordinate solicitation of funds (e.g. fund-raising efforts, student activity funds, etc.).

Section 5

All officers, upon retiring, shall deliver to their successors all accounts, records, books, papers, or other property belonging to the Student Council.

Article II (Quorum)

A quorum shall consist of two officers and at least six additional representatives.

Article III (Passage of Motion)

Passage of all motions shall require an affirmative vote by at least one-half of the voting members present.

SECTION 3.0

STUDENT SERVICES

3.1 GENERAL SERVICES

The following is an alphabetical listing of some of the services available to students of the College. It is intended as a brief introduction of what is available and where to go for further information.

Advising, Academic: Comprehensive academic advising is available from the faculty. Because of the small faculty to student ratio, faculty are able to provide advising and/or tutorial assistance directly and in the early stages of academic difficulty. If unable to provide the assistance necessary, the faculty member refers the student to the department chairman or division director. If additional assistance is needed, the Associate Dean for Academic and Student Affairs is available upon referral from the department chairman.

Razorback Football Tickets: The Associated Student Government hosts a sale each spring for the Little Rock Razorback football tickets. Students will receive an electronic notification of the dates and times of the sale. Each student (with appropriate student ID) is allowed to purchase up to two tickets for each Little Rock Razorback game.

Students interested in purchasing tickets to the Little Rock Razorback games must do so at the UAMS Residence Hall Administration Building. Tickets will not be issued at the time of purchase. There are a limited number of tickets available; tickets are sold on a first come, first served basis.

Only exact cash or a check will be accepted, and tickets must be paid in full at the time of reservation (checks preferred). When tickets arrive in the fall, students are notified by campus email of the date, time, and pick-up location.

Automatic Teller Machines (ATMs): ATMs are located on the first floor of the Central Building near Doc Java, the ground floor of the Central Building near the C Elevators, the first floor of Ward Tower near the Patient Discharge Desk, and the lobby of the Outpatient center near the E Elevators.

Counseling Services: See the UAMS Student Wellness Program section 3.17.6, page 24.

Dental Hygiene Services: Dental hygiene care is available at the Dental Hygiene Clinic, Room 1E/13 in the Ward Tower. Services include teeth cleaning, diagnostic radiographs, pit and fissure sealants, and fluoride applications. For appointments, call (501) 686-5733. A modest charge is assessed for the various services.

Educational Development Services: Assistance in areas such as study habits and test taking skills is available. For appointments, call the UAMS Office of Educational Development at (501) 686-7349.

Library Services: Call (501) 686-5980 for further information. See also pages 15-20 for a list of specific services.

Pharmacy Services: Students receive discounts on prescriptions filled at the UAMS Outpatient Pharmacy. For details, call (501) 686-5530.

Speech and Hearing Clinic: The College cooperatively sponsors a clinic for clients with communication disorders. Speech, language, literacy, fluency, and voice evaluations and therapy are available to students at reduced rates. The clinic also offers hearing evaluations, assistive listening devices, audiologic rehabilitation, and hearing aid services. This Speech and Hearing Clinic is located at the University of Arkansas at Little Rock (UALR), University Plaza, Suite 600. For further information, call (501) 569-3155.

Student and Employee Health Services: See Section 3.17, pages 23-26.

Transcript Services: Transcripts may be ordered from the CHP Office of Student Affairs, Third Floor, in the Administration West Building. Call (501) 686-5730. There is no fee for transcripts; however, no more than five (5) transcripts may be requested per day.

3.2 FOOD SERVICES

Cafeteria, Doc Java, Outpatient Center Cafeteria, and Generation Café accepts cash, traveler's checks, and credit and debit cards. Personal checks are not accepted. A twenty percent (20%) discount is given to students who wear a UAMS student ID badge.

Boulevard Bread Company: 7:00 AM – 3:00 PM Monday through Friday

(First floor, College of Public Health Building)

Cafeteria: 6:30 AM – 7:30 PM Monday through Friday

(Ground floor, Central Building)

Code Moo: 11:00 AM – 5:00 PM Monday through Friday

(Ground floor, Central Building)

Doc Java: 7:00 AM – 4:00 PM Monday through Friday

Closed Saturday, Sunday, and Holidays

(First floor, Ward Tower)

Generation Café: 7:00 AM – 1:30 PM Monday through Friday

(Ground floor, Donald W. Reynolds Institute on Aging)

Lobby Café: Open 24 hours a day, 7 days a week.

(First floor, Hospital Lobby)

Outpatient Center Cafeteria: 7:00 AM – 3:30 PM Monday through Friday

(Ground floor, Outpatient Center)

Snack Cart: 7:30 AM – 1:00 PM Monday through Friday

(Foyer, Outpatient Center)

The Gathering Place Café: 7:00 AM – 6:00 PM Monday through Friday

8:00 AM – 1:00 PM Saturday and Sunday

(First floor, Winthrop P. Rockefeller Cancer Institute)

Canteen: Vending machines are available in the canteen 24 hours per day for the convenience of students, faculty, and staff. The canteen is located on the Hospital ground floor. Change machines are available.

CHP Student Study Center: Vending machines are available in the Student Study Center, CHP Building 6A.

3.3 STUDENT HOUSING

On-campus housing is available at the UAMS Residence Hall to all students enrolled at UAMS. Students can find room descriptions and rental rates at the Student Activities and Housing website: www.uams.edu/studentlife or by calling the Housing Office at (501) 686-5850.

3.4 LOCATION OF SELECTED CAMPUS UNITS

3.4.1	Administration West Building	Floor
	College of Health Professions – Admissions, Dean's Office, and Registrar	3
	College of Medicine - Diversity Affairs	3
	Graduate School	2
	UAMS Student Financial Services	1
3.4.1	Winston K. Shorey (formerly Education I) Building	Floor
	Dental Hygiene Clinic (Offices and Student Entrance)	1
	Office of Educational Development	8
3.4.2	Education II Building	
	Academic Services	8
	Audiovisual Services	В
	Classrooms	B, G
	Creative Services	В
	Drug Information Center	6
	Lecture Amphitheaters	G

	Library	1
	Poison Control Center	6
	Teaching Laboratories	8, 9
3.4.3	Fay W. Boozman-College of Public Health Building	
	Classrooms	G
	Auditorium	8
	UAMS Fitness Center	8
3.4.4	I. Dodd Wilson Building	
	Classrooms and Lecture Hall	1
	Classrooms and Lecture Hall	2

3.5 EMERGENCY TELEPHONES

Emergency telephones have been installed on campus for immediate access to the UAMS Police Department at any time of the day or night. Steady or revolving blue lights mark telephones throughout the campus. If you need help or want to report any unusual situation, open the telephone box door and lift the receiver; a Police officer will answer.

3.6 IDENTIFICATION (ID) CARDS

A student ID badge with photograph will be made during the initial registration process. The ID badge entitles students to use the UAMS Library and obtain tickets to University functions at student rates. It should be worn at all times while on campus (including at AHECs and other UAMS sites). If the badge is lost or damaged, or if your name changes while you are a student at UAMS, you may purchase a replacement badge from Creative Services, located in ED II/B/142. Office hours are from 8:00 AM – 4:30 PM, Monday – Friday. New picture ID badges are made on Monday, 3:00 - 4:00 PM; Tuesday, 7:30 - 8:30 AM; and Thursday, 8:30 - 9:00 AM. The fee for a replacement badge is \$11.00 check or cash. The fee for a new photograph and badge is \$13.00 cash or check.

3.7 LIBRARY

Library website: http://www.library.uams.edu

Library mobile website: http://www.library.uams.edu/m

The UAMS Library serves the faculty, staff, and students of all UAMS colleges as well as the staff of the University Hospital. It also extends reference and borrowing privileges to health care practitioners throughout Arkansas either directly or through the Area Health Education Center (AHEC) Libraries. The collection and services are designed to meet the education, research, service, and patient care missions of UAMS.

Regular Hours

Monday through Thursday
Friday
Saturday
Sunday
7:30 AM to 10:00 PM
7:30 AM to 6:00 PM
9:00 AM to 6:00 PM
2:00 to 10:00 PM

Special Library hours during holidays and breaks will be posted in advance in the Library and on the UAMS Library's website. When the Library is closed, materials may be returned to the book drop located on the west side of the Education II south lobby.

The Library Learning Resource Center (LRC) and Historical Research Center may be open fewer hours than the rest of Library during the summer and at other times when classes are not in session.

3.7.1 Study Areas

There are study areas on every floor of the Library that offer a variety of services and accommodate all types of study needs. Some of the amenities the library provides include computers, printers/scanners, an Active Learning Center for collaborative work, open areas for quiet group study, rooms for group study, individual study carrels, a silent study room, and a lounge area with seating & vending machines. Study areas are monitored with security cameras and emergency phones.

Study areas on the first floor of the Library allow students and residents to gain after-hours access to a large study area, silent room, and lounge area. Access to this area after regular library hours is provided via a UAMS ID card swipe in the north lobby on the first floor of Education II Building.

3.7.2 Computers and Printing

Public access computers in the Library provide access to the Library catalog and online resources, as well as the Internet. Printing is available for a charge. All computers in the Library are covered by the Acceptable Use Guidelines - Student Use of UAMS Network and Computer Resources.

3.7.3 Wireless Connectivity

Wi-Fi wireless connectivity is available throughout the Library. Wireless enabled devices can connect to the Internet via the UAMS Guest wireless network by entering an email address and signing on as "Guest".

3.7.4 UAMS Library Website and Remote Access

The UAMS Library web site at http://www.library.uams.edu serves as the gateway to the Library's online resources. The web site includes links to information about the UAMS Library, its services and collections, and databases, as well as links to the online journals and databases, many other electronic reference and research materials, the Library's online catalog and other library catalogs in Arkansas and the U.S. Additionally, links to other Internet resources, including subject-oriented health sciences sites, are provided.

UAMS students can use their UAMS user/domain account and password to access the Library's electronic resources, including databases, electronic books and journals, eReserves, and LRC materials, from off campus.

3.7.5 Checkout of Materials

The UAMS Student ID badge functions as the UAMS Library card.

Up to 10 books may be checked out concurrently. The loan period is for two weeks with two renewals, for a total of six weeks checkout. (If a book is <u>on hold</u> for another customer, it cannot be renewed.)

Print copies on classroom reserve may be checked out for two hours use in the Library.

Headphones are also available for checkout for use with Library computers.

AVs and CD-ROMs may be checked out for three working days unless the material is restricted.

Reference materials, journals and Abstracts/Indexes may not be checked out.

Overdue fines for late books are \$1.00 per day/per book. Courtesy notice reminders that books are coming due are sent via e-mail three days prior to the due date. Renewals may be made online through the Library Catalog, by phoning the Circulation Desk at (501) 686-5980 or replying to the courtesy notice.

The first overdue notice is sent the day after the book is due. Two subsequent notices are sent followed by an invoice if materials are not returned. There is a \$100.00 cap per book on overdue fines with an addition non-refundable \$15.00 billing fee and a \$15.00 processing fee for lost

materials. Borrowing privileges are suspended until all bills and fines are settled. Prior to graduation all students are required to pay any outstanding fines or invoices before they are 'cleared' by the Library

3.7.6 Special Collections

Reserve Collection: Print materials that instructors select to support lectures and class assignments are housed behind the Circulation Desk. Items may be checked out for two hours use in the Library.

eReserves: Digital materials, such as images, PowerPoint presentations, and documents, placed on reserve for students are available via 'eReserves' on the Library web site. These materials are password protected to restrict access only to students enrolled in the courses.

Reference Collection: Non-circulating reference materials are housed on the first floor of the Library. Ask at the Reference Office or Circulation Desk for help in locating items or information. The Robert Watson Room houses older reference materials such as earlier editions of directories, biographies, and statistical documents. Older drug and toxicology reference materials are located in off-site storage. To request these items please contact the Circulation Desk.

History of Medicine Collection: Works pertaining to the general history of medicine are located on the second floor in the Historical Research Center. The Archives Collection, also located in the Historical Research Center, contains materials documenting the history of UAMS and the health sciences in Arkansas.

Core Collection: Core collection materials are heavily used basic resources and primarily recent textbooks that cover all areas of the health sciences. The collection is located behind the Circulation Desk on the first floor of the Library.

3.7.7 Reference Resources and Services

Reference Services staff are available on the first floor of the Library Monday through Friday 7:30 AM - 6:00 PM to help students make efficient and effective use of the Library. They will be happy to provide instruction in Library use. There is no charge for basic reference services.

Online Catalog: Books, audiovisuals, journal titles, and computer-based instruction programs are included in the online catalog, as well as records for books owned by some departmental libraries and the libraries at Arkansas Children's Hospital and the AHEC libraries. The catalog may be searched on computers in the Library or via the Library website.

Online Resources: The Library web site provides access to bibliographic databases (such as CINAHL(Current Index to Nursing & Allied Health Literature), Health & Psychosocial Instruments, PsycInfo and PubMed); clinical reference tools (such as Lexi-Comp, StatRef!, Harrison's Online, Dynamed, and Clin-eguide); image resources, electronic books; and more than 4,000 electronic journals. Most of these resources are available both on and off campus. From off campus, students will be asked to enter their UAMS ID and password before accessing some resources.

Library Research Instruction: The Library offers Library Research Instruction at the request of faculty, staff, or a group of students. Instruction can be tailored to meet specific research needs, including both print and electronic resources. A one-on-one consultation with a librarian can be arranged.

For reference services, resources, or instruction opportunities, you can contact the Reference Department: phone 686-6734, email <u>libraryreferencedesk@uams.edu</u>, Twitter https://twitter.com/uamslibrary, Facebook https://twitter.com/uamslibrary, or visit the Reference Department in the Library on the first floor of the Education II Building.

3.7.8 Mobile Resources

The UAMS Library has a strong commitment to mobile resources by providing access and assistance with the mobile versions of research databases, clinical resources, and reference sources. Technical support is available for Android, Blackberry, iPhone/iPad, Palm, and Windows devices in the Learning Resources Center on the fifth floor of the Library. Check the Library web site for detailed

information. The Library also has a mobile site that provides library hours, directions, departmental contacts, access to our social media pages & mobile products, and allows you to search the library catalog & renew items.

3.7.9 Interlibrary Loans

The Interlibrary loan staff obtains materials not available in the UAMS Library from other libraries and commercial document suppliers. Interlibrary Loan requests are submitted through the ILLiad section of the Library website at https://www.library.uams.edu/illiad/firsttime.aspx after a one-time registration. There is a \$5.00 charge for each item requested. Customers are notified if they will be responsible for additional copyright fees or other document delivery charges. For more information, please call (501) 686-6744 between the hours of 7:30 AM and 5:00 PM, Monday through Friday, or email libraryinterlibraryloan@uams.edu.

3.7.10 Photocopiers, Copy Cards, and Printing

Two photocopiers are available on the first floor of the Library. Copy costs are \$.10 cents per page for black and white copies and \$.20 cents per page for color copies. The copiers take coins, dollar bills, and print cards. Copies may also be saved to flash drives for printing later.

Print cards are sold at the Circulation Desk and are necessary in order to print from the Library computers. The cards range in price, with a minimum card cost of \$1.00 for 10 copies. Print cards can also be recharged for any amount in increments of \$.10 cents. The Library accepts cash, checks, and credit and debit cards.

3.7.11 Group Study Rooms

The UAMS Library has seven group study rooms available, three on Level 2 and four on Level 3. These rooms may not be reserved but are available on a first-come-first-served basis, and are intended for use by groups of two or more persons. Markers for the white boards in the rooms are available for checkout at the Circulation Desk. Three additional group rooms on the third floor have audiovisual and computer equipment for use by small groups of students.

3.7.12 Lounge, Vending Machines, and Food in the Library

The Library allows food and covered drinks (including cans and bottles) in the Library. An area on the first floor is a mini-lounge with vending machines for coffee, bottled drinks, and snacks. "Big time" eating should take place in the lounge area; however, food may be eaten throughout the Library in study rooms, carrels, and other tables. **Please note**: Eating will not be allowed at the computer workstations!

The Library will not use the PA system to announce deliveries, and the delivery people will not be allowed to enter the Library! People placing orders must arrange for delivery and pickup in the lobby.

The Library will provide large waste baskets and recycling bins. Please let Library staff know if a spill needs additional attention! It is up to individuals to take care of their trash and to help keep the Library environment clean, sanitary, and pleasant.

The Library staff asks that students remember to leave an area in good condition. Explicitly, Library staff should not be expected to pick up after others. We think we can do our part to provide a nice environment if you'll help us by taking care of the Library with us.

3.7.13 Learning Resource Center

The LRC is located on the third and fifth floors of the Library. Assistance is available in LRC for online testing, mobile devices, and specialized electronic resources.

The LRC web page at http://www.library.uams.edu/lrc/ contains information about services and resources of importance to COM students, including a list of many Web-based educational programs.

Audiovisuals: Audiovisual materials and equipment are available for student use in the LRC at the north end of the third floor of the Library. The audiovisual collection includes slide sets, videotapes, audiocassettes and models. Audiovisual materials not on reserve for classes or restricted by licensing agreements are available for 3-day checkout. The LRC does not lend equipment.

Computer Labs: All LRC student computer labs provide access to a wide variety of computer-based educational resources as well as Microsoft Office applications, the Internet, and the Library's electronic resources. Some programs on CD-ROM may be checked out and some of the programs are available over the Internet from locations off-campus. Check with the LRC staff on availability. There is a \$.10 cent charge for printing from the computers in the LRC computer labs. The computer labs are located on the third and fifth floors of the Library. In addition to the above mentioned resources, the fifth floor lab computers provide scanning and image manipulation programs to assist students in preparing presentations.

3.8 MAIL SERVICE

3.8.1 Mail Room Services

The Mail Room window is open daily between the hours of 8:00 AM – 4:00 PM Monday through Friday. Regular first class stamps are sold individually, by the book of 20, or by the roll of 100 when available. The stamps are available on a cash only basis. Personal stamped mail as well as business related items are accepted. All mail received in the Mail Processing Center is taken to the U.S. Post Office daily at 4:30 PM, Monday through Friday.

3.8.2 Interdepartmental Campus Mail

Campus mail can be sent free of charge by dropping the letter or package at the Mail Room G900 near the hospital cafeteria or in any departmental office.

3.8.3 U.S. Mail

The U.S. Postal Service restricts packages to a 13-ounce weight limit, but by using the "click and ship" service available at http://www.USPS.com packages can still be sent out through the UAMS Mail Processing Center.

3.9 OFFICE OF EDUCATIONAL DEVELOPMENT (OED)

Many students find that the pace and amount of learning in CHP courses are considerably different from other courses they've had. CHP students often say they have more to learn in one course than in an entire semester in other courses. Learning in CHP courses is "learning on steroids."

Just as you take stock of your health during annual physicals, the beginning of the semester is a good time to take stock of your study and learning skills. Some Educational Development resources to help you check your study skills and "kick your learning up a notch" are:

- Learning skills assessments: Helps you check skills such as identifying relevant information, making the best use of practice test questions, and condensing/organizing lecture and text information. To schedule a "learning skills checkup," call (501) 686-7349 or (501) 686-5720.
- Learning in CHP sessions: Although these sessions are available at any time, they are most helpful during the first few weeks of the semester for non-science majors or anyone who's been out of school for a while. These sessions focus on important study skills for CHP courses such as the amount of information and type of learning (application vs. rote memory) and on strategies for retaining and applying information.

Call Dr. Judy Garrett at (501) 686-7349 or (501) 686-5720 for more information about these services or to schedule an appointment for a learning skills checkup or help with study strategies.

3.10 OFFICE OF ACADEMIC SERVICES (OAS)

The OAS is located in ED II, Rooms 8/141 and 8/145, and is responsible for the logistic support of curriculum delivery for the campus. Such functions include: Classroom and Teaching Laboratory Support, Instrumentation Laboratory Repair, Room Scheduling, Microscope Rental, and Locker Assignments. Please contact the OAS Administrative Offices for more information at (501) 686-5575.

3.11 CREATIVE SERVICES

Creative Services is a division of the Office of Communications & Marketing. The following services are available to assist students in the effective use of communications media:

Graphic Design: Design and production of illustrations, magazines, announcements, brochures, booklets, stationary needs, certificates, forms, newsletters, special reports, presentations, charts, graphs, displays, posters, and original art. Writing and editing services are also available.

Photography and Imaging: Student photographs are taken during fall registration for use in the yearbook and inclusion in a class composite print. Students may purchase a composite from Creative Services, located in ED II/B142. Other services include event photography, commercial photography, and executive portraiture.

Printing: Production of a wide variety of printed matter, including booklets, brochures, forms, newsletters, stationary, business cards, catalogs, and announcements. Photocopying, both in color and black and white, and high speed digital printing are also available.

Video and Audio: A full production studio is available for audio and visual projects. CD/DVD duplication and video tape format conversion are also available.

Presentation Support: PowerPoint presentations, scientific posters, displays, and rental of display material are all available.

For more information about these services and their cost, contact Creative Services, ED II/B142 at (501) 686-5570.

The UAMS Web Center is responsible for online communications, websites, and social media. In addition to managing the websites and the UAMS Intranet, it offers services in Web design, construction, and maintenance of websites, blogs, and other forms of online media, as well as set-up and consulting related to Facebook, Twitter, and YouTube. The Web Center is located in ED II at (501) 686-8817.

3.12 STUDENT INSURANCES

3.12.1 Student Health Insurance

It is the policy of the University of Arkansas, Board of Trustees (policy 1260.1) that all students in the College of Health Professions must be covered by hospitalization-surgical-medical insurance. The University will arrange for a policy to be available for purchase at registration or the student may obtain his/her own health insurance coverage. If it is discovered at any time that a student is not covered by health insurance as required, the student may be pulled from the class or their rotation and considered for dismissal from the College of Health Professions. To verify coverage, students are required to enter personal health insurance information into the campus online insurance system each semester. The insurance system link can be found at https://online-apps.uams.edu/info/Home.aspx. Please Note: All students are required to have health insurance at all times but only full-time students are required to verify coverage by inputting health insurance information into the online system.

Health insurance plans must meet these requirements:

- Policies must provide \$100,000 in coverage for each covered injury or sickness incident.
- Policy must have no major exclusions. For example: plan must cover major medical, pharmacy, emergency medical, mental health, and diagnostic x-rays/laboratory services.
- Health insurance coverage is required for the entire semester for which a student is enrolled at UAMS.

- Individual plans must have a policy year deductible of \$1,000 or less. Family and employer plans are exempt from a minimum deductible.
- Plan must provide identification card or policy with student name and/or policy information allowing student insurance monitors to confirm eligibility.
- Insurance company must provide documents in English with currency amounts converted to U.S. dollars and an insurance company contact telephone number in the U.S.

More information about the student health insurance plan offered by the campus is available from the Office of Student Activities at (501) 686-5850 or on their website at www.uams.edu/studentlife.

3.12.2 Student Liability Insurance

The CHP requires all students to purchase liability insurance effective during their enrollment in any course requiring active participation in a patient care setting. The fee for liability insurance is included in the tuition and fee statement. Students should contact the Department Chairman for current information regarding this requirement.

3.13 PUBLICATIONS

3.13.1 The Caduceus

The Caduceus is the UAMS yearbook and is published annually. Full-time students and all graduates are entitled to one copy.

3.13.2 The UAMS Update

The UAMS Update is produced monthly by the Office of Communications & Marketing. It contains information of interest to UAMS staff and employees.

3.13.3 College of Health Professions Web Page

The CHP web page can be accessed through the UAMS homepage on the Internet. The homepage website is www.uams.edu.

3.13.4 The College of Health Professions Newsletter

The CHP Newsletter is published two times each year. The newsletter helps students, employees, and friends of the college stay up to date with new developments; upcoming events; accomplishments of our employees, students, and alumni. Contact the Office of the Dean to have your address added to the mailing list. In addition, we send an e-newsletter to employees, students, and friends of the college two times each year. You may read previous issues of the print newsletter and e-newsletter on the college's web page.

3.14 RECREATIONAL SERVICES

3.14.1 Intramural Sports

The intramural sports offered at UAMS include: flag football, basketball, and softball. Information can be found on the student activities website at www.uams.edu/studentlife or obtained by contacting the Assistant Director of Student Activities at (501) 686-6973.

3.14.2 Fitness Center

Students may join the UAMS Fitness Center located on the eighth floor of the College of Public Health building. The current fee is \$15.00 per month. The Fitness Center is the hub for all wellness-related activities, programs, events, classes/seminars, materials, and community involvement initiatives. The Fitness Center includes a 24-hour gymnasium, on-site management, and access to nutritionists, dietitians, trainers, and other health care professionals. The Fitness Center also carries a

full line of supplements at wholesale prices. Some of the items offered include protein ready to drinks, energy drinks, protein bars, and full line of snack items. For more information, visit the website at http://fitnesscenter.uams.edu/.

Students receive a \$10 per month discount at UALR's Donaghey Fitness Centers. You will have to show proof of your current UAMS enrollment by showing your current student ID badge at those facilities. You must also provide your social security number to receive the discount. Membership is for the UAMS student only, and neither the card nor membership is transferable. This discount is provided by the Office of the Vice Chancellor for Academic Affairs.

3.15 UAMS ASSOCIATED STUDENT GOVERNMENT

The Associated Student Government (ASG) is the student governing body that represents all colleges on campus. All students are encouraged to attend the monthly meetings; however, dates and locations vary from year to year. For the ASG meeting schedule and other campus events, students should visit www.uams.edu/studentlife, or contact their ASG representative. Students may also view Blackboard and the Education II building ground-level concourse and the I. Dodd Wilson building televisions for other information. Students are encouraged to stay informed and make suggestions to their ASG representative on ways to improve campus life.

3.16 RELIGIOUS OPPORTUNITIES

Chaplain Services: Chaplain George Hankins-Hull, is the Director of UAMS Medical Center Pastoral Care and Clinical Pastoral Education Department. While its pastoral services are primarily directed toward patients, their families, and staff persons, students may also call for short-term personal counseling needs.

The non-denominational Samuel Moore Walton Memorial Chapel is open every day 6:00 AM - 8:30 PM for quiet prayer and meditation and is located on first floor (1E90) of the Hospital next to the Dental Hygiene waiting room. The Pastoral Care office is located on the first floor of the Hospital (1E50) across from the Gourmet Bean. It is open 8:00 AM - 4:30 PM, Monday through Friday. You may reach the Pastoral Care office at (501) 686-5410.

3.17 STUDENT AND EMPLOYEE HEALTH SERVICES

The Arkansas Board of Trustees Policy 1260.1 requires all students enrolled in the colleges of the University of Arkansas for Medical Sciences to be covered by hospitalization/surgical/medical insurance.

3.17.1 Student and Employee Health Services (SEHS)

SEHS provides the following services at no cost to the student:

- Establishment and maintenance of an immunization record
- Annual tuberculosis screening after enrollment
- Annual influenza vaccine
- Completion of vaccine series initiated at pre-enrollment
- Care of needlesticks and blood/body fluid exposures.

SEHS has two locations for your convenience. The main clinic is in the Family Medical Building at 6th and Jack Stephens, across from the Jones Eye Institute. **SEHS** has a separate entrance off of the parking lot. The clinic is open 8 AM to 4:30 PM, Monday through Friday. The second clinic is located on the ground floor of the Central Building room G 605, across from Human Resources, off the corridor leading to the parking deck (Parking 2). This clinic is open 7:00 AM to 3:30 PM, Monday through Friday. Both locations are closed on holidays.

3.17.2. Student Health Clinic

The Student Health Clinic (SHC) is for students with acute medical conditions that require prompt evaluation. Only students who have paid the clinic fee at registration will have access to the SHC. Students who subscribe to the Academic Health Plan will have their deductibles and co-pays waived. See the website for details on covered services.

http://www.uams.edu/dfcm/student-employeehealth/student.asp.

Call (501) 686-6381 for more information or to make an appointment.

SHC is located on the terrace level of the Family Medicine Building at 6th and Jack Stephens Drive. The clinic entry is on the east side (Cedar Street) of the building. Free parking is located behind the building and may be accessed from 6th Street.

3.17.3 Family Medical Center (FMC)

The FMC is located on the UAMS campus on the corner of 6th and Jack Stephens Drive. The FMC offers medical care to students and their families who choose one of the Family Practice Physicians as their Primary Care Physician (PCP). The FMC offers a full range of Primary Care including women's health, newborn, pediatric, and adult care.

Appointments may be made by calling (501) 686-6560. When calling, please identify yourself as a UAMS student to receive preference in scheduling. Students are responsible for co-payments at the time of check-in at the FMC clinic.

Call (501) 686-6560 and ask to speak with a manager if you have questions regarding service or billing.

3.17.4 Dental Hygiene Services

Dental hygiene services are available to UAMS students at a nominal fee. Services include teeth cleaning, diagnostic radiographs, pit and fissure sealants, and fluoride applications. The Dental Hygiene Clinic is located in room 1E/13 in the Ward Tower. For appointments call (501) 686-5733.

3.17.5 Pharmacy

Students receive discounts on prescriptions filled at the UAMS Outpatient Pharmacy located in the Outpatient Center on the first floor. Call (501) 686-5530.

3.17.6 UAMS Student Wellness Program

Clinical Team: Angela Shy, M.D., Justin Hunt, M.D., Barbara Baldwin, L.C.S.W., and Janice Summerhill, L.P.C.

Program Management/Assistants: Ms. Meshelle Helms and Sherry Bullard

Introduction: The UAMS Student Wellness Program (student mental health program) is a preventative service created to provide short term, confidential assistance for students who are actively enrolled at UAMS (Little Rock Campus). The purpose of this service is to provide the necessary tools for students to achieve their fullest potential.

Students seek help for depression, anxiety, grief, relationship conflicts, academic difficulties, and numerous other issues interfering with their maximal functioning. Seeking care through this service is absolutely confidential. The only exceptions to the strict code of confidentially (as required by law) include homicidality (planning to kill someone else, or being so severely impaired that patients in your care are in jeopardy), suicidality (planning to kill self) and child abuse. Record keeping is also strictly confidential within the student wellness program and **does not** become part of the campus-wide electronic UAMS medical record.

For short-term treatment, there is no financial cost to students seeking care (other than the cost of medication should it be needed). The service is made possible through the support of the Chancellor of UAMS, and a portion of the student health fee. A utilization report is generated annually to justify continued funding for the service. This report may contain the number of students utilizing the

service and describe the types of problems students seek help for. Specific identifying information about the students is **NOT** released.

Due to the high volume of utilization, students are urged to keep an appointment once it is made or cancel as far as possible in advance to allow other students timely access to services.

Referrals for Long Term Difficulties: Students suffering from major mental illnesses and/or severe substance addiction requiring inpatient hospitalization and/or intensive long-term care will be referred to a community mental health center, the UAMS Psychiatric Clinic, or to appropriate resources in the community. The cost for this level of care is the responsibility of the student (it is important to maintain health insurance coverage without lapse through school).

Hours: The Student Wellness Program can be reached by telephone at (501) 686-8408 between 7:45 AM to 4:30 PM Monday through Friday. Students are seen by appointment only. To schedule a confidential appointment, telephone Ms. Meshelle Helms or Sherry Bullard at (501) 686-8408. Help us know the type of problem you are having and how urgently you need help. This will help us triage urgent situations immediately and/or schedule you with the most skilled clinician for your particular problem.

EMERGENCIES: For an after-hour emergency, call the UAMS operator at (501) 686-7000, identify yourself as a UAMS student with an emergent problem, and request the operator to page the UAMS Department of Psychiatry resident on call.

Location: The Student Wellness Program is located at 201 Jack Stephens Drive, in a two story grey building. The office suite is on the street level. Ring the doorbell for entry. Parking is available immediately in front in reserved parking spaces #15, #17, #19, and #20 for the duration of the appointment (only).

3.17.7 Speech, Language, and Hearing Services

The CHP cooperatively sponsors a clinic for clients with communication disorders. Speech, language, literacy, fluency, and voice evaluations and therapy are available to students at reduced rates. The clinic also offers hearing evaluations, assistive listening devices, audiologic rehabilitation, and hearing aid services. The Speech and Hearing Clinic is located at the University of Arkansas at Little Rock (UALR), University Plaza, Suite 600. For information, call (501) 569-3155.

3.17.8 Safe Places SafeLine®-Sexual Violence and Human Trafficking Hotline

The Safe Places SafeLine[©] provides intervention through a 24-hour crisis line, available whenever a survivor of sexual assault or human trafficking needs emotional support, encouragement, or safety information. Emergency advocacy is available through trained crisis intervention advocates to any individual who seeks care in hospital emergency rooms following a sexual assault or related victimization.

The crisis advocate provides emotional support, printed self-help materials, a change of clothing, information and referral to other services, intervention for any family member who is present, as well as short-term or long-term advocacy.

Housing is not available at Safe Places, but advocates are able to assist in finding emergency housing through partner organizations, particularly for female victims of human trafficking and victims of intimate partner violence.

If a crisis advocate is not immediately available, the individual seeking hospital care may request that hospital personnel contact a Safe Places advocate on their behalf for continuing support. Receiving services from a crisis intervention advocate is always the decision of the victim, however the victim could be encouraged to accept services by being informed that services from Safe Places are confidential, free of charge, available long term, and exist to help victims even if they call weeks, months, or even years following their victimization,

Safe Places services are available on site at 1609 Broadway in Little Rock. Compassionate staff persons provide individual counseling and support groups in a safe, non-threatening environment to individuals who are involved in the healing process following victimization. Support groups provide a professional facilitator, peer support, a safe place to express emotions, non-judgmental acceptance and emotional support, or even a place to be silent and think. Services are free of charge and all client information confidential.

Safe Places' in-person services are provided throughout Pulaski County on site and through local hospitals. Crisis intervention via phone is available statewide. The crisis line can be accessed through the local or statewide SafeLine® numbers: (501) 801-2700 (Pulaski County) or 1-877-432-5368 (statewide, toll-free).

The Safe Places SafeLine® for Pulaski County provides crisis intervention via telephone and serves as a resource and referral source for anyone who needs assistance. The statewide SafeLine® provides callers with local contact to crisis centers in their areas,

Child Victims:

In Pulaski County, child victims of abuse typically present at Arkansas Children's Hospital, which implement a very specific protocol for providing comprehensive services to children and their non-offending family members. However our SafeLine® does receive calls from other hospital emergency departments, particularly in rural areas of the state, for information on working with child victims in the emergency departments. We are able to provide consultation in these cases and offer assistance to non-offending family members. If there is a court case involved in the future, it is very helpful for children and families to have Safe Places staff as a continuing resource. We are able to refer them to advocacy resources in their area of the state or provide support via telephone contact. If distance is not a factor, our child advocate is available to child victims and their non-offending family members for in person services.

Nursing staff may contact Safe Places at any time for additional information on services available to victims. Information or questions regarding victim needs in the emergency department, forensic examination information and family advocacy is available to nursing staff throughout the state. While Safe Places crisis advocates cannot travel outside of Pulaski County, they can offer updated information on sexual violence crisis centers, human trafficking safe houses, child advocacy centers or domestic violence services in your area.

3.17.9 Intervention for the Impaired Allied Health Student Program

The College of Health Professions encourages all students to seek confidential help at the first sign of difficulty due to substance abuse. Any student who feels he/she may have a substance abuse problem can voluntarily confide to a faculty member or Student Wellness Program (SWP) staff (see section 3.17.6). If the student confides to a member of the faculty, the faculty member will refer the student to SWP for a confidential evaluation. A student who is self-referred or referred by a member of the faculty will receive confidential short-term mental health care provided by SWP. If the SWP evaluation finds the student's substance abuse problem beyond the SWP scope of practice, the student will be referred to resources within the community that may be able to offer the student proper care and treatment. If the SWP evaluation finds the student impaired due to substance abuse, SWP will recommend an appropriate treatment plan for the student. If the student is compliant with the treatment plan recommended by SWP and the student's impairment is no longer an issue, no further action will be taken. If the student does not comply to the treatment plan recommended by SWP, the student will meet with to the Associate Dean of Student Success.

3.17.10 UAMS Medical Center Financial Assistance

The UAMS Financial Assistance Program is available to individuals who have been residents of the State of Arkansas for six (6) months or longer with a financial need based on income guidelines. To apply for this program, you must complete the financial assistance application and provide the following information. This application may be completed before services are rendered or immediately after receiving services.

- 1. Proof of income from all sources for all adult members in your house for the past six months
- 2. Proof that you have been a permanent legal resident of Arkansas for the last six months
- 3. Self-employment income verification
- 4. Denial from Medicaid or date Medicaid application was made if you are waiting for approval
- 5. Current statements of outstanding medical bills including payment history

More information and the application are available at: https://my.uamshealth.com/feature/billpay/finassistance.aspx.

3.18 UNIVERSITY BOOKSTORE

The UAMS Bookstore is a convenient resource for books, supplies, medical equipment, scrubs, lab coats, and various other items necessary to meet the needs of students, faculty, and staff. Their goal is to provide excellent customer service with the highest urgency, efficiency, and professionalism.

In addition to textbooks and medical equipment, the Bookstore offers a large selection of apparel, accessories, and gift items with the UAMS logo as well as a large selection of scrubs. They also carry a wide range of convenience items such as candy, cold beverages, over-the-counter medications, stamps, and the Arkansas Democrat-Gazette.

The Bookstore will accommodate special book order requests for any title that is not in stock (including general interest books).

The Choco-Latte Café in the Bookstore provides flavored-coffee drinks, homemade fudge, hot chocolate, and smoothies. The Choco-Latte Café is open Monday through Friday, 8:00 AM - 4:00 PM.

UAMS Bookstore is located at 200 Hooper Drive, across from the College of Public Health Building (next to the College of Health Professions) and is open 8:00 AM - 5:00 PM, Monday through Thursday and 8:00 AM - 4:00 PM on Friday. The Bookstore accepts cash, personal checks with proper I.D., Visa, MasterCard, American Express, Discover, and UAMS approved vouchers for students receiving financial aid. The Bookstore has six (6) thirty-minute parking spaces in front of their building reserved for customers.

Telephone: (501) 686-6160, fax: (501) 686-7209, e-mail: <u>uamsbookstore@uams.edu</u>, visit the website at: www.uamsbookstore.com, or www.facebook.com/UAMSBookstore.

3.19 GIFT SHOPS

3.19.1 Hospital Gift Shop

The Gift Shop offers greeting cards and many gift items. In addition to gift items, the gift shop carries jewelry, tote bags, candy, novelties, decorative items, travel essentials, and over-the-counter medicines. It is staffed by the UAMS Medical Center Auxiliary. The Gift Shop is located on the main floor of the Ward Tower, near patient discharge area, and is open from 9:00 AM - 6:00 PM, Monday through Thursday, and 9:00 AM - 3:45 PM Friday. Telephone: (501) 686-5519.

3.19.2 Cancer Institute Auxiliary Gift Shop

The UAMS Cancer Institute Auxiliary operates the shop with two purposes in mind: to provide comfort to those who enter and to generate funds for patient care at the Cancer Institute. In addition to our dedicated staff, the shop is supported by caring volunteers who understand what it feels like to be a cancer patient or caregiver. The Cancer Institute Gift Shop offers patient gifts, cancer-specific aids, unusual home décor items, holiday decorations, and refreshing snacks. The Cancer Institute Gift Shop is located on the ground floor of the Winthrop P. Rockefeller Cancer Institute and is open from 8:30 AM – 3:30 PM, Monday through Friday. Telephone: (501) 686-5588. All major credit cards are accepted.

3.20 UAMS DEVELOPMENT AND ALUMNI AFFAIRS

The Office of Development and Alumni Affairs works closely with the Chancellor, Deans and Institute Directors, faculty, the Foundation Fund Boards and Advisory Boards of UAMS, and the University of Arkansas Foundation to facilitate and steward philanthropic gifts for the benefit of UAMS. While the State of Arkansas provides UAMS a small portion of its annual funding, private gifts enable UAMS to reach a higher level of excellence in education, health care, and research. The mission of the Office of Development is to present the needs of the institution to individuals, corporations, foundations, and organizations interested in supporting UAMS through philanthropy. Fundraising activities include major gifts, planned giving, annual fund programs, alumni giving, scholarships, endowments to generate income in perpetuity, and special campaigns to meet the needs of the institution. In addition, the office is responsible for management and stewardship of gifts, donor relations and recognition, processing of gifts, and adherence to applicable standards for gift processing, receipting, and recordkeeping. The telephone number is (501) 686-8200.

3.21 OFFICE OF COMMUNICATIONS & MARKETING

The Office of Communications & Marketing tells "The UAMS Story" to its many constituencies. The office is a separate department within UAMS, headed by the Vice Chancellor for Communications & Marketing, who reports to the Chancellor. The office is responsible for all internal and external communications planning, public relations, news releases and relationships with the media, and advertising/marketing programs. It is also responsible for electronic communications, including the UAMS websites for medical news at www.uamshealth.com and for university news at www.uams.edu. News and information is presented in many formats, including the "UAMS Update" (the employee newspaper); booklets/brochures; radio, TV, and print programs; and through the Internet and intranet. Information is distributed through local, regional, and national print and electronic media organizations to the public and selected constituencies of the university. Students and faculty should refer all calls and requests from the media to Leslie Taylor at (501) 686-8998. For information on guidelines for communications, refer to the section on "Communications" in the Administrative Guide on the Intranet at http://uams.edu/AdminGuide/Win13101.html.

3.22 CHILD CARE FACILITIES

Arkansas Department of Health and Human Services-approved child care facilities are available by contacting the Division of Child Care and Early Childhood Education or accessing the web pages of the licensed child care facilities at the following: www.accessarkansas.org/childcare/.

3.23 UAMS POLICE

The UAMS Police Department is located at the Distribution Center, 800 Cottage Drive. The UAMS Police Department operates 24 hours a day, seven days a week. The Police Department is dedicated to protecting the students, employees, patients, and visitors, as well as the property of UAMS.

The UAMS police officers that you see patrolling the campus complex are not to be confused with security guards. UAMS officers are sworn, certified, and trained in accordance with Arkansas State Standards. They have full police powers of authority and arrest.

The UAMS Police Department, in compliance with the "Student Right-to-Know" and "Campus Security Act," has added an annual security report to its list of printed material that is distributed to our campus community. UAMS Crime Statistics are compiled in accordance with the definitions of the FBI's Uniform Crime Reporting System in which the UAMS Police Department has participated since March of 1979. For a copy of the current security report, you may access it at the following website: http://www.uams.edu/police, or view the report at the UAMS Police Department Dispatch Desk.

SECTION 4.0

RULES AND POLICIES

4.1 AUTOMOBILE REGISTRATION

All faculty, students, and staff of UAMS who park on campus at any time are required to register their vehicles with UAMS Parking Operations and display the appropriate registration decal on the vehicles. Dormitory residents normally register vehicles during fall semester academic registration. Requirement for vehicle registration is a completed registration form. Students can purchase an evening decal. This decal will allow any student to park on the A-level of the North parking deck between 5:00 PM and 7:00 AM Monday - Friday, and anytime on weekends. These are available at registration or through the Parking Operations Office located at the UAMS Distribution Center, 800 Cottage Drive (adjacent to Ricks Armory), Monday through Friday, 7:30 AM - 4:00 PM.

4.2 PARKING

All parking on campus is controlled. Commuting students may park at War Memorial stadium and ride the shuttle bus to the UAMS campus. Students may also park on campus in Lot 10, but they should first register to receive a permit. This lot is first come, first served, and when it overflows, students should park at War Memorial. The shuttle bus runs 4:30 AM - 7:30 PM, Monday through Friday, with exception of UAMS holidays. For further parking information, call UAMS Parking Operations (501) 526-PARK (7275) or check the website at www.uams.edu/parking.

Parking is a limited resource, and to ensure that this resource can efficiently serve as many people as possible, the UAMS Department of Parking Operations asks that you observe all parking regulations on campus.

Regulations: The parking regulations apply on the streets, roads, alleys, sidewalks, walkways, parking spaces, parking areas, and parking lots on or about the UAMS Campus. Penalties for violations include ticketing and fines, booting, towing, and revocation of parking privileges. If you have any doubt concerning legally parking a vehicle, contact the UAMS Department of Parking Operations.

Appeals: Any person charged with a parking violation has the right to appeal to the UAMS Parking and Traffic Committee within seven (7) calendar days of the date of violation. An official Appeal Form can be found on the UAMS Parking Operations website. The administrative charge for the parking violation will be postponed until the complaint has been heard and a decision rendered.

Student Parking:

- 1. A student parking lot is located at West 7th Street and Cottage Drive. Currently, there is no charge for this parking, but a decal <u>is</u> required.
- 2. Students can purchase an evening decal that allows them to park on the A-level of the Parking 2 deck after 5:00 PM weekdays and anytime on weekends for \$21.00 per year. NOTE: Students may not enter the A-level prior to 5:00 PM and must be off the A-level of the deck by 7:30 AM.
- 3. Free parking is available on Lot 1 (located on Markham Street with access off Hooper Drive) between 5:00 PM and 10:30 PM Monday through Thursday and on weekends, Friday at 5:00 PM through Sunday 10:30 PM.
- 4. Free parking is also available any time at the War Memorial Stadium* and additional overflow lots. Please see the Parking Operations website for maps of lots. (*Except when the city closes the lot for special events.)
- 5. Students are subject to all parking regulations, enforcement, and administrative charges. Failure to comply with regulations or to settle outstanding traffic penalties may result in the withholding of academic records.

Patient and Visitor Parking: Students, faculty, and staff are not permitted to park in patient/visitor designated areas. UAMS students or employees who have a clinic appointment as a patient may park in patient/visitor areas, but they should call (501) 526-PARK (7275) to provide vehicle information prior to attending the

appointment. Please visit the Parking Operations website for additional options in reporting at http://www.uams.edu/parking/temppark.aspx. Following the aforementioned process when visiting a friend or relative who is receiving inpatient care in the hospital, the student or employee may park in the visitor area of Parking 1, Parking 2, or Parking 3. The vehicle information needed for patient/visitor appointment is:

- 1. Time of appointment.
- 2. The deck where your car is parked.
- 3. Make and model of the car.
- 4. License plate number.

Handicapped Parking: Vehicles parked in handicap parking spaces must display a current disability license plate or placard issued by the State Department of Finance and Administration. A UAMS parking permit will also be required to park in handicap spaces located in controlled lots. To apply for a parking permit, the information listed below is required and should be submitted to the UAMS Parking Office.

- 1. A completed UAMS Parking Application.
- 2. "Disabled Persons Access to Parking Application" (Issued at Arkansas State Revenue Office).
- 3. Official hanging handicap placard or card.
- 4. Driver's license.
- 5. License plate number.

Motorcycles and Bicycles: Bicycles must obey all rules of the road. Bicycles parked in access ways, on sidewalks, in areas that may obstruct access, or any other improper locations will be subject to a citation and/or impounded. Bicycles racks are available at the ED II and Biomedical II Buildings.

Motorcycles and mopeds can be parked on D-level of Parking 2, Parking 3, and east of the Family Medical Center. An appropriate decal must be displayed. If you have questions regarding bicycle, or motorcycle parking, please contact the Parking Office.

4.3 STUDENT INSPECTION OF EDUCATIONAL RECORDS

STUDENT RIGHTS UNDER THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT

The Family Educational Rights and Privacy Act (FERPA, 20 U.S.C. § 1232g) and University of Arkansas policy require an annual notice that informs students of their rights regarding education records. A student at UAMS has the following rights with regard to his/her education records:

- 1. The right to inspect and review the student's education records, with some exceptions under the Act, within 45 days of the day the University receives a request for access.
 - Students should submit to the appropriate official written requests that identify the record(s) they wish to inspect. The appendix to University-wide Administrative Memorandum 515.1 provides a list of the types and locations of education records, the custodian of those records, and copying fees for each individual campus. The University official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the University official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.
- 2. The right to seek amendment of the student's education records that the student believes to be inaccurate, misleading, or otherwise in violation of the student's privacy rights.
 - Students may ask the University to amend a record that they believe is inaccurate, misleading or otherwise in violation of the student's privacy rights. Students should submit to the appropriate University official a written request that clearly identifies the part of the record they want changed and specifying why it is inaccurate, misleading, or in violation of the student's privacy rights. A sample form which may be used in making this request is contained in the appendix to University-wide Administrative Memorandum 515.1 which may be found in the UAMS Library.

- If the University decides not to amend the record as requested by the student, the University will inform the student of the decision and of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedure will be provided to the student when notified of the right to a hearing and is also contained in University-wide Administrative Memorandum 515.1.
- 3. The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent FERPA authorizes disclosure without consent.
 - One exception which permits disclosure without consent is disclosure to school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic, or research role, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has outsourced institutional services or functions (such as an attorney, auditor, or collection agent); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks.
 - A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility.
 - The University forwards education records to other agencies or institutions that have requested the records and in which the student seeks or intends to enroll or is already enrolled so long as the disclosure is for purposes related to the student's enrollment or transfer.
- 4. The right to file a complaint with the U.S. Department of Education concerning alleged failures by the University to comply with the requirements of FERPA. The name and address of the Office that administers FERPA is:

Family Policy Compliance Office US Department of Education 400 Maryland Avenue, SW Washington, DC 20202-4605

- 5. The right to withhold consent of disclosure of directory information. This information will be subject to public disclosure unless the student informs the Registrar in writing by one week following registration that the student does not want any or all of directory information disclosed.
 - Directory information includes, but is not limited to, the student's name; address; telephone listing; electronic mail address; photograph; date and place of birth; major field of study; grade level; enrollment status (e.g., undergraduate or graduate, full-time or part-time); dates of attendance; participation in officially recognized activities and sports; weight and height of members of athletic teams; degrees, honors and awards received; and the most recent educational agency or institution attended.
 - Directory information also includes a student ID number, user ID, or other unique personal
 identifier used by the student for purposes of accessing or communicating in electronic systems, but
 only if the identifier cannot be used to gain access to education records except when used in
 conjunction with one or more factors that authenticate the user's identity, such as a personal
 identification number (PIN), password, or other factor known or possessed only by the authorized
 user.
 - Directory information does not include a student's social security number.

4.4 PROHIBITION AGAINST HAZING

Prologue

In 1983, the General Assembly of the State of Arkansas implemented Act 75 which prohibits hazing and prescribes punishment for those convicted of hazing. It is printed below in its entirety.

Section 1

A student of any school, college, university, or other educational institution in Arkansas shall not engage in hazing or encourage, aid, or assist any other student in hazing.

Section 2

Hazing is defined as follows:

- 1. Any willful act on or off any school, college, university, or other educational institution in Arkansas by one student alone or acting with others, directed against any other student done for the purpose of intimidating the student attacked by threatening such student with social or other ostracism, or of submitting such student to ignominy, shame or disgrace among his fellow students, and acts calculated to produce such results; or
- 2. The playing of abusive or truculent tricks on or off any school, college university, or other educational institution in Arkansas by one student alone or acting with others, upon a student to frighten or scare him; or
- 3. Any willful act on or off any school, college, university, or other educational institution in Arkansas by one student alone or acting with others, directed against any other student done for the purpose of humbling the pride, stifling the ambition, or impairing the courage of the student attacked, or to discourage any such student from remaining in such school, college, university, or other educational institution or reasonably to cause him to leave the institution rather than submit to such acts; or
- 4. Any willful act on or off any school, college, university, or other educational institution in Arkansas by one student alone or acting with others, in striking, beating, bruising, or maiming, or seriously offering, threatening, or attempting to strike, beat, bruise, or maim, or to do or seriously offer, threaten, or attempt to do physical violence to any student of any such educational institution or any assault upon any such students made for the purpose of committing any of the acts, or producing any of the results, to such student as defined in this Section.
- 5. The term hazing as defined in this Section does not include customary athletic events or similar contests or competitions, and is limited to those actions taken and situations created in connection with initiating into or affiliation with any organization.

Section 3

No person shall knowingly permit, encourage, aid, or assist any person in committing the offense of hazing, or willfully acquiesce in the commission of such offense, or fail to report promptly his knowledge or any reasonable information within his knowledge of the presence and practice of hazing in this State to an appropriate administrative official of the school, college, university, or other educational institution in Arkansas. Any act of omission or commission shall be deemed hazing under the provisions of this Section.

Section 4

The offense of hazing is a Class B misdemeanor.

Section 5

Upon conviction of any student of the offense of hazing, he shall, in addition to any punishment imposed by the court, be expelled from the school, college, university, or other educational institution he is attending.

Section 6

Nothing in this Act shall be construed as in any manner affecting or repealing any law of this State respecting any other criminal offense.

4.5 SUBSTANCE ABUSE POLICIES

4.5.1 Introduction

UAMS is committed to ensuring that employees, students, and faculty have the information and resources necessary to keep our campus free from drug and alcohol abuse. Under federal law, UAMS is required to provide you with certain information regarding our campus and the effects of drug and alcohol use and dependency. The Drug Free Schools and Communities Act Amendment of 1989 is federal legislation developed to eliminate illicit drugs and to initiate intelligent use of alcohol on college campuses and communities.

UAMS policies prohibit the unlawful possession, use, and distribution of illicit drugs and alcohol on campus and provide for sanctions that include termination of employment or dismissal from academic programs. UAMS also provides its employees and students with confidential and professional counseling, including treatment for drug or alcohol dependence, through the Employee Assistance Program and Student/Employee Health Services.

The information on the following website includes additional information about the health risks and legal and UAMS sanctions resulting from drug use, as well and resources to help those who are struggling with dependency: http://intranet.uams.edu/drugfreecampus. You may obtain a printed copy of this information by contacting Tanya Mehran in Institutional Compliance at (501) 603-1379.

4.5.2 CHP Substance Abuse Policy

If a faculty member or the director of Student Wellness Program (SWP) suspects a student of impairment due to substance abuse, the student will be required to submit to an immediate drug screen and will be referred to SWP services for evaluation. SWP will forward a report with treatment recommendations and the results of the drug screen to the Associate Dean for Student Success to be placed in the student's permanent record. The student must comply with the treatment plan recommended by SWP to continue in his/her respective program. A student who is identified under the CHP Substance Abuse Policy is subject to periodic random drug screening as long as he/she is a student at the University of Arkansas for Medical Sciences. Any subsequent drug screening that is reported as "positive" will result in the immediate dismissal of the student. The refusal of the student to submit to the drug screen or SWP evaluation and/or recommended treatment plan will result in immediate dismissal of the student.

4.5.3 UAMS Substance Abuse Policy

Purpose

It is the goal of the UAMS to provide the highest quality health care, education and services available. To achieve this goal it is important that administrators, faculty, staff, and students be able to fulfill their respective roles without the impairment produced by intoxication or addiction to alcohol or other drugs.

The unlawful manufacture, distribution, dispensation, sale, possession or use of any controlled substance (as defined in the UAMS Drug-Free Workplace Policy) by any employee or student of UAMS while on University property or on a University affiliated assignment will not be tolerated. Consumption of alcohol on University property will not be tolerated, except within approved areas by individuals over the age of 21 years. It is the policy of UAMS to provide a drug-free workplace. To support our goal of a drug-free environment, the UAMS drug testing program has been established and consists of (1) pre-employment drug testing, (2) for-cause drug testing, and (3) random drug testing.

Policy

- 1. No employee or student of UAMS may report for their assignments and/or classes impaired by the use of alcohol or following the use of controlled substances.
- 2. Nothing in this policy will preclude the medical or research use of alcohol or controlled substances. Violators of this policy will be disciplined up to and including termination.

3. It is the underlying philosophy of the UAMS that addiction to alcohol and/or other drugs represents a disease state, and treatment of such problems is a legitimate part of medical practice. Employees or students with an addiction to drugs or alcohol are encouraged to seek help through the UAMS Employee Assistance Program (EAP) or Student/Employee Health Service. Individuals who seek help through the UAMS EAP or Student/Employee Health Service will not be punished for seeking such help. However, appropriate disciplinary procedures linked to performance criteria are not precluded by this policy.

4.6 CHP POLICY ON PROFESSIONALISM AND PROFESSIONAL CONDUCT

4.6.1 Purposes of Policy

Professional conduct and professionalism are important in education and the health care professions. Individuals seeking service from professionals in health care or education must be able to trust their provider. This policy establishes standards of professionalism and professional behavior for students, staff, and faculty in the College of Health Professions (CHP).

The policy is meant to be consistent with University-wide policies regarding student, staff, and faculty conduct. It does not supersede any policy established by the University of Arkansas for Medical Sciences.

4.6.2 Fundamental Attributes of Professionalism

Professionalism in health care and education is based upon values that reflect the very special nature of the interaction between a provider and a patient, client, or family and between a teacher and student. Individuals confronting illness, social disruption, or other life-changing challenges are vulnerable. Individuals learning the knowledge, skills, and attitudes of a profession face many new challenges. Patients and students rely upon professionals to address their needs in an expert, professional manner. All who work with patients and their families and those who work with students are expected to act in accordance with the standards of professional conduct outlined below.

There are core values of professionalism that are universal and apply to those in health care professions and in education. These include, but are not limited to, moral values such as honesty, integrity, and trustworthiness; values that are specific to one's profession (e.g., confidentiality), to society (e.g., commitment to excellence), to oneself (e.g., self-reflection), and to humanistic values such as empathy and compassion.

4.6.3 Standards for Professional Conduct

Professional behaviors and professionalism are critical to the effective education of allied health students and the practice of their respective professions. All students, staff, and faculty in the College of Health Professions are expected to demonstrate high standards of professional behavior in all educational settings, including classrooms and laboratories, professional and clinical sites, and in non-educational settings. Examples of such behavior include, but are not limited to:

- 1. Honesty and integrity:
 - a. Act with honesty or truthfulness.
 - b. Demonstrate integrity or firm adherence to moral principles in academic matters and professional relationships.
- 2. Trustworthiness:
 - a. Demonstrate dependability to carry out responsibilities.
- 3. Empathy and cultural diversity:
 - a. Differentiate appropriate interpersonal interaction with respect to culture, race, religion, ethnic origin, gender, and sexual orientation.
 - b. Demonstrate regard for differing values and abilities among peers, other health care professionals, and patients.

c. Demonstrate an ability to share someone else's feelings or experiences by imagining what it would be like to be in his/her situation.

4. Communication:

- a. Communicate effectively with faculty, staff, students, patients, and other professionals.
- b. Demonstrate confidence in actions and communications.
- c. Formulate written communications with professional content and tone.
- d. Ensure the confidentiality of communications that contain personal information.

5. Punctuality:

- a. Demonstrate punctuality in academic and professional environments.
- b. Adhere to established times for classes, laboratories, professional experiences, and meetings.
- c. Comply with established oral and written deadlines.
- d. Respond to requests (written, oral, e-mail, telephone) in a timely fashion.

6. Professional behavior:

- a. Display professional behavior toward faculty, staff, students, patients, and other health professionals in all settings, including but not limited to the classroom, laboratory, and clinical settings.
- b. Show regard for persons in authority in classroom, laboratory, and clinical settings.
- c. Exhibit fitting behavior when representing the College of Health Professions in extracurricular activities and professional meetings.¹

7. Ethical standards:

a. Demonstrate high moral standards related to allied health education, practice, research, and service. These standards include, but are not limited to, telling the truth, maintaining confidentiality, and respecting individuals.

8. Social contracts:

- a. Conduct interactions with patients and their families in a professional manner.
- b. Relate to patients and their families in a caring and compassionate manner.
- c. Recognize instances when one's values and motivation are in conflict with those of the patient and his/her families, and proceed in a manner that is patient focused. If there is a conflict of values or motivations that you think may involve something illegal, unethical, or unprofessional, seek guidance from your supervisor, instructor, or chairman.
- d. Identify to one's supervisor any activity that is dangerous to the welfare of a patient or colleague.
- e. Demonstrate an attitude of service by putting others' needs above one's own.
- f. Comply with federal, state, university, school, and institutional requirements regarding confidentiality of information.

9. Negotiation, compromise, and conflict resolution:

- a. Demonstrate good skills of conflict resolution.
- b. Formulate constructive evaluation of others' performance.
- c. Display a positive attitude when receiving constructive criticism.

10. Lifelong improvement and professional competence:

- a. Produce quality work in academic and clinical settings.
- b. Take responsibility for learning.
- c. Demonstrate continuous professional development by identifying what should be learned and how one might assess his or her competence in new knowledge and skills.

11. Time management and decision-making:

- a. Utilize time efficiently.
- b. Demonstrate self-direction in completing assignments.
- c. Demonstrate accountability for decisions.

12. Appearance:

- a. Maintain a professional appearance when representing the College of Health Professions.
- b. Maintain personal hygiene and grooming appropriate to the setting.

Adherence to professional standards is an academic requirement for graduation from the College of Health Professions and a performance standard for staff and faculty. Failure to meet these standards will result in disciplinary action, which may include dismissal from the academic program and the college.

4.6.4 Resolution of Alleged Incidents of Misconduct

Observation of Unprofessional Behavior

When a member of the CHP community (student, staff, or faculty member) observes inappropriate behavior that represents a possible violation of expected professional standards, he or she will meet with the individual directly to discuss the misconduct. If both parties agree that a satisfactory resolution results from the meeting, no further action is required. If the observer is unable to meet the individual, the matter should be referred directly to the supervisor/chairman.

If the observer is not able to meet with the individual or, after discussing the issue with the individual, the observer thinks that a satisfactory resolution has not been reached, he or she will notify in writing either the supervisor of the staff or faculty member or the department chairman of the student and describe the incident, the alleged breach of professional conduct, and the failure to obtain resolution. The supervisor/chairman will discuss the nature of the incident with the individual, the observer, and other students, staff, or faculty as appropriate to assess the evidence of misconduct and to develop a remediation plan or course of action. If the evidence is not considered sufficient to pursue the allegation, the incident is considered to be resolved. If the evidence is considered sufficient, the chairman/supervisor will notify in writing the Associate Dean for Academic and Student Affairs (for student conduct) or the Associate Dean for Administrative Affairs (for employee conduct) the nature of the incident and the corrective steps recommended. The associate dean will review the report and the recommendations by the supervisor/chairman to ensure that policies and procedures have been followed and that the rights, including due process, of all parties involved have been preserved.

The chairman or supervisor will meet with the student or employee and discuss the breach of professional conduct and the proposed remediation plan or plan of action. Students and employees will be given at least five (5) week days' notice of the meeting. The notice will be in writing, and mailed to the student's or employee's address of record. The notice will contain the time, place, and nature of the meeting, and a brief description of the misconduct. The notice will also inform the student or employee of his/her right to present witnesses on his/her behalf. The accused student or employee must notify the chairman or supervisor about his/her intention to present such witness(es) at least two days prior to the meeting. The chairman or supervisor may have another faculty/staff member present to validate the proceedings in the meeting with the student or employee. The remediation plan may include placing the student or employee on probationary status, mandating counseling, or other actions designed to emphasize the importance of professional conduct and to educate the student or employee about professional behavior. The course of action may also include dismissal or termination. The supervisor or chairman's findings and actions shall be recorded in the individual's file.

At the conference with the student or employee, the chairman or supervisor will:

- 1. Present the accusation;
- 2. Hear the explanation, admission, and/or denial of the alleged act of misconduct by the accused student or employee;
- 3. Discuss the seriousness of the alleged act of misconduct, the implications, and the process for resolution of the allegation;

4. Inform the student or employee of the probable remediation plan previously determined by the chairman or supervisor, for the alleged misconduct.

If the student or employee admits to the allegation and agrees with the recommended remediation plan, the chairman or supervisor will inform the student or employee in writing of the remediation plan to be imposed. The chairman or supervisor will communicate to the student or employee in a written report of the incident and remediation plan. The report will be signed by the chairman or supervisor and the student or employee and forwarded to the Dean of the CHP for review. The Dean may approve or modify the remediation plan recommended in the report but shall not increase the severity of the remediation plan. The Dean's decision must be communicated to the student and faculty member within five (5) week days after receiving the report, at which time the remediation plan for the admitted misconduct is implemented.

Appeal Process for Students

If the student disagrees with the recommended remediation plan, the student may appeal the decision in writing to the Dean of the CHP, within five (5) week days after being informed of the decision by the chairman. The Dean's decision on the appeal will be based on the student's written reasons for disagreement and other pertinent evidence, as well as the written report cited above. The Dean, in ruling on the appeal, may enlist the aid of the Professional Conduct Advisory Panel. The Dean's decision is final and must be communicated to the student within 15 week days from the date the appeal was received by the Dean. If the Dean's decision is to implement the remediation plan, it is implemented at the time of notification.

If the student denies the allegation at the time of the initial meeting with the chairman, the chairman and the student will each prepare a written report to be forwarded to the Dean. The reports shall include a description of the alleged incident of misconduct, the process used to address the allegation, and the outcome of the meeting. The student's written report should include a clear statement of his/her rebuttal to the allegation. The chairman's report should include a description of the alleged act of misconduct and all evidence related to the allegation. These written reports are to be signed by the authors and submitted to the Dean within five (5) week days following the meeting between the chairman and accused student.

The Dean's decision will be based on the student's and chairman's written reports and other available relevant evidence. The Dean of the CHP has the prerogative of establishing a Professional Conduct Advisory Panel, as the need arises, to consider the issues related to alleged incidents of professional misconduct and/or the proposed remediation plans. The purpose of the Professional Conduct Advisory Panel is to insure full investigation of incidents of alleged misconduct and/or the remediation plans when use of the informal process, described previously, has not resolved an issue to the student's satisfaction. The panel shall be advisory to the Dean, and its recommendations shall not be binding upon him/her. The Dean's decision is final and must be communicated to the student within fifteen (15) week days from the date the appeal was received by the Dean. Following this notification, the applicable remediation plan is implemented.

The composition of the Professional Conduct Advisory Panel shall be:

- 1. A chairman appointed by the Dean
- 2. Two faculty members selected by the Dean. One faculty member shall be from the department in which the accused student is enrolled, but he/she shall not be involved in the allegation. The other faculty member shall be from another department of the CHP. If it is not possible to identify a faculty member in the student's department who is not involved in the allegation, both faculty members shall be appointed from other departments.
- 3. Two students selected by the Dean. The students shall be in good standing. One student shall be selected from the department, in which the accused student is enrolled, but not from the same class as the accused student. The second student shall be from another department in the CHP. In the event the department has only one class, both students will be selected from other departments.

The primary duty of the Professional Conduct Advisory Panel shall be to review as rapidly and discreetly as possible all information provided about the alleged incident of misconduct and to seek other facts deemed necessary to insure adequate review of the allegation and/or recommended remediation plan. The student and the chairman involved in the allegation may be present and hear all witnesses. Confidentiality is expected from all Panel members and others involved. At the time the Panel is convened for this purpose, a reasonable deadline by which the Panel's work must be completed will be established by the Dean, recognizing the overall 15-day deadline. At the completion of its review, a written report of the Committee's process of review, findings, and its recommendations shall be forwarded to the Dean of the CHP, thereby completing the work of the Panel. Following the review of the findings and recommendations of the Professional Conduct Advisory Panel, the Dean of the CHP shall make the final decision.

Appeal Process for Staff

If the employee disagrees with the allegation and/or remediation plan proposed by his/her supervisor, the employee may submit a grievance in accordance with the general grievance procedure for non-academic employees of UAMS (See attached Grievance Procedure from the UAMS Staff Handbook). The employee will grieve the decision to the next level above his/her supervisor.

Appeal Process for Faculty

If a faculty member disagrees with the allegation and/or the remediation plan proposed by his/her supervisor, the faculty member may grieve to the Dean by following the procedures outlined in Section G-3 of the 1996 UAMS Faculty Handbook (See attached Academic Employee Grievance Procedure from the UAMS Faculty Handbook).

4.6.5 Immediate Responses

If the observer believes that an individual has committed a serious breach of professional conduct that may place another individual, the College, or a clinical site in jeopardy, he or she will refer the matter directly to the Associate Dean for Academic and Student Affairs or the Associate Dean for Administrative Affairs who will take appropriate action as defined under the Policy On Administrative Actions (See the CHP Handbook).

This policy is partially based upon the "Policy on Professionalism and Professional Conduct" of the Skaggs School of Pharmacy of the University of Montana.

¹The Human Resources Employee Relations Basic Code of Conduct may be found at: http://uams.edu/AdminGuide/WIN04401.html.

4.7 CHP ACADEMIC INTEGRITY

4.7.1 Prologue

Faculty of the CHP believe that both students and teachers have significant roles within the educational process. Acts of academic misconduct can influence this educational process by causing a distorted picture of the academic achievement of individual students and jeopardizing the success of the student's total educational program. Although monitoring of academic conduct is primarily the responsibility of faculty, students ultimately have the responsibility and are expected to act in an honest and responsible manner during the educational preparation for their professional role.

Upon graduation, allied health professionals are expected to practice their profession with a commitment to high standards and integrity. Moreover, they are expected to protect patients from those who abuse professional ethics in providing care. This commitment to high standards and integrity is also expected during each student's course of academic study.

To promote high standards and ethical conduct of students enrolled in the CHP, the following statements of policies and procedures regarding academic misconduct have been developed by the faculty in collaboration with the Student Council. The responsibilities of both students and faculty in relation to acts of academic misconduct are outlined.

In the event a student is involved in a violation of the CHP academic integrity policy, sanction(s) for academic misconduct may include, but are not limited to, a failing grade in the test/assignment, failing grade for the course, or suspension or dismissal from the CHP.

4.7.2 Definition of Academic Misconduct

Academic misconduct is considered to be an act contrary to academic and/or professional ethics. Examples of academic misconduct include, but are not limited to:

- 1. Copying from another student's test paper, reports or computer files and listings;
- 2. Using materials and/or devices during an examination which have not been authorized by the person in charge of the examination;
- 3. Giving or receiving assistance on examinations. This not only includes providing specific answers to subsequent examinees, but also involves providing or receiving information which would allow the student to have an unfair advantage in the examination over those students who did not possess such information;
- 4. Exchanging places with another person for the purpose of taking an examination or completing other assignments;
- 5. Using, buying, selling, stealing, transporting or soliciting in its entirety or in part, the contents of an examination or other assignment not authorized for release;
- 6. Falsifying clinical logs, records, or reports (oral or written);
- 7. Plagiarism, *i.e.*, presenting work that has been done by others as one's own. Plagiarism is characterized by failure to acknowledge the source of the work and includes the unreferenced use of ideas and words which belong to others or distribution of copyrighted material from texts, Internet websites, or other printed or electronic material. It also includes the unacknowledged use of another's created products such as computer programs, clinical material, audio and video tapes, graphs, charts, tables, artwork, and photographs;
- 8. Stealing equipment, library books or professional journals;
- 9. Violating patient confidentiality;
- 10. Misrepresenting facts to cover up mistakes or omissions in clinical or academic settings;
- 11. Deliberately performing at less than maximum ability, or asking another student to do so, to alter the grading scale.

4.7.3 Resolution of Alleged Incidents of Academic Misconduct

Within the process to resolve allegations of academic misconduct, the time requirements specified include only those week days (not including holidays) when classes are in session. If an allegation against a student arises or is in process at the end of the semester, the student would be allowed to register and progress into the following semester pending the resolution of the alleged act of academic misconduct.

Similarly, if a student is accused of academic misconduct at or near graduation, and sufficient time to complete the resolution process is not available prior to graduation, the student would be allowed to participate in the graduation exercises; however a degree and/or transcript would not be released until the allegation has been resolved.

To insure fair and consistent resolution of alleged incidents of academic misconduct, the following process is to be utilized. The process should be carried out confidentially and expeditiously.

1. If a student has reason to believe that another student has engaged in an act of academic misconduct, the student who observed the act is responsible for confronting the suspected student and informing him/her of the act he/she is believed to have committed. If the student suspected of an act of academic misconduct provides the accuser with a satisfactory explanation, convincing him/her that the questioned behavior was not academic misconduct, then the incident is considered to be resolved.

If the incident is not resolved at this stage, it is the responsibility of the student who observed the act of academic misconduct to inform (in writing), the accused student and the appropriate faculty member (usually the course instructor) of the alleged act of academic misconduct. If the faculty member notified is outside of the course in which the alleged act occurred, the student who reported the act will be directed to notify the principal instructor of the course in which the incident occurred. If identification of a specific course is not clear, the student shall notify the Chairman of the Department.

- 2. If a student has reason to believe that another student has engaged in an act of academic misconduct and chooses not to confront the suspected student, the student who observed the act is responsible for approaching the appropriate faculty member (usually the course instructor) who will deal with the matter in accordance with item 3 below.
- 3. If a faculty member, through his/her own observation or information, has reason to believe that a student has engaged in an act of academic misconduct, the faculty member is responsible for confronting the suspected student and informing him/her of the act he/she is believed to have committed. If the student suspected of academic misconduct provides the faculty member with a satisfactory explanation for the questioned behavior, the incident is considered to be resolved.
 - If the explanation of the questioned behavior is not satisfactory, the faculty member is responsible for assembling pertinent data and immediately discussing the alleged incident with the course instructor (if the faculty member is not himself/herself the course instructor) and Department Chairman. Such discussion should include possible sanctions to be imposed if the alleged act of misconduct did occur. If the evidence is not considered sufficient to pursue the allegation, the incident is considered to be resolved.
- 4. If a course instructor, through evidence from other sources, has reason to believe that a student has engaged in academic misconduct, he/she is responsible for assembling pertinent data and immediately discussing the alleged incident with the Department Chairman to determine whether the evidence is sufficient to confront the accused student. If the evidence is not sufficient to pursue, the incident is considered to be resolved.
 - If the evidence is considered sufficient to pursue the matter, the student will be confronted by the faculty member, who will inform him/her of the allegation made from another source. If the student who is suspected of academic misconduct provides a satisfactory explanation for the questioned behavior, the incident is considered resolved. If the explanation of the questioned behavior is not satisfactory and/or if there is a need for further administrative consideration of the student's explanation, the faculty member is responsible for assembling the data and again discussing it with the Department Chairman. Such discussions should include possible sanctions to be imposed if the alleged act of academic misconduct did occur. If the evidence is not sufficient to pursue the allegation, the incident is considered to be resolved.
- 5. If the evidence in Steps 2, 3 or 4 is sufficient to support further pursuit of the alleged academic misconduct, the course instructor will then meet with the student as soon as possible, but no longer than fifteen (15) week days after discovery or report of the alleged act of misconduct. The student will be given at least five (5) week days notice of the meeting. The notice will be in writing, and mailed to the student's address of record with a copy sent to the Department Chairman. The notice will contain the time, place and nature of the meeting, and a brief description of the incident involved. The notice will also inform the student of his/her right to present witness on his/her behalf. The accused student should notify the faculty member about

his/her intention to present such witness at least two days prior to the meeting. The faculty member may have the Department Chairman or another faculty member present to validate the proceedings in the meeting with the student.

At the conference with the student, the faculty member will:

- a. Present the accusation;
- b. Hear the explanation (admission or denial) of the alleged act of academic misconduct by the accused student;
- c. Discuss the seriousness of the alleged act of academic misconduct, the implications, and the process for resolution of the allegation;
- d. Inform the student of the probable sanction(s), previously determined by the faculty member and Department Chairman, for the alleged academic misconduct.

NOTE: At this point in the process, the steps to be followed for the various student responses to the alleged academic misconduct are as follows:

If the student admits the allegation and agrees with the recommended sanction(s):

- 6. If the student admits to the allegation, the faculty member will inform the student of the sanction(s) that will be recommended to the Department Chairman of the program in which the student is enrolled.
- 7. Following the conference between the faculty member and student, the Department Chairman will make a decision on the recommended sanction(s) e.g., to impose or modify the sanction(s).
- 8. This decision will be communicated to the student and will be documented in a full written report of the incident, with signature of the Department Chairman, faculty member, and student, to acknowledge that all have read the report. This report is placed in the student's departmental and college files and remains until the student has graduated.
- 9. If the student agrees with the decision on the sanction(s), the report will be forwarded to the Dean. The Dean may approve or reduce the sanction(s) recommended in the report but shall not increase the sanction(s). The Dean's decision must be communicated to the student and faculty member within five (5) week days after receiving the report, at which time the sanction(s) for the admitted misconduct is imposed.

If the student admits the allegation and disagrees with the recommended sanction(s):

10. If the student disagrees with the decision on the sanction(s) made by the Department Chairman, the student may appeal the decision in writing to the Dean, CHP, within five (5) week days after being informed of the decision by the Chairman. The Dean's decision on the appeal will be based on the student's written reasons for disagreement and other pertinent evidence, as well as the written report in Step 8. The Dean, in ruling on the appeal, may enlist the aid of the Academic Integrity Advisory Panel. The Dean's decision is final and must be communicated to the student within fifteen (15) week days from the date the appeal was received by the Dean. If the Dean's decision is to impose a sanction(s), it is imposed at the time of notification.

If the student denies the allegation:

11. If the student denies the allegation at the time of the initial conference with the faculty member, (as described in Step 5), the faculty member and the student each prepare a written report to be forwarded to the Department Chairman. The reports shall include a description of the alleged incident of academic misconduct, the process used to address the allegation, and the outcome of the conference. The student's written report should include a clear statement of his/her rebuttal to the allegation. These written reports are to be submitted to the Department Chairman within five (5) week days following the conference between the faculty member and accused student.

- 12. Within five (5) week days following receipt of the latter of the two reports, the Department Chairman will meet with the faculty member and accused student. The alleged act of academic misconduct will be described by the faculty member. The student will present his/her response to the allegation.
- 13. Based on the data presented and interviews with selected witnesses or other individuals, the Department Chairman will determine whether or not the evidence supports the allegation against the student.
 - a. If the Chairman's decision is that there is not sufficient evidence of academic misconduct, the process is terminated with a complete written summary forwarded to the Dean, CHP. Prior to forwarding the summary, the Department Chairman, faculty member, and student will sign the summary report to indicate that it has been reviewed by each of them.
 - b. If the decision is that the evidence supports the allegation of academic misconduct, the recommended sanction(s) is delineated by the Chairman and a written report is prepared. The report is signed by the Department Chairman, faculty member, and student to indicate that all have read the report and it is forwarded to the Dean.

If the student agrees with the decision on the denied allegation:

14. The Dean has the authority to approve or reduce the sanction(s) recommended in the report, but may not increase the sanction(s). The Dean's decision must be communicated to the student, Department Chairman, and faculty member within five (5) week days of receiving the report, at which time the sanction(s) is imposed.

If the student disagrees with the decision on the denied allegation:

15. If the student disagrees with the decision or the recommended sanction(s) made by the Department Chairman, the student may appeal the decision in writing to the Dean within five (5) week days after being informed of the decision. The Dean's decision will be based on the student's written reasons for disagreement and any other available relevant evidence, as well as the written report described in Step 13. The Dean, in ruling on the appeal, may enlist the aid of the Academic Integrity Advisory Panel. The Dean's decision is final and must be communicated to the student within fifteen (15) week days from the date the appeal was received by the Dean. Following this notification, the applicable sanction(s) is imposed.

4.7.4 Academic Integrity Advisory Panel

Within the procedure for handling alleged incidents of academic misconduct, the Dean, CHP, has the prerogative of establishing a Panel, as the need arises, to consider the issues related to alleged incidents of academic misconduct and/or the proposed sanctions, as described in Steps 10 and 15 of the previously described procedure.

- 1. **Purposes:** The purpose of the Academic Integrity Advisory Panel is to insure full investigation of incidents of alleged academic misconduct and/or the sanction(s) of academic misconduct when use of the informal process, described previously, has not resolved an issue to the student's satisfaction. The panel shall be advisory to the Dean, and its recommendations shall not be binding upon him/her.
- 2. **Composition:** The composition of the Academic Integrity Advisory Panel shall be:
 - a. A Chairman appointed by the Dean.
 - b. Two faculty members selected by the Dean. One faculty member shall be from the department in which the accused student is enrolled, but he/she shall not be involved in the allegation. The other faculty member shall be from another department of the CHP. If it is not possible to identify a faculty member in the student's department who is not involved in the allegation, both faculty members shall be appointed from other departments.

- c. Two students selected by the Dean. The students shall be in good standing. One student shall be selected from the department, in which the accused student is enrolled, but not from the same class as the accused student. The second student shall be from another department in the CHP. In the event the department has only one class, both students will be selected from other departments.
- 3. **Duties of the Academic Integrity Advisory Panel:** The primary duty of the Academic Integrity Advisory Panel shall be to review as rapidly and discreetly as possible, all information provided about the alleged incident of academic misconduct and to seek other facts deemed necessary to insure adequate review of the allegation and/or recommendations for sanction(s). The student and the faculty member involved in the allegation may be present and hear all witnesses. Confidentiality is expected from all Panel members and others involved.

At the time the Panel is convened for this purpose, a reasonable deadline by which the Panel's work must be completed will be established by the Dean, recognizing the overall 15-day deadline. At the completion of its review, a written report of the Committee's process of review, findings, and its recommendations shall be forwarded to the Dean of the CHP, thereby completing the work of the Panel.

Following the review of the findings and recommendations of the Academic Integrity Advisory Panel, the Dean of the CHP shall make the final decision.

4.8 CHP GRIEVANCE PROCEDURES

A grievance based upon a complaint of discrimination should follow the UAMS Grievance Procedure found on page 46 of this Handbook.

4.8.1 Prologue

The Student Grievance Procedure represents a formal mechanism whereby any student may obtain a review of a complaint of unfair treatment. The grievance procedure shall not be used to question a rule, procedure or policy established by an authorized faculty or administrative body. Rather it shall be used for a hearing and due process for those who believe that a rule, procedure or policy has been applied in an unfair or inequitable manner, or that there has been unfair or improper treatment by a person or persons.

4.8.2 Informal Procedure

In the academic community, the responsibility for course development, course delivery, and the assessment of student achievement rests primarily with each course instructor. Any student who has a complaint of unfair treatment related to a course should first seek to resolve it informally with the course instructor. A student with such a complaint must request reconsideration of the application of a rule, procedure, or policy or unfair or improper treatment within five (5) working days following the incident which forms the basis for the complaint (e.g., five days after grades are posted). The instructor will meet with the student (or speak with the student via telephone or interactive video, for those students located more than 50 miles from the location of the instructor's office if so requested by the student) within three (3) working days of receiving the student's request for reconsideration and will notify the student of his/her decision regarding the complaint within two (2) working days following the meeting or discussion. If resolution is not achieved at this level, the student should seek resolution with the chairman of the department in which the course is offered within five (5) working days following notification by the instructor that the complaint cannot be resolved. If the course instructor is the Department Chairman, the student should seek resolution with him/her at the outset. The chairman will meet with the student (or speak with the student via telephone or interactive video, for those students located more than 50 miles from the location of the chairman's office if so requested by the student) within three (3) working days of receiving the student's request for resolution and will notify the student of his/her decision regarding the complaint within two (2) working days following the meeting of discussion. If, after the informal attempt to resolve the complaint, the chairman concludes that the complaint cannot be resolved, the student will be so

notified by the chairman within five (5) working days of receiving the request for resolution from the student. Accordingly, if the student concludes after the informal attempt that the complaint cannot be resolved, the student will so notify the chairman. In either case, then and only then should the formal grievance procedure be initiated by the student. For issues or complaints that are not course-specific, the student should seek resolution with his/her Department Chairman first, before considering initiating the grievance procedure.

4.8.3 Formal Procedure

A student with a grievance (the grievant) must submit a written statement to the Dean of the College of Health Professions or his/her designee outlining specifics within five (5) working days following notification of the failure to resolve the complaint using the Informal Procedure described under section 4.8.2 above. The student may request that the Dean convene a Grievance Panel for the purpose of conducting a hearing to determine the facts; the panel may then recommend a resolution to the Dean (or his/her designee). In the absence of such a request from the grievant, the Dean (or his/her designee) may choose to convene a Grievance Panel, or the Dean (or his/her designee) may render a decision without participation by a Grievance Panel.

In the College of Health Professions, the Grievance Panel shall be selected as follows: A Grievance Committee consisting of 10 faculty and 10 students, will be appointed annually by the Dean. For every hearing held under this procedure, the grievant and the appropriate Associate Dean or designee jointly will meet within eight (8) working days after the decision to refer the grievance to the Grievance Panel and review the members of the Grievance Committee, removing from consideration any member who may with reason be considered inappropriate for the hearing (e.g., a faculty member directly involved in the issue being grieved should not sit on the Panel for that grievance). The names of the remaining members will then be written on tabs of paper which will be folded and placed into separate containers for faculty and students and randomized by mixing. The grievant will draw three names from each container. The first six names will constitute the Grievance Panel, which shall be composed of three faculty and three students. The remaining names shall be drawn alternatively from each container until all names are drawn in order to develop a list of alternate members. Should a Panel member be removed for any reason during the process, that member shall be replaced by an alternate having the same status (faculty or student).

The Dean will schedule the hearing to take place no sooner than three (3) working days and not later than ten (10) working days after the Panel is notified, unless there is a specific reason why another time must be selected (e.g., availability of participants).

Students who have begun the grievance procedure may request permission to progress to the next semester or participate in Commencement if the decision of the Department Chairman during the informal phase would preclude progression to the next semester or participation in Commencement at the end of the current semester, and if the resolution of the grievance could reasonably extend past the respective dates for these activities. If resolution of the grievance procedure results in suspension or dismissal, the student will not be allowed to continue to attend classes nor will the student graduate from his/her program, regardless of participation in Commencement activities.

1. The Pre-Hearing

At a prearranged time prior to the hearing, the members of the Panel, the grievant, and faculty members directly named in the grievance will meet briefly with the Dean, or his/her designee, to be given the charge (i.e., to determine whether the grievant has been treated fairly and equitably), plus all relevant background data. The grievant and faculty members named in the grievance should identify documents which they intend to submit to the hearing as well as a list of witnesses whom they believe have information relevant to the grievance. The Panel may restrict the number of documents and witnesses if it considers their proposed testimony to be cumulative, repetitive or not relevant to the grievance. The grievant may have one (1) person from the UAMS campus community (i.e., faculty, student, or staff) present during the pre-hearing to advise him/her. This person may not address the Panel, speak on behalf of the grievant, or otherwise actively participate in the pre-hearing. Faculty members named in the grievance may

be present during the pre-hearing but may not speak. The Panel will then meet in closed session to elect a chairman who will preside at the subsequent hearing. The Panel may require copies of relevant documents be presented prior to the hearing as well as any written statements by the grievant or the faculty members named in the grievance in support or defense of the grievance.

2. The Hearing

The hearing will be conducted in private. Witnesses will be admitted for testimony only and then asked to leave. The testimony will be recorded, but deliberations of the Panel will not be recorded. The grievant may have one (1) person from the UAMS campus community (i.e., faculty, student, or staff) present during the hearing to advise him/her. This person may not address the Panel, speak on behalf of the grievant, question witnesses, or otherwise actively participate in the hearing. The grievant must appear in person, make an oral statement of the grievance and answer questions from the faculty directly named in the grievance and from members of the Panel. The grievant may submit sworn written statements, other exhibits, and witnesses in his/her behalf. The grievant, Panel, and faculty directly named in the grievance may hear and question all witnesses testifying before the Panel. The faculty directly named in the grievance must appear in person, make an oral statement in response to the grievance, and answer questions from the grievant and from members of the Panel. The faculty directly named in the grievance may submit sworn written statements and other exhibits and witnesses. The Panel shall make its determination of whether the grievant was treated fairly or unfairly based upon the evidence presented at the hearing which is relevant to the issue or issues before the Panel. The grievant, the grievant's advisor, witnesses, and faculty directly named in the grievance may not be present during the Panel's deliberations. The determination will be presented by the Grievance Panel to the Dean, or his/her designee, in writing by the end of the third working day following the conclusion of the deliberations. The Panel may make recommendations for resolution of the dispute. The grievant and faculty directly named in the grievance shall be notified in writing by the Dean or his/her designee of the Panel's determination within three (3) working days following his/her receipt of the Panel's determination. The notification may be hand-delivered to the grievant and faculty directly named in the grievance or sent by registered mail with return receipt (and with a copy by regular mail) to their last known addresses. In the event a registered letter is returned undelivered after a notice has been left for the addressee, it shall be presumed that the copy sent by regular mail was received three (3) days following the date of mailing unless it is returned undelivered. Within seven (7) working days of the receipt of the Dean's or his/her designee's notification to the grievant or the faculty directly named in the grievance of the Panel's determination, either party by a request for reconsideration may contest in writing to the Dean or his/her designee that a substantial mistake of fact occurred, a fundamental misinterpretation of official policies is evident, or a significant procedural defect took place. These are the only bases for contesting the determination of the Panel. After receipt of a determination from the Panel, and if the seven day period has elapsed without the filing of a request for reconsideration, the determination of the Panel shall be a recommendation which the Dean or his/her designee may accept or reject, in whole or in part.

If the determination of the Panel is contested by a grievant or by the faculty directly named in the grievance, the Panel will reconvene within ten (10) working days of the Dean's or his/her designee's receipt of the request for reconsideration to review the bases of the contest. If the Panel concurs with the contestant, it will correct the procedural defect, reinterpret the policy as appropriate, or review the factual error, and then review its determination and revise it if the Panel deems appropriate. The Panel will present its determination in writing to the Dean or his/her designee within three (3) working days following the conclusion of its deliberations. A second determination from the panel, if submitted to the Dean or his/her designee by the Panel subsequent to a second hearing resulting from a request for reconsideration, shall be a recommendation which the Dean or his/her designee may accept or reject, in whole or in part. The decision of the Dean or his/her designee shall be sent in writing to the grievant and faculty directly named in the grievance within five (5) working days thereafter. The notification may be

hand-delivered to the grievant and faculty directly named in the grievance or sent by registered mail with return receipt (and a copy by regular mail) to their last known addresses. The decision of the Dean or his/her designee shall be final.

4.9 UAMS GRIEVANCE POLICY RELATED TO DISCRIMINATION COMPLAINTS

4.9.1 Purpose and Scope

- A. Policy Statement: UAMS prohibits discrimination on the basis of race, color, national origin, disability, sex, or age.
- B. Purpose: The purpose of this procedure is to provide the process for addressing student grievances alleging discrimination based on race, color, national origin, disability, sex, or age.

4.9.2 Definitions

- A. Grievance: Grievance means a complaint of a student alleging any policy, procedure, or practice prohibited by Title VI of the Civil Rights Act of 1964 (Title VI), Title IX of the Education Amendments of 1972 (Title IX), the Age Discrimination Act of 1975, Section 504 of the Rehabilitation Act of 1973 (Section 504), and Title II of the Americans with Disabilities Act of 1990 (Title II), and their implementing regulations.
- B. Procedure: The steps set out in this procedure shall constitute the grievance procedure for discrimination complaints brought by students based on race, color, national origin, disability, sex, or age.
- C. Grievant: Grievant means a student who submits a grievance alleging violation of Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, the Age Discrimination Act of 1975, Section 504 of the Rehabilitation Act of 1973, and Title II of the Americans with Disabilities Act of 1990, and their implementing regulations.
- D. UAMS: UAMS means any college, department, subunit, or program operated by the University of Arkansas for Medical Sciences. When used in this Agreement, the term "college" shall be deemed to include the Graduate School.
- E. Coordinator: The person serving as the designated Title IX and/or Section 504/Title II Coordinator.
- F. Respondent: Respondent means a person alleged to be responsible for the violation alleged in a grievance. The term may be used to designate persons with direct responsibility for a particular action or those persons with supervisory responsibility for procedures and policies in those areas covered in the grievance.
- G. Associate Dean Responsible for Student and Academic Affairs: Refers to the Associate Dean in the college where the grievant is enrolled as a student. Since there is no Associate Dean for the Graduate School, reference to Associate Dean shall be deemed to include the Assistant Dean for Graduate Studies and Institutional Reporting, where applicable.
- H. Dean: Refers to the Dean of the college where the grievant is enrolled as a student.

4.9.3 Filing of Grievance

- A. Eligibility for Filing: Any UAMS student may file a grievance alleging discrimination on the basis of race, color, national origin, disability, sex, or age.
- B. Pre-Grievance Meeting: Prior to the filing of a written grievance, the grievant(s) should first consult with the appropriate Associate Dean responsible for student and academic affairs, who shall attempt to resolve the grievance informally by agreement between the grievant and the respondent alleged to be directly responsible for the possible violation, and/or persons with immediate supervisory authority related to the grievance.

If the matter cannot be resolved at this level, a written grievance should be submitted to the appropriate Associate Dean responsible for student and academic affairs for subsequent processing in accordance with the procedures for formal grievances outlined below.

- C. Filing a Grievance: Grievances filed with the appropriate Associate Dean shall be in writing and shall provide the following information:
 - 1. Name and address of the grievant(s).
 - 2. Nature, date and description of alleged violation.
 - 3. Name(s) of persons responsible for the alleged violation
 - 4. Requested relief for corrective action.
 - 5. Any background information that the grievant believes to be relevant.
- D. Time Limit for Grievance Filing: A grievance must be filed within twenty (20) calendar days of the occurrence of the alleged violation or within twenty (20) calendar days of the date the grievant became aware of the alleged violation. If the last day for filing a grievance falls on a Saturday, Sunday, or a day on which the University is closed for business, then the grievance may be filed on the first day following the Saturday, Sunday, or date when the University is closed.
- E. Notification of Respondent(s): Immediately upon receipt of a formal grievance, the appropriate Associate Dean will give the respondent a copy of the grievance, and will direct the respondent to submit a written response to the charges within ten (10) calendar days. If the last day for filing a response falls on a Saturday, Sunday, or a day on which the University is closed for business, then the response may be filed on the first day following the Saturday, Sunday, or date when the University is closed. The respondent will be specifically warned not to retaliate against the grievant in any way. Retaliation will subject the respondent to appropriate disciplinary action.
- F. Response: The response should include any denial, in whole or in part, of the charges. Failure to respond may subject the respondent to disciplinary action by the Dean of the appropriate college or other appropriate UAMS official.
- G. Notification of Appropriate Administrative Officers: The appropriate Associate Dean will notify the appropriate administrative officers to whom the respondent reports of the existence of the complaint. However, all administrative officers will attempt to maintain the confidentiality of the information during the grievance process.
- H. Role of the Associate Dean Responsible for Student and Academic Affairs in Discrimination Grievances Filed by Students: The appropriate Associate Dean responsible for student and academic affairs must conduct a preliminary investigation of the complaint, and take one of the following steps, within thirty (30) calendar days after its receipt:
 - dismiss the grievance on the grounds that the evidence submitted in support of the complaint
 or developed in the preliminary investigation does not warrant a detailed investigation or a
 formal hearing (for example: grievant failed to articulate the factual basis for his or her belief
 that discrimination occurred; the grievance is so weak, attenuated, or insubstantial that it is
 without merit, or so replete with incoherent statements that the grievance, as a whole, cannot
 be considered to be grounded in fact; the grievance anticipates discrimination that has not
 yet occurred).
 - 2. refer the grievance to a hearing before the Grievance Panel.
 - 3. allow the parties to sign a written statement resolving the grievance. It should be understood that without the approval in writing by the appropriate Associate Dean, any agreement between the parties does not preclude further action by the University against either party.

It is the responsibility of the Associate Dean responsible for student and academic affairs of each College to insure the effective implementation, maintenance, processing, record keeping, and notifications required by the grievance procedures.

If an appeal of a dismissal of a grievance is filed, (see Section 4.9.3.I.), the Associate Dean will forward a copy of the investigative report and determination to the Dean. If the Associate Dean refers a grievance to a hearing before the Grievance Panel, the Associate Dean will forward a copy of the investigative report to the Panel.

- I. Appeal of Grievance Dismissal: A student may appeal the dismissal of his/her grievance by submitting a written request for review with his/her Dean. The request for review must be submitted within five (5) calendar days of receipt of the decision to dismiss. Upon receipt of an appeal of the dismissal of a grievance, the Dean shall carefully consider the relevant information contained in the appeal as well as the investigative report and determination of the Associate Dean, to ascertain that the evidence either submitted in support of the complaint or developed in the preliminary investigation did not warrant a detailed investigation or a formal hearing. The Dean will notify the student of his/her decision in writing within ten (10) calendar days of receipt of the request for review. The decision of the Dean will be final.
- J. Notification of Dean: Upon receipt of a formal grievance from a student, the appropriate Associate Dean shall send a copy of the grievance to the Dean of the appropriate College. The Associate Dean or his/her designated representative shall be notified of any hearing and shall be required to attend all student grievance hearings pertaining to alleged discrimination on the basis of race, color, national origin, disability, sex, or age to serve as a University resource person. This individual shall not have a vote at the hearing, nor be present during deliberations of the Grievance Panel.

4.9.4 Prehearing Procedures

- A. Selection of Grievance Panel: When a grievance is referred to the Grievance Panel, the appropriate Associate Dean shall forward a copy of his/her investigative report to a six member Grievance Panel. The Grievance Panel shall be selected as follows: A Grievance Committee will be appointed by each College Dean, consisting of nine (9) faculty and nine (9) students. For every hearing held under this procedure, the person filing the grievance and the appropriate Associate Dean or designee jointly will meet within ten (10) calendar days after the decision to refer the grievance to the Grievance Panel, and review the members of the Grievance Committee, removing from consideration any member who may with reason be considered inappropriate for the hearing (e.g., a faculty member directly involved in the issue being grieved should not sit on the Panel for that grievance). The names of the remaining members will then be written on tabs of paper, folded, placed into separate containers for faculty and students, and randomized by mixing. The grievant will draw three names from each container. The first six names will constitute the Grievance Panel, which shall be composed of three faculty and three students. The remaining names shall be drawn alternatively from each container until all names are drawn in order to develop a list of alternate members. Should a Panel member be removed for any reason during the process, that member shall be replaced by an alternate having the same status (faculty or student).
- B. Scheduling of Hearing of Grievance: Hearings before the Grievance Panel will be conducted no sooner than ten (10) calendar days and not later than twenty (20) calendar days after the selection of the Grievance Panel. The date of the hearing must be adhered to except for unusual circumstances which must be reported in writing as soon as possible to the appropriate Associate Dean. The hearing shall be conducted in accordance with the procedure set forth in Section 4.9.5, A through G of this procedure.
- C. Representation: The grievant and the respondent have the right to be assisted by no more than two representatives, including attorneys, at any point during the initiation, filing processing, or hearing of the formal grievance; however, no representative may examine witnesses or otherwise actively participate in a hearing. The Panel may also be assisted and advised by an attorney or other representative at its discretion.

D. Evidence: The grievant and respondent shall provide the appropriate Associate Dean with all documents to be used and relied on at the hearing, and with the name, address and telephone number of their representative(s) and witnesses no later than seven (7) calendar days prior to the date of the hearing. There will be a simultaneous exchange of this information between the parties, which will be facilitated by the Associate Dean five (5) calendar days before the date of the hearing.

4.9.5 Hearing Procedures

- A. Record of Hearing: The hearing will be recorded by recording devices supplied by UAMS. These recordings shall be maintained for a period of three years after resolution of the grievance. The grievant or respondent may obtain a copy of the tapes from any recorded hearing, at the requesting party's expense. The deliberations of the Grievance Panel will not be recorded.
- B. Counsel: The grievant and respondent shall have the right to advice of counsel of his/her choice; however, counsel may not examine witnesses or otherwise actively participate in any hearing.
- C. Private Hearing: The hearing shall be conducted in private. Witnesses shall not be present during the testimony of any party or other witness. Witnesses shall be admitted for testimony only and then asked to leave. The parties may hear and question all witnesses testifying before the Grievance Panel.
- D. Presentation of Case: The grievant and respondent shall be afforded reasonable opportunity for oral opening statements and closing arguments and/or presentation of witnesses and pertinent documentary evidence, including sworn, written statements.
- E. Grievance Panel Rights: The Grievance Panel shall have the right to question any and all witnesses, to examine documentary evidence presented, and to summon other witnesses to review other documentation as the Panel deems necessary.
- F. Grievance Panel Deliberation: After the hearing is concluded, the Grievance Panel shall convene to deliberate in closed session and arrive at a majority recommendation.
- G. Transmittal of the Recommendation: Within five (5) calendar days after the hearing is concluded, the Grievance Panel shall transmit a written copy of its recommendation to the appropriate Associate Dean responsible for student and academic affairs, who will then mail, by certified mail, return receipt requested, a copy of the written document to the grievant and respondent at addresses previously provided by the grievant and the respondent.
- H. Appeal of Recommendation of the Grievance Panel: If no appeal is received by the appropriate Associate Dean within seven (7) calendar days of receipt of the recommendation by the grievant and the respondent, any recommendations by the Grievance Panel shall be forwarded to the appropriate Dean for consideration. The Dean may accept the Grievance Panel recommendation, reverse it, or refer the grievance back to the Panel for reconsideration. If the last day for filing an appeal falls on a Saturday, Sunday, or a day on which the University is closed for business, then the appeal may be filed on the first day following the Saturday, Sunday, or date when the University is closed.

If the grievant or respondent wishes to appeal the recommendation of the Grievance Panel, the respondent and/or grievant shall, within seven (7) calendar days of the receipt of the recommendation, appeal the grievance recommendation to the Dean through the Associate Dean. The appeal shall be in writing.

If an appeal is submitted, it will be transmitted to the appropriate Dean. The Dean shall review the appeal and notify the parties of his/her determination within ten (10) calendar days from the date of his/her receipt of the appeal. The decision of the Dean is final and may not be appealed further.

The Dean's review is the final institutional step in matters of discrimination grievances. However, nothing precludes the grievant or respondent from filing a complaint with any external agency that handles discrimination complaints.

4.9.6 Other

- A. Grievances Involving a Grievant and Respondent from Different Units of UAMS: Whenever a grievance is instituted by a student grievant in one college against a respondent in another college or unit, the grievance shall proceed through the Associate Dean, Dean, and Grievance Committee from the college in which the student is enrolled.
- B. Maintenance of Written Grievance Records: Records shall be kept of each grievance process. These records shall be confidential to the extent allowed by law, and shall include, at minimum: the written grievant complaint filed by the grievant, the written response filed by the respondent, the investigative report of the Associate Dean, the recording and documents of the hearing, the written recommendation of the Grievance Panel, the results of any appeal, the decision of the Dean, and any other material designated by the Associate Dean responsible for Student and Academic Affairs. A file of these records shall be maintained in the Office of the Associate Dean responsible for Student and Academic Affairs for each college.
 - For purposes of the dissemination of grievance precedents, separate records may be created and kept which indicate only the subject matter of each grievance, the resolution of each grievance, and the date of the resolution. These records shall not refer to any specific individuals and they may be open to the public in accordance with the Arkansas Freedom of Information Act or pertinent Federal laws.
- C. Retaliation: No person shall be subjected to retaliation for having utilized or having assisted others in the utilization of the grievance process.

4.10 ARRESTS AND CONVICTIONS

Students who are convicted of a felony while enrolled in a CHP program are subject to immediate dismissal. The CHP also reserves the right to suspend or dismiss students who are arrested for a violation of the law, in accordance and with regard for the due process rights of the student as described in this handbook in Section 4.7.

4.11 CHP DISABILITY POLICY

The College of Health Professions (CHP), UAMS, will provide reasonable and appropriate accommodations for students with documented disabilities who demonstrate a need for accommodations in accordance with the Americans with Disabilities Act.

Americans with Disabilities Act (ADA): The Americans with Disabilities Act (ADA) of 1990, defines a person with a disability as someone with a physical or mental impairment that <u>substantially limits</u> one or more major life activities.

Purpose of Special Accommodations: The purpose of special accommodations is to provide equal access to required courses. Accommodations should be consistent with the identified functional limitation(s) such that the identified impairment is alleviated through the use of an auxiliary aid/or an adjustment in a testing procedure, and/or scheduling of practicum assignments. Functional limitations relate to the behavioral manifestations of a disability that impede an individual's capacity to function. In short, functions that an impaired person cannot do on a regular and continuing basis as a result of the documented disability are functional in nature. A functional limitation might be the inability to control fine motor movement such that the individual is unable to fill-in a computer answer sheet. In such a case, the appropriate accommodation might be someone to assist in the recording of answers.

The following guidelines are provided as a means of assisting applicants in the documentation of a need for accommodation based on an impairment that <u>substantially limits</u> one or more of his/her major life activities. Documentation submitted in support of a request for special test accommodations will be reviewed by the Department Chairman and the CHP Associate Dean for Academic and Student Affairs in a fair and impartial manner. Please note that students requesting accommodations must personally initiate a written request for accommodations; requests by a third party (such as an evaluator, physician, etc.,) cannot be honored.

Students seeking special accommodations should make an appointment with their department chairman to discuss the guidelines for submitting their application to the CHP¹.

- 1. **Comprehensive Written Report:** A comprehensive written report describing the disability, its severity, with justification for requested accommodation(s) must be provided.
- 2. **Specific Diagnosis:** In the case of a learning disability, a specific diagnosis of the disability must be provided. It is strongly recommended the diagnostic taxonomies as defined in the current edition of the Diagnostic and Statistical Manual of the American Psychiatric Association (DSM-IV) be used. The specific diagnostic tests used, including date(s) of evaluation, test results, and a detailed interpretation of the test results should be submitted with the application for special accommodations. Specific test scores should be reported to support the diagnosis. The application should also include a relevant educational, developmental, and medical history.
- 3. **Diagnostic Methods vs. Disability:** The diagnostic methods used should be consonant with the described disability and current professional practices within the field. Informal, or non-standardized evaluations, should be described in sufficient detail such that other professionals can understand their role and significance in the diagnostic process.
- 4. **Current Documentation:** Documentation of a disability should be current for provision of reasonable accommodations because the decision is based on the evaluation of the current impact of the student's disability on the proposed activities (examinations, clinical assignments, etc.). Because manifestations of disabilities may vary with time and different settings, it is recommended that evaluations conducted within the past three years be submitted.
- 5. **Applicant's Limitations as a Function of Diagnosis:** Professionals submitting supporting documentation for special test accommodations should describe in detail the student's limitations due to the diagnosed disability and specifically address the effect of the disability on a student's activity as it relates to current physical, perceptual, and cognitive abilities.
- 6. Recommended Accommodations: The professional submitting documentation for students requesting special accommodations should recommend specific accommodations and/or assistive devices for such students. Additionally, and importantly, a detailed explanation of why these accommodations or devices are needed and how they will reduce the impact of the identified functional limitations should be submitted.
- 7. **Professional Credentials of the Evaluator:** The professional credentials of the evaluator that qualify him/her to make the particular diagnosis, including information about licensure or certification and specialization in the area of the diagnosis, must accompany the application. The evaluator should present evidence of comprehensive training and direct experience in the diagnosis and treatment of adults in the specific area of disability.
- 8. **Prior Accommodations:** If no prior accommodations have been provided for the student, the qualified professional expert should include a detailed explanation as to why no accommodations were given in the past and why accommodations are needed now.

¹The information required for the application is tailored to specific diagnoses. That additional information is available in the CHP Dean's Office. Please contact the department chairman or the Associate Dean for Academic and Student Affairs for a copy of the CHP Policy on Request for Special Accommodations.

4.12 UAMS SEXUAL HARASSMENT POLICY

Purpose

The University of Arkansas for Medical Sciences (UAMS) is committed to its mission of providing an academic and employment environment that fosters excellence. Sexual harassment violates the trust and respect essential to the preservation of such an environment, and threatens the education, employment, and well-being of its community members. University members have the right to work and study in an environment free of any form of sexual harassment. This right is protected by Title VII of the 1964 Civil Rights Act for employees and Title IX of the Educational Amendment of 1972 for students. Sexual harassment is destructive to students, faculty, staff, and the UAMS community as a whole, and it will not be tolerated.

This policy may not be used to infringe upon academic freedom. Students, faculty, staff, and guests must be aware of the need for freedom of inquiry and openness of discussion in its educational and research programs, and must strive to create and maintain an atmosphere of intellectual seriousness and mutual tolerance in which these essential features of academic life can thrive. No university can or should guarantee that every idea expressed in its classrooms or laboratories will be inoffensive to all; pursued seriously, education and scholarship necessarily entail raising questions about received opinions and conventional interpretations. If, however, UAMS determines that credible accusations of inappropriate sexual remarks or actions have been made, UAMS shall investigate such accusations promptly, thoroughly, and fairly.

Sexual harassment is particularly serious when it threatens relationships between teacher and student, or supervisor and subordinate, because of the potential to exploit the power inherent in these relationships and to undermine the ability of UAMS to carry out its mission. UAMS strongly encourages all community members to report incidents of sexual harassment. To the extent possible, reporting and investigating procedures are supportive of and sensitive to the alleged victim, while adequately safeguarding the rights of the alleged offender. For more information about the UAMS policy, see the UAMS Administrative Guide, Policy 3.1.05, Sexual Harassment at http://www.uams.edu/AdminGuide/WIN03105.html.

Policy

UAMS opposes all forms of sexual harassment, whether subtle or direct, and is committed to a thorough, timely, and confidential investigation, in a fair and impartial manner, of all complaints from its students or employees. The sexual harassment of UAMS faculty, staff, and students by non-university employees and guests doing business or providing services on campus (for example, contractors, vendors, delivery persons) is also prohibited by this policy. Incidents of sexual harassment involving visitors should be reported directly to the Office of Human Resources. During non-business hours, sexual harassment complaints may be reported to the UAMS Police Department, who will then refer the complaint to the Office of Human Resources for review and action. UAMS will take appropriate actions within the scope of its legal authority to prevent, correct, and discipline behavior that violates this policy.

1. Definition of Sexual Harassment

Sexual harassment generally includes any unwanted or unsolicited sexual gesture, physical contact, or statement which, when viewed from the perspective of a reasonable person similarly situated, is offensive, threatening, humiliating, or interferes with a person's ability to perform his or her job, educational pursuit, or participation in campus life.

2. Prohibited Acts

For the purpose of this policy, sexual harassment may take many forms — subtle or indirect, or blatant and overt. It may consist of repeated actions or may even arise from a single incident if sufficiently extreme. In assessing whether a particular act or acts constitute sexual harassment under this policy, the standard shall be the perspective of a reasonable person similarly situated.

Sexual harassment includes any behavior of a sexual nature where:

- Submission to or rejection of the conduct is made either explicitly or implicitly a term or condition of employment or status in a UAMS-sponsored course, program, or activity;
- Submission to or rejection of the conduct is used as a basis for employment or academic decisions affecting that individual; or
- Such conduct unreasonably interferes with an individual's work or academic performance, or creates an intimidating, hostile, or offensive environment for work or learning.

Sexual harassment may occur within a variety of relationships. It may occur between individuals of the opposite sex – male against female, or female against male – or, between individuals of the same sex. Incidents may occur between supervisor and subordinate, faculty member and student, or between fellow employees and fellow students; they may also take place between employees and campus visitors and

between employees and those who do business with UAMS. Especially injurious, however, is harassment in relationships characterized by an imbalance of power and authority. Typically, such relationships are found between:

- a. administrator and student or medical resident
- b. employee and student or medical resident
- c. graduate assistant and student
- d. faculty and student.

3. Anonymous Complaints

All members of the UAMS community may contact the Office of Human Resources at any time to ask questions about sexual harassment or complaint procedures without disclosing their names and without filing a complaint. However, because of the inherent difficulty in investigating and resolving allegations from unknown persons, individuals are discouraged from making anonymous complaints of sexual harassment. Although anonymous complaints are discouraged, UAMS will respond reasonably to all allegations of sexual harassment.

4. Consensual Relationships

The basic function of a university is the discovery and the transmission of knowledge, which is founded upon the free and open exchange of ideas. In order for productive learning and the work that supports it to occur, members of the campus community (faculty, staff, and students) should pursue their responsibilities guided by a strong commitment to principles of mutual trust, confidence, and professional codes of conduct.

Consenting romantic relationships between faculty members and students, supervisors and subordinates or fellow employees are **strongly discouraged**.

5. Disciplinary Actions for Violations of the Sexual Harassment Policy

Disciplinary actions for violations of the Sexual Harassment Policy may include, but are not limited to, the following: oral or written warning, reassignment, counseling, demotion, termination, or any combination thereof. Sanctions for sexual harassment depend upon the circumstances in each case.

In addition to disciplinary action, those who engage in sexual harassment may be subject to legal consequences, including civil and criminal penalties and monetary damages.

All individuals accused of sexual harassment shall be given the opportunity to respond to the complaints prior to any final employment and academic decisions.

6. Confidentiality

UAMS understands that some individuals may be reluctant to tell anyone about harassment or to have their names disclosed. Every reasonable effort will be made to maintain confidentiality of all parties, all conversations, and all documents concerning a sexual harassment complaint. However, UAMS's obligation to stop sexual harassment means that it cannot fail to take appropriate action and, as such, confidentiality cannot always be guaranteed. The appropriate administrative officials will be kept informed on a "need to know" basis. All persons involved should maintain confidentiality to the greatest extent possible, except to the extent needed for processing complaints under this Policy.

7. Retaliation

Reprisals or retaliatory action against an individual who, in good faith, reports or provides information in an investigation about behavior that may violate this policy will not be tolerated. Such action should be regarded as a separate and distinct cause for disciplinary action.

8. Malicious Allegations/Complaints; False Information

UAMS is committed to protecting the due process rights it provides to the accused as well as the accuser. Allegations of sexual harassment that are malicious, intentionally false, or without foundation are very serious with potential for great harm to all persons involved and are prohibited by this policy. Such actions constitute grounds for disciplinary action that may include, but is not limited to, written warning, demotion, transfer, or dismissal. Further, repeated filing of frivolous complaints is considered a malicious action and may be grounds for disciplinary action.

The failure to substantiate a sexual harassment complaint does not automatically constitute a malicious or frivolous complaint. In the event that allegations are not substantiated, every reasonable effort will be made and all reasonable steps taken to restore the reputation of the accused if it was damaged by the proceedings.

Procedure

Complaints of sexual harassment, submitted in writing or accepted orally, are taken seriously and will be dealt with promptly. Allegations of sexual harassment shall be judged on the facts of the particular case and the context in which the alleged incident(s) occurred. The complainant has the responsibility of providing evidence to substantiate the alleged sexual harassment. The specific action taken in any particular case depends on the nature and gravity of the conduct reported and may include intervention, mediation, investigation and the initiation of disciplinary action as described above. Where a violation of the Sexual Harassment policy is found to have occurred, UAMS will act to stop the harassment, prevent its recurrence, and discipline those responsible.

UAMS recommends that all reports of suspected sexual harassment be made within 180 days of the alleged incident to assist in the investigation process.

1. Reporting Procedures - Students:

- a. Students should report incidents of sexual harassment to their college's Office of Student Affairs. A designated individual in each college's Office of Student Affairs will receive all complaints from students. If assistance is needed, please contact the Employee Relations Manager in the Office of Human Resources at (501) 686-5650.
- b. Students who need to report an incident of sexual harassment after regular business hours should report the incident to the UAMS Police department if no one from the appropriate Student Affairs Office is available. The UAMS Police Department will take appropriate action and will notify the Office of Human Resources at the beginning of the next business day, i. e., Monday through Friday, excluding holidays. Students who witness possible sexual harassment should report their concerns to the designated student affairs official in their college.

2. Informal Complaint Process

- a. In the event that a student believes that sexual harassment has been or is occurring, he or she is encouraged, but not required, to communicate clearly, preferably in writing, to the alleged harasser and state the conduct is not acceptable. The student is also encouraged to maintain careful written records of the harassment and to continue to maintain current records throughout the process.
- b. The student should consider meeting with the appropriate student affairs official in his or her college to discuss the sexual harassment allegation. If the student cannot decide whether to initiate a formal complaint or is reluctant to discuss the matter with the alleged harasser, he or she may seek the advice of the Employee Relations Manager who, with the individual's permission, may seek to resolve the issue informally through discussions with the individual, the accused, and the accused's supervisor.

If the student does not wish to prepare a signed, written complaint, written documentation shall be prepared by the Employee Relations Manager of the Office of Human Resources or a college's designated individual within the Office of Student Affairs. Such written documentation shall include the nature of the complaint, the date(s) on which the alleged incident(s) occurred, and any witness(es) to the incident(s). The student shall be asked to read the written documentation prepared by the appropriate representative to acknowledge its accuracy; a written acknowledgment will be prepared and may be

made in a separate document. If the student refuses to sign the written documentation, the Employee Relations Manager or college's designee shall note such on the documentation and forward it to the Office of Human Resources for determination of whether the complaint will be investigated despite the student's refusal to acknowledge the written documentation.

Written documentation shall be prepared before any informal discussions are held with the accused and the accused's supervisor. The accused shall be given an opportunity to read the written documentation that may be edited to protect the anonymity of the complaining individual and any other collateral witnesses to the process.

- c. If the parties are unable to reach a mutually satisfactory agreement after an informal discussion, the option of filing a formal complaint is available.
- d. The Informal Complaint Process may also include referral of either or both parties to confidential counseling through UAMS' Employee Assistance Program (EAP).
- e. The complainant, the Office of Human Resources, or a college's Office of Student Affairs may elect to refer the complaint to the Formal Complaint Process at any time as deemed necessary to resolve the complaint in an appropriate and timely manner.

3. Formal Complaint Process

- a. When the Informal Complaint Process fails to resolve the complaint, or in instances where the college's Office of Student Affairs determines the nature of the allegations requires formal investigation, the Formal Complaint Process will be used. The Employee Relations Manager in the Office of Human Resources may assist the complainant in preparing his or her complaint, in writing, as necessary.
- b. If a student wishes to file a formal complaint, he or she must submit a signed, written statement alleging harassment to the Employee Relations Manager of the Office of Human Resources. Documentation should include the name of the complainant, the name of the accused, the nature of the complaint, date(s), witness(es), and any other information relevant to the complaint. If some of this information is not available, the reason(s) of unavailability, if known, should be documented.

Upon receipt of the written complaint, the Employee Relations Manager will notify the Assistant Vice Chancellor of Human Resources, who will appoint two investigators to investigate the facts of the complaint.

The Employee Relations Manager will meet with the accused and present him or her with a copy of the complaint and a copy of the sexual harassment policy. The accused will be given an opportunity to respond to the complaint orally and in writing, and may provide evidence and witnesses. The Employee Relations Manager will also explain that there is to be no contact with or retaliation against the complainant.

The investigators will gather relevant evidence by interviewing the complainant, the victim (if different from the complainant), the accused, and any witnesses or other individuals deemed appropriate to conduct a thorough investigation.

Every effort will be made to ensure a thorough and timely investigation of the complaint.

- c. Following completion of the investigation, the investigators will present their written findings to the Assistant Vice Chancellor of Human Resources. The Assistant Vice Chancellor of Human Resources will consult with the student's appropriate student affairs official regarding the written findings for purposes of resolving the complaint. It is the responsibility of the student affairs official to take action consistent with the written findings. Once a final determination is made by the appropriate student affairs official, both the complainant and the accused will be notified of the action to be taken.
- d. Pursuant to FERPA (Family and Educational Rights to Privacy Act), student disciplinary records will remain confidential unless the accused consents to release of information.
- e. Students who are found to have violated the sexual harassment policy may grieve any decision affecting their educational status through the grievance procedure of their respective college.

f. Complainants may not appeal administrative decisions regarding sexual harassment complaints through the UAMS grievance process.

Questions regarding this policy may be directed to the Office of Human Resources at (501) 686-5650.

4.13 NOTICE REGARDING DRUG TESTING AND CRIMINAL BACKGROUND CHECKS

A critical part of health professions education involves learning experiences in hospitals and other health care facilities. Use of these facilities for instruction is essential, and students must be able to complete their assigned rotations. Many hospitals and other health care facilities have policies requiring drug testing and/or criminal background checks for employees, students, and volunteers. Facilities that provide instruction to College of Health Professions students may have, or may adopt in the future, drug testing and/or criminal background check policies. Some facilities stipulate that students who test positive for drugs, or who have certain types of information in their criminal background checks, are ineligible to work in that facility.

Because the use of these health care facilities is part of the curriculum and essential to health professions education, students should be prepared to comply with the policies and procedures at any facility where they engage in rotations or other learning experiences. Students may not request facility assignments in an effort to avoid criminal background checks or drug screening requirements. Students may not refuse to participate in educational activities at these facilities because they do not want to submit to drug testing and/or criminal background checks. Students who fail to attend assigned activities, or who are terminated from rotations in these facilities because they violate the drug testing or drug use policies of the facilities, or who are found to have objectionable information in their criminal background checks, will be unable to complete the college requirements for graduation and will be subject to dismissal from the College of Health Professions on academic grounds.

Departments in the CHP may require applicants offered admission and students to obtain criminal background checks and have the results reported to the college. Departments that require backgrounds checks must adhere to the policy below. Some departments may require drug tests of applicants offered admission and students. Policies and procedures for drug tests are available from the department.

4.14 BACKGROUND CHECKS FOR APPLICANTS AND STUDENTS

Purpose

The purpose of this policy is to establish guidelines and procedures for conducting criminal background check(s) for applicants who have been offered admission or students enrolled in certificate or degree programs in the College of Health Professions.

Rationale

The policy is adopted because it is incumbent on the College of Health Professions to: (a) meet contractual obligations contained in affiliation agreements between the college and clinical education affiliates, (b) exercise due diligence and assess the qualifications of all individuals who may have contact with patients and/or research participants, (c) ensure compliance with clinical education affiliate standards and regulations pertaining to human resource management, and (d) meet public demands for greater diligence in light of the national reports on injury and deaths resulting from medical malpractice and medical errors.

Applicability

Departments in the College of Health Professions that require background checks for admission must adhere to this policy. This policy applies to (1) all applicants who have been offered admission to certificate and degree programs in departments that require background checks and (2) enrolled students who may be required to obtain additional background checks following matriculation.

Policy

When required, an applicant or students must obtain a criminal background check from a vendor approved by the College of Health Professions, the University of Arkansas for Medical Sciences, or the University of Arkansas System. Results of the background check must be deemed satisfactory as a condition of the student's admission or continuation in the program.

An offer of admission will not be final until the completion of the background check with results deemed satisfactory. Admission may be denied based on the results of the background check. Only students with satisfactory results will be allowed to register for classes.

At times, a currently enrolled student may be required to obtain an additional background check for a variety of reasons, e.g., clinical affiliate requirements, contradictory findings from a clinical affiliate's background check, suspicion or reports of violation of laws, etc. In those instances, currently enrolled students will be barred from participating in clinical education experiences at clinical affiliates until a background check clearance is obtained. Failure to obtain an additional background check may be cause for suspension or dismissal from the program.

Scope of Background Checks

Background checks typically include the following criteria and cover the past seven years:

- Social Security Number verification
- Criminal search, including felonies, Class A, Class B, and Class C misdemeanors (7 years)
- Violent Sexual Offender and Predator Registry search
- Office of the Inspector General (OIG) List of Excluded Individuals/Entities
- General Services Administration (GSA) List of Parties Excluded from Federal Programs
- U.S. Treasury, Office of Foreign Assets Control (OFAC), List of Specially Designated Nationals (SDN)
- Applicable State Exclusion List

(**Note:** The time period and the types of searches are subject to change without notice. Changes will be approved by the College of Health Professions Executive Committee.)

Timing of the Background Checks

An applicant offered admission must obtain a background check prior to enrollment into a certificate or degree program. Background checks must be completed within six months of matriculation.

Cost of Background Checks

The applicant or student will pay the cost of required background checks.

Period of Validity

A background check is honored for the duration of enrollment if the student is continuously enrolled. A student who has a break in enrollment is required to complete a new background check. A break in enrollment is defined as non-enrollment of at least one semester in the approved curriculum of the certificate or degree program. An officially approved leave of absence is not considered a break in enrollment.

Significant Findings in Background Checks

<u>Re-verification</u> – An applicant or student has the right to request that the vendor who performed the background check re-verify that the background check is correct. Any costs associated with the re-verification will be paid by the applicant or student. The college may require the applicant or student to produce additional documentation to verify or re-verify findings.

<u>Evaluation of Significant Findings</u> – If significant findings are reported in a background check, the applicant or student may be referred to the specific program or discipline's professional licensing board to obtain clearance. The College of Health Professions will concur with the licensing board's decision.

If the professional licensing board does not review significant findings, the dean or dean's designee will review the findings in consultation with the department chair and make a recommendation to the program's admission committee as to whether the applicant should be admitted or the student should be allowed to participate in clinical education experiences.

False or misleading information supplied by the applicant or student, or omission of required information with regard to a background check, will result in (1) rescindment of an offer for admission or (2) dismissal from the certificate or degree program.

Adverse Actions Based on Background Checks – Consistent with the Fair Credit Reporting Act, if an applicant is denied admission or if an adverse action is taken against an enrolled student, based on findings of a background check (e.g., denial of participation in clinical education experiences, dismissal, or suspension), the applicant or student will be informed: (1) how to obtain a copy of the background check report, (2) how to contact the vendor to challenge the accuracy of the report, and (3) that the vendor was not involved in the decision that resulted in the adverse action.

Appeal Procedures for Enrolled Students – Ordinarily, a student who is unable to complete clinical education experiences will be unable to complete the certificate or degree program, and the student may withdraw or be dismissed from the program. Therefore, a student who is denied participation in clinical education experiences because of significant findings on a background check may request consideration following the College of Health Professions Grievance Procedures.

<u>Deferred Matriculation or Participation</u> – If a background check reveals matters that may be cleared by the applicant or student, matriculation or continuation in the certificate or degree program may be deferred up to one year while the matter is being resolved.

Approved Vendor(s)

Background checks must be conducted by a vendor approved by the College of Health Professions, the University of Arkansas for Medical Sciences, or the University of Arkansas System. Background check reports from other sources will not be accepted.

Confidentiality and Disposition of Background Check Reports

Background check reports are maintained securely, confidentially, and separately from other academic files in the office of the dean for a period of time established by guidelines or policy.

4.15 UAMS SMOKING/TOBACCO USE POLICY

Purpose

The University of Arkansas for Medical Sciences (UAMS) is committed to promoting health, wellness, prevention, and the treatment of diseases within the community as well as to providing a safe, clean, and healthy environment for patients, visitors, employees, and students. UAMS serves as a model for the community in the area of promoting the good health of our staff and influencing public attitudes about the use of tobacco products. It is, therefore, UAMS's policy to provide a tobacco-free work environment.

Scope

All UAMS employees, faculty, staff, students, contractors, vendors, volunteers, patients, visitors, and anyone on any UAMS property.

Policy

Smoking and the use of tobacco products (including cigarettes, cigars, pipes, smokeless tobacco, and other tobacco products) by employees, faculty, students, patients, and visitors are prohibited on all properties of the University of Arkansas for Medical Sciences.

Definitions

Tobacco products include, but not limited to: cigarettes, smokeless tobacco, pipes, cigars, and any tobacco containing product.

Employee – for the purpose of this policy, all UAMS employees while in UAMS facilities (leased or owned) or on the grounds of those facilities.

Students – for the purpose of this policy, any student attending any of the colleges or clinical areas on the UAMS grounds, leased or owned buildings.

Contractors/subcontractors/vendors/volunteers – individuals who enter UAMS Property for the purpose of providing a service to the institution.

Visitors – individuals who do not fall under the above categories including patients and their families.

Procedures

- 1. All Persons are prohibited from using tobacco on or in all UAMS owned or leased properties, UAMS owned or leased vehicles, and UAMS adjacent grounds, including parking lots and ramps.
- 2. Patients in the UAMS Medical Center are prohibited from tobacco use in accordance with the <u>UAMS</u> Medical Center Policy Manual Policy PS 1.09.
- 3. Compliance with this tobacco free policy will be the responsibility of all administrators.
 - Lack of cooperation or repeated violations by employees, vendors, and students should be reported to the individual's supervisor/student's department chairman. The supervisor/chairman shall then attempt to resolve the problem.
 - Standard disciplinary procedures will be followed for compliance problems with employees/students. Violations will result in progressive disciplinary actions, including termination.
 - In the event the tobacco violation involves a potential threat to health or safety (e.g., smoking where combustible supplies, flammable liquids, gasses, or oxygen are used or stored) the UAMS Police may be called for additional support.
 - UAMS Police shall be notified as the final resource to resolve problems arising with visitors, employees, or students during the enforcement of this policy.
 - Under Arkansas law violators of the smoking ban may be fined an amount not less than \$100 and no more than \$500.
- 4. New employees will be informed of the UAMS tobacco free policy during orientation. The Office of Human Resources will also inform employment candidates of the tobacco free policy during the application process.
- 5. Tobacco products will not be sold or dispensed within the UAMS campus.
- 6. Employees/students may not use tobacco products in any vehicle when the vehicles are on UAMS property.

4.16 UAMS SEXUAL ASSAULT POLICY DISCLOSURE

Amended in 1992, the security policies released pursuant to the Campus Security Act shall specifically address sex offense prevention and include the following provisions in cases of alleged sexual assault:

- Accuser and accused must have the same opportunity to have others present.
- Both parties shall be informed of the outcome of any disciplinary proceeding.
- Survivors shall be informed of their options to notify law enforcement.
- Survivors shall be notified of counseling services.
- Survivors shall be notified of options for changing academic and living situations.

See page 28 for the Web address of the current campus security report.

4.17 SEX OFFENDER NOTIFICATION

The UAMS Police Department maintains information on registered sex offenders for the University of Arkansas Medical Science Campus and makes notifications regarding registered sex offenders associated with the Campus consistent with the state guidelines pursuant to Arkansas Code Annotated 12-12901-920 and 12-12-1301-1303.

These individuals subject to the notification process have been convicted of an offense that requires registration with the Arkansas Crime Information Center. These individuals, it must be stressed, are not wanted by law enforcement at this time and have already served their assigned sentences. Should you become aware of a registered sex offender on campus, no action on your part is required other than the type of alertness and caution that increases the safety of individuals, families, neighborhoods, and communities. Should you observe suspicious behavior on the part of such an individual, do not take action on your own, but immediately notify law enforcement. You may not share confidential information that you may receive regarding registered sex offenders with others, except those who have a need to know (for example, supervisors or co-workers in a position to prevent harm).

A written summary of campus guidelines and the notification plan for each offender will be maintained by the UAMS Police Department. Our campus Police Department will also make determinations regarding notifications. If you seek further information, please the Detective Division, UAMS Police Department at (501) 686-7777.

4.18 REPORTING POLICY FOR HIPAA VIOLATIONS

HIPAA refers to the Health Insurance Portability and Accountability Act that ensures the protection of patient health information. All students must receive HIPAA Training.

Protected Health Information (PHI) is that part of an individual's health information that identifies the individual or there is a reasonable basis to believe the information could be used to identify the individual, including demographic information, and that (i) relates to the past, present, or future physical or mental health or conditions of the individual; (ii) relates to the provision of health care services to the individual; or (iii) relates to the past, present, or future payment for the provision of health care services to an individual. This includes PHI which is recorded or transmitted in any form or medium (verbally, or in writing, or electronically). PHI excludes health information maintained in educational records covered by the federal Family Educational Rights Privacy Act and health information about UAMS employees maintained by UAMS in its role as an employer.

UAMS is committed to protecting the privacy of our patients' information. While privacy and confidentiality have always been a priority for health care providers, it has heightened importance in this era of electronic information, with increased speed of information flow and the risks associated with protecting this information.

Additional information and training on HIPAA, including UAMS HIPAA policies, are available on the HIPAA Office web page: http://hipaa.uams.edu/. Please keep in mind that there are sanctions for inappropriate access to patient records. These include criminal penalties of up to one (1) year imprisonment and a \$50,000 fine; as well as disciplinary action up to and including dismissal from your program.

You may direct questions to the UAMS HIPAA Office at (501) 603-1379 or to the CHP Associate Dean for Academic Affairs, at (501) 686-5732 within the College.

Policy

The UAMS workforce/students will abide by the federal standards for Privacy of Individually Identifiable Health Information, also known as the HIPAA Privacy Regulations, and will conduct themselves in accordance with the UAMS policies and procedures relating to the HIPAA Privacy Regulations. Any known or suspected violations of the HIPAA regulations or related UAMS policies and procedures must be reported in accordance with this Policy.

UAMS workforce who report in good faith such known or suspected violations shall not be subjected to retaliation intimidation, discrimination, coercion, or harassment as a result of their report.

Violations of this policy, including failure to report, will be grounds for disciplinary action up to and including termination. Any sanctions that are applied will be documented.

Procedures

Reports by patients, employees, or students may be made to any of the following:

- UAMS HIPAA Office, Slot 829, room M1/147, HOTLINE (501) 614-2187);
- UAMS HIPAA Office, MAIN OFFICE (501) 603-1379, Email to hipaa@uams.edu;
- UAMS Reporting Line, 1-800-511-3969;
- UAMS Research Privacy Board Office/IRB (501) 686-5667; or
- UAMS IT Security Office (501) 603-1336.

If the employee making the report prefers to report to the head of his/her department or anyone else in a position of responsibility, he/she may do so. The person receiving this report should contact the UAMS HIPAA Office as outlined above.

4.19 UAMS CONFIDENTIALITY POLICY

Purpose

To inform the UAMS Workforce about the UAMS Confidentiality Policy.

Scope

UAMS Workforce as well as non-UAMS employees, vendors, consultants, and other visitors who may access Confidential Information.

Definitions

Confidential Information includes information concerning UAMS research projects, confidential employee and student information, proprietary information of UAMS, and sign-on and password codes for access to UAMS computer systems. Confidential information shall include Protected Health Information.

Protected Health Information (PHI) means information that is part of an individual's health information that identifies the individual or there is a reasonable basis to believe the information could be used to identify the individual, including demographic information, and that (i) relates to the past, present or future physical or mental health or condition of the individual; (ii) relates to the provision of health care services to the individual; or (iii) relates to the past, present, or future payment for the provision of health care services to an individual. This includes PHI which is recorded or transmitted in any form or medium (verbally, or in writing, or electronically). PHI excludes health information maintained in educational records covered by the federal Family Educational Rights Privacy Act and health information about UAMS employees maintained by UAMS in its role as an employer.

UAMS Workforce: UAMS Workforce includes UAMS physicians, employees, volunteers, residents, students, trainees, visiting faculty, and other persons whose conduct, in the performance of work of UAMS, is under the direct control of UAMS, whether or not they are paid by UAMS.

To access any other terms or definitions referenced in this policy: http://hipaa.uams.edu/DEFINITIONS%20-%20HIPAA.pdf.

Policy

UAMS prohibits the unlawful or unauthorized access, use or disclosure of Confidential Information obtained during the course of employment or other relationship with UAMS. As a condition of employment, continued employment or relationship with UAMS, the UAMS workforce and all non-UAMS employees, vendors, consultants and other visitors who may access Confidential Information shall be required to sign the UAMS Confidentiality Agreement approved by the UAMS Office of General Counsel. UAMS will provide training for each of its workforce members on the importance of maintaining confidentiality and the specific requirements of state and federal law, including the HIPAA Privacy Regulations and laws protecting the privacy of students and employees, as well as UAMS policies, in accordance with UAMS HIPAA Education and Training Policy.

Procedures

Confidentiality Agreement: As a condition of employment, continued employment, or a relationship with UAMS, UAMS will require its workforce and all non-UAMS employees, vendors, consultants, and other visitors who may access Confidential Information to sign the UAMS Confidentiality Agreement.

All new employees, students, or vendors requiring access to electronic Confidential Information (computer systems) must have a current Confidentiality Agreement on file in the IT Security Office. The person signing the agreement will receive a copy of the Confidentiality Policy with the Confidentiality Agreement. The UAMS IT Security Office will maintain signed Confidentiality Agreements. It is the responsibility of the manager hiring individual vendors or consultants (who do not require electronic access but who may have access to Confidential Information) to require execution of the appropriate confidentiality agreements approved by the UAMS Office of General Counsel and to send those documents to the UAMS IT Security Office.

Restriction on Access, Use and Disclosure of Confidential Information: UAMS limits and restricts access to Confidential Information and computer systems containing Confidential Information based upon the specific duties and functions of the individual accessing the information. UAMS will restrict access to Confidential Information to the minimum necessary to perform individual job functions or duties. UAMS will further limit and control access to its computer systems with the use of unique sign-on and password codes issued by the IT Security Office to the individual user authorized to have such access. Users are prohibited from sharing their password or using the access codes of another.

Authorization to access, use, or disclose Protected Health Information is also governed by the <u>UAMS Use and</u> Disclosure Policy.

UAMS will control and monitor access to Confidential Information through management oversight, identification and authentication procedures, and internal audits. UAMS managers and heads of departments will have the responsibility of educating their respective staff members about this Policy and the restrictions on the access, use and disclosure of Confidential Information, and will monitor compliance with this Policy.

Sales Representatives and Service Technicians: Sales representatives and service technicians must register in the appropriate area and execute the Confidentiality Agreement prior to any exposure to UAMS Confidential Information.

Media: All contacts from the media regarding any Confidential Information must be referred to the UAMS Office of Communications and Marketing at (501) 686-8998 or pager (501) 395-5989.

Violation of Confidentiality Policy: Individuals shall not access, use, or disclose Confidential Information in violation of the law or contrary to UAMS policies. Each individual allowed by UAMS to have access to Confidential Information must maintain and protect against the unauthorized access, use, or disclosure of Confidential Information. Any access, use, or disclosure of Confidential Information in any form - verbal, written, or electronic – that is inconsistent with or in violation of this Policy will result in disciplinary action, including but not limited to, immediate termination of employment, dismissal from an academic program, loss of privileges, or termination of relationship with UAMS. Any workforce member whose relationship with UAMS is not terminated as a result of violating this Policy must, in order to continue working at or attending UAMS, complete the HIPAA training module through the UAMS HIPAA Office.

All UAMS employees and others subject to this Policy must report any known or suspected incidents to access, use or disclosure of Confidential Information in violation of this Policy or in violation of the law to the HIPAA Office at (501) 603-1379, in accordance with UAMS Reporting Policy for HIPAA Violations.

Sanctions

Violation of this Policy will result in disciplinary action, in accordance with UAMS Disciplinary Notice Policy.

4.20 AIDS POLICY FOR THE CHP

Introduction

The College of Health Professions adheres to the UAMS policy on admission of students with HIV-1 sero-positive status.

Policy

In every case, department chairmen and faculty will work closely with HIV-1 sero-positive students to make every effort to retain them in the program if it is possible to do so. The use of models and manikins as substitutes for actual patient contact will be employed if the educational objectives of the program can thusly be achieved and appropriate competencies developed in the student. It should be noted, however, that HIV-1 sero-positive graduates may have great difficulty finding employment in hospitals if their status were to become known to potential employers.

In certain programs, HIV-1 sero-positive status prevents the students from performing certain clinical procedures necessary to meet program requirements. Contact the department chairman if you have questions or concerns.

4.21 THE UAMS MEDICAL CENTER HEALTH CARE POLICIES AND PROCEDURES

4.21.1 Needle Stick/Sharps Injuries and Blood/Body Fluid Exposure

Purpose

Provide guidance for managing blood and body fluid exposure to staff and students.

Policy

All faculty, employees, residents, or students, who suffer a parenteral (e.g., needlestick or cut) or mucous membrane (e.g., splash to the eye or mouth) exposure to blood or other body fluids, or who have a cutaneous exposure involving large amounts of blood or prolonged contact with blood – especially when the exposed skin is chapped, abraded, or afflicted with dermatitis – shall:

- 1. Report the incident immediately to their immediate supervisor or instructor.
- 2. Call immediately to Student and Employee Health Services (SEHS) at (501) 686-6565, if it is during regular business hours or the Emergency Department (ED) at (501) 686-6236, if it is after business hours.
- 3. The amount of risk incurred as a result of the exposure must be evaluated and prophylactic treatment must be started within 2 hours to be effective.
- 4. Complete the UAMS Accident and Injury (A&I) Report form.

Information about the source patient shall be documented on the Employee A&I Report form by the nursing supervisor or his/her designee from which the source patient is receiving care. All employees and students who have a blood/body fluid exposure are to be evaluated either by the SEHS or the ED regardless of the type of exposure or risk status of the source patient.

The A&I form shall accompany the employee/student to **SEHS** or the ED at the time of the initial evaluation.

It is the responsibility of the employee's supervisor or student's instructor to make sure that all information relevant to the A&I has been completed and the involved employee or student has called either **SEHS** or the UAMS ED, for triage. It is the responsibility of the Nursing Supervisor or designee to record all information regarding the source patient on the A&I, notify either **SEHS** or the ED with the risk factors for HIV, and ensure that orders are written for lab work on the source patient's chart.

Procedures

- I. "Clean" Needle Stick/Sharps Injury
 - A. The supervisor or designee shall record that a "clean" needlestick has occurred. A "clean" injury is defined as one where the instrument involved has not been used on a patient.
 - B. The employee/student should call the **SEHS** or ED to arrange to be seen within 24 hours for wound treatment and tetanus prophylaxis, if necessary. No further treatment is necessary.

- II. Sharps Injury/Blood or Body Fluid Exposure Involving a Patient
 - A. If the involved patient cannot be identified:
 - 1. The supervisor or designee shall note on the A&I form that the source patient is unknown.
 - 2. The employee/student shall contact **SEHS** or the ED immediately after the exposure.
 - 3. The employee/student will start or resume the Hepatitis B vaccine series if it is determined to be necessary.
 - 4. The employee/student will have a baseline HIV and HBSAb drawn at the time of the initial visit. The HIV will be repeated in 3 months.
 - B. If the source patient involved can be identified:
 - 1. The supervisor or designee shall:
 - a. Record the source patient's name, medical record number, physician, and pertinent medical information from the source patients chart regarding the risk status for Hepatitis and HIV infection (e.g., history of blood transfusions, IV drug use, incarceration, sexually transmitted diseases) on the A&I form.
 - b. Obtain orders from the physician for a Hepatitis Panel and HIV serologies to be drawn as soon as possible on the source patient. The lab work will be performed at the hospitals expense. Document in the chart that this is an "Occupational Exposure-No Charge".
 - 2. The employee's supervisor or instructor shall ensure that the above information has been documented on the A&I form and that the involved employee/student has been referred for appropriate evaluation and treatment.
 - 3. When used in this paragraph, the term "employee" shall be deemed to include all UAMS employees, residents, faculty, or students, who suffer an exposure at UAMS. A source patient's blood may be tested for HIV, Hepatitis B, and other diseases as recommended by the Arkansas State Health Department at the hospital's expense without the consent of the patient or a patient representative. If the source patient is capable of understanding, the patient's attending physician shall inform the patient of the incident, the need to test the patient's blood, and that the patient will be informed of the results of the tests. The patient's physician is not required to provide such information to a patient's representative if the patient is incapable of understanding. When the results are obtained, the physician shall advise the patient of the results, and shall provide appropriate counseling. Results of the tests will also be provided to the affected employee and to the employee's physician, both of whom shall have an obligation to maintain the patient's confidentiality. It is the responsibility of the supervisor to make sure that this policy is carried out.
 - 4. Treatment of Employee/Student Following Patient Testing
 - a. The supervisor or designee shall record which tests were done on the source patient and the date on which they were done on the A&I form.
 - b. The employee/student shall contact either **SEHS** or the ED as soon as possible after the exposure. The employee must be evaluated by a physician in **SEHS** or the ED within two (2) hours of the exposure.
 - c. If the source patient has AIDS or is sero-positive for HIV, the employee/student will be tested for HIV at the initial evaluation, and, if the employee/student is sero-negative, will retest at six weeks, three and six months following the exposure. The employee/student will be counseled to report back to SEHS for any febrile illness that occurs within twelve weeks of the exposure (such as illness, particularly characterized by fever, rash, or lymphadenopathy which may be indicative of recent

- HIV infection). Especially during the first six to twelve weeks of the follow-up period, the employee/student should be advised to follow U.S. Public Health Service recommendations for preventing transmission of HIV.
- d. If the source patient is sero-negative for HIV, the employee/student will be tested for HIV at the initial evaluation, and if sero-negative, the employee shall be retested at three months.
- e. Any employee or student who agrees to be tested for HIV following an injury or exposure and is found to be sero-positive shall be informed of the test results and will be seen and counseled by an **SEHS** physician regarding the need of further confirmatory testing. Reporting of confirmed HIV tests will be done in accordance with the UAMS Medical Center Reporting of HIV Antibody Results Policy.

III. Source Patient Is Diagnosed or Suspected of Having a Blood-Borne Infection

- A. The supervisor or instructor shall record any of the following diagnosed or suspected bloodborne infections:
 - 1. Arthropod-borne viral fevers
 - 2. Babesiosis
 - 3. Creutzfeldt-Jacob Disease
 - 4. Hepatitis C
 - 5. Leptospirosis
 - 6. Malaria
 - 7. Rat-bite fever
 - 8. Relapsing fever
 - 9. Syphilis, primary and secondary
 - 10. HIV
- B. **SEHS** shall follow recommendations for tetanus, HIV, and Hepatitis B and C evaluation according to the situation.
- C. **SEHS** may consult an infectious disease specialist in the event that an employee had an injury/exposure to any of the above listed diseases.

IV. Billing for Blood/Body Fluid Exposure

- A. Employees: Since this type of injury is classified as "job related", a claim for Worker's Compensation shall be initiated at the time that the employee reports to either **SEHS** or the ED.
- B. Students: Students who have a blood/body fluid exposure shall also be evaluated by **SEHS** or the ED and are subject to completing an A&I Report form so that proper evaluation and treatment may be accomplished. Insurance and/or the appropriate college shall be billed in the case of students with a blood/body fluid exposure.
- V. The Administration of Chemoprophylaxis Post-Exposure to Blood/Body Fluids
 - A. The hospital will make chemoprophylaxis available for UAMS employees who have sustained an occupational exposure from either a high risk or HIV positive patient. Insurance or the appropriate college will be billed for Chemoprophylaxis for UAMS students.
 - B. **SEHS** has developed a protocol for Post-Exposure Prophylaxis which involves counseling, informed consent, prescribing the drug, and follow-up visits with laboratory assessment. Symptoms and laboratory work will be monitored to minimize toxicity. The use of Chemoprophylaxis following occupational exposure to HIV is controversial. The decision will rest with the individual and the **SEHS** or ED physician. In theory, chemoprophylaxis is best given within the first 2 hours following the exposure.

4.21.2 Protection Against Occupational Exposure to Hepatitis B Virus (HBV), Hepatitis C, and HIV

Purpose

Protection against blood borne infections.

Policy

Since medical history and examination cannot reliably identify all patients infected with HIV, Hepatitis B, or Hepatitis C, or other blood-borne infections, "Universal/Standard Precautions" when handling blood and body fluid shall be consistently used for all patients. Students, residents, and employees (hereafter known as health care worker) shall not be permitted by their supervisors to draw blood or perform invasive procedures until their skills have reached a satisfactory level of proficiency.

Procedure

I. Routine Precautions

- A. Health care workers shall use appropriate barrier precautions according to Universal/Standard Precautions, see below.
- B. Hands and other skin surfaces shall be cleaned immediately if contaminated with blood or body fluid. Hands shall be cleaned after gloves are removed.
- C. Precautions to prevent "sharps" injury should be taken. Needles should not be recapped, bent, or broken by hand, or removed from disposable syringes. After use, "sharps" should be placed in puncture-resistant containers for disposal.
- D. Although saliva has not been implicated in HIV transmission, mouth-to-mouth resuscitation should be replaced by mouth pieces, resuscitation bags, or other ventilation devices.
- E. Health care workers with exudative lesions or weeping dermatitis should refrain from direct patient care and handling equipment until the condition resolves.
- F. Pregnant health care workers are not known to be at greater risk of contracting HIV, Hepatitis B, or Hepatitis C than non-pregnant workers. However, if infections did occur, prenatal transmission may result. Therefore, pregnant health care workers should be especially familiar with and strictly adhere to these precautions.
- G. Blood, saliva, and gingival fluid from all dental patients should be considered potentially infected. Blood and body fluids from all patients sent to clinical laboratories should be considered potentially infected.

II. Universal (Standard) Precautions

A. **Hand Hygiene:** Frequent hand hygiene is an important safety precaution which should be practiced after contact with patients and specimens. Hands should always be cleaned with antimicrobial soap or waterless hand cleaner before and after contact with patients even when gloves have been used. If hands come in contact with blood, body fluids, or human tissue, they should be immediately cleaned with an antimicrobial agent. (Washing with an antimicrobial agent is recommended; however, soap and water may be used. Using an approved moisturizing hand cream may reduce skin irritation caused by frequent handwashing.)

Hands NEED to be cleaned:

- 1. Before invasive procedures.
- 2. After the completion of work.
- 3. Before any contact with wounds.

- 4. After removal of gloves and/or other protective clothing, immediately or as soon as possible after hand contact with blood or other potentially infectious materials and upon leaving the work area.
- 5. Before eating, drinking, smoking, applying makeup, or changing contact lenses.
- 6. Before all other activities which entail hand contact with mucous membranes or breaks in the skin.
- 7. Immediately after accidental skin contact with blood, body fluids, or tissues, hands or other skin areas should be thoroughly washed. If the contact occurs through breaks in gloves, the gloves should immediately be removed and the hand should be thoroughly cleaned.
- 8. Between contacts with different patients.
- 9. After contact with a source that is likely to be contaminated with viruleus microorganisms or hospital pathogens (e.g., touching infected patient, after taking rectal temperatures, emptying Foley bags, blowing nose).
- B. Gloves: Gloves shall be worn when the employee/student has the potential for direct skin contact with blood, other potentially infectious materials, mucous membranes, non-intact skin of patients, and when handling items or surfaces soiled with blood or other potentially infectious materials. Gloves shall be disposable and changed in between patients, or between different open body sites. Gloves should be changed if they become visibly contaminated with blood or body fluids or if physical damage occurs. Latex, vinyl, nitrile, or polyethylene gloves all provide adequate barrier protection. Wearing two pairs of gloves (double-gloving) is recommended in situations where large amounts of blood may be present in the field of work, such as in the Emergency Department.
- C. Facial Protection: Masks and eye protection or face shields shall be worn whenever splashes, spray, splatter, droplets or aerosols of blood or other potentially infectious material may be generated and there is a potential for eye, nose, or mouth contamination. Full-face shields made of lightweight plastic (similar to chemical splash shields) are the preferred means of facial protection. They offer excellent protection of the entire face and neck region. A surgical mask offers protection of the nose and mouth. Either soft or preformed masks are effective. Ordinary prescription glasses are not adequate eye protection. Better protection is afforded by plastic wrap-around safety glasses that fit over regular glasses. If there is substantial hazard of spattering, goggles with a plastic cushion seal are preferred. Surgical caps may be worn if extreme spattering is anticipated.
- D. Occlusive Bandages: All open skin defects (e.g., exudative lesions, dermatitis, cuts, abrasions, etc.) on health care workers shall be covered with a water-impermeable occlusive bandage. This includes defects on the arms, face, and neck.
- E. Gowns, Aprons and Other Protective Body Clothing: Appropriate protective clothing shall be worn when the employee/student has a potential for exposure to blood and other potentially infectious materials. Gowns and laboratory coats shall be changed immediately if grossly contaminated with blood or body fluids to prevent blood seeping through and contaminating street clothes or skin. They should be changed at appropriate intervals to ensure cleanliness. Contaminated gowns shall be placed into the isolation linen bag and sent to the hospital laundry. Disposable plastic aprons are recommended if there is a significant probability that blood or body fluids may be splashed on the worker. At the completion of the task being performed, the apron shall be discarded into a biohazard container.

4.21.3 Health Care Workers with HIV and Infectious HBV

Purpose

The purpose of this policy is to prevent transmission of blood-borne pathogens, specifically HIV and HBV, from health care workers who are infectious.

Policy

UAMS Medical Center provides an environment that limits the potential for transmission of bloodborne infections from UAMS health care workers to patients, while protecting employee privacy.

Definitions

Healthcare Worker - shall mean any person who provides medical or health care to a patient at UAMS Medical Center, and shall include employees, students, staff, physicians, residents, and all other providers of medical or health care at UAMS Medical Center.

Procedure

- Reporting of Infectious Status: Health care workers who are infected with HIV or who are HBV surface-antigen-positive are encouraged to report their status. Physicians are encouraged to report their status to their Chief of Service and the Chief of Staff; students are encouraged to report their status to the Dean of Students; and employees are encouraged to report their status to their supervisors.
- 2. **Counseling:** Counseling shall include education as to the modes of transmission of blood-borne pathogens, the risk of transmission, appropriate standards of personal hygiene, maintenance of health for the infected individual, and restriction, if any, on such individual's work. If appropriate, the individual shall also be informed of the possibility that knowledge of the individual's status may become known due to work restrictions. Counseling shall be provided under the direction of the Medical Director of Student/Employee Health.
- 3. **Disciplinary Action:** Any infected individual who places any other person at risk of infection by failing to follow reasonable precautions and restrictions shall be subject to appropriate disciplinary measures.
- 4. Restriction on Work: Infected individuals shall not perform "exposure-prone procedures." Characteristics of exposure-prone procedures include digital palpation of a needle tip in a body cavity or the simultaneous presence of the individual's fingers and a needle or other sharp instrument or object in a poorly visualized or highly confined anatomic site. Performance of exposure-prone procedures presents a recognized risk of percutaneous injury to the individual, and if such an injury occurs, the individual's blood is likely to contact the patient's body cavity, subcutaneous tissues, and/or mucous membranes. The Chief of Service will make determinations about potential performance of exposure-prone procedures on a case-by-case basis on consultation with experts in the field.
- 5. **Confidentiality:** If an infected individual reports her/his status as outlined in this policy, the person who receives such report shall maintain the information in confidence, with further disclosure being limited to those with a need to know, who shall have the same duty of confidentiality.

4.21.4 Employee, Student, and Volunteer Vaccinations and Tuberculosis (TB) Screening

Purpose

Minimize potential exposure to vaccine-preventable diseases and Tuberculosis for all UAMS employees, students, volunteers, patients, and visitors.

Policy

UAMS Medical Center makes optimal use of immunizing agents and TB screening to safeguard the health of workers, students, and volunteers and protect patients from becoming infected with vaccine-preventable diseases or TB. Vaccines will be administered as indicated unless contraindicated or refused.

Procedure

- A. The UAMS Student and Employee Health Services (SEHS) provides a medical screening for vaccine preventable diseases and TB screening for employees as described below. All UAMS students are required to complete a student physical exam. All UAMS students must obtain required vaccines prior to matriculation. Subsequent annual limited screenings for students will be performed by SEHS.
 - 1. All personnel are required to have a completed TB step one screening before starting employment. All personnel are required to complete the new hire medical screening and annual medical screening thereafter. Annual medical screening includes TB screening and updating of required vaccinations. Special populations may be required to have more frequent screenings.
 - 2. All personnel who do not have documentation of Rubella vaccine or do not have laboratory evidence of immunity must be vaccinated.
 - 3. All personnel are required to be vaccinated for Measles/Mumps if they do not have one of the following:
 - a. Proof of two doses of live measles vaccine no closer than one month apart or of one dose of live Measles vaccine after age 12.
 - b. Documentation of physician-diagnosed Measles.
 - c. Laboratory evidence of Measles immunity.
 - 4. All personnel including UAMS students whose job role, as defined by their supervisor, includes working in a patient care area or may routinely have exposure to patients are required to be vaccinated annually for both seasonal and, if recommended by the CDC, novel types of influenza.
 - 5. All personnel with the potential for occupational exposure to Hepatitis B on the average of one or more times per month, and who do not have documentation or history of completion of the vaccine series or laboratory evidence of prior disease, should obtain this vaccine. Occupational exposure means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties. This definition excludes incidental exposures that may take place on the job, and that are neither reasonably nor routinely expected and that the worker is not required to incur in the normal course of employment. Personnel who were offered the Hepatitis B vaccine and declined have documentation entered into their record indicating their choice.
 - 6. Hemodialysis workers and employees cleared to work with or around animals by DLAM are required to receive Hepatitis B vaccine.
 - 7. Personnel whose duties involve the risk of directly contracting and spreading the Hepatitis A Virus, specifically laboratory or other healthcare workers who handle Hepatitis A Virus and Food Handlers, are offered the Hepatitis A Vaccine.
 - 8. All personnel are offered the Influenza vaccine according to CDC guidelines for that particular year.

- 9. All personnel are recommended to have a Tetanus Diphtheria and Pertussis (TDAP) booster every 10 years. A current booster is required for all employees who work with animals. A history of the vaccination is sufficient.
- 10. All personnel working in high risk areas with neonates (newborns), children, and oncology patients without a reliable history of Varicella disease or proof of vaccination must have a Varicella titer. Those who are seronegative for Varicella must be vaccinated.
- 11. Microbiologists routinely exposed to isolates of Neisseria Meningitides, will be offered the Meningococcal Vaccine.
- B. UAMS employee, student, volunteer refusal of required vaccines and testing (as listed above) will be subject to disciplinary measures up to suspension or termination. UAMS employees not completing required new hire screening or annual screening will be suspended without pay or terminated. Those unable to comply for specific reasons may be subject to special requirements such as wearing protective masks and/or covering during influenza season or other infectious outbreaks. Influenza season and other infectious outbreaks will be defined by the Infection Control Division of UAMS Medical Center. Those unwilling to comply with special requirements may be furloughed for medical reasons for the duration of the season or outbreak.
- C. Volunteer noncompliance with required vaccines will subject the person to restrictions in activity and authorized locations depending on the status of current infectious outbreaks and medical conditions as defined by the UAMS Infectious Control Division.
- D. The financing of necessary vaccinations will be in accordance with UAMS Medical Center Employee Testing/Services Policy.

4.21.5 Testing Patients for HIV - Consent Requirement

Purpose

To set consistent guidelines governing consent for Human Immunodeficiency Virus (HIV) testing.

Policy

No student, employee or member of the medical or affiliate staff shall test a UAMS Medical Center patient for HIV except in accordance with this Policy.

Procedure

Documentation in the medical chart of patient consent (verbal or written) of the patient to testing shall be obtained in advance of testing, unless the patient's attending physician orders testing without consent in one of the two following circumstances:

- 1. A student, employee, staff member, or other person providing health care at UAMS Medical Center has been exposed to a patient's bodily fluids, in which case testing shall be done in compliance with UAMS Medical Center Policies and Procedures.
- 2. In the judgment of the patient's attending physician, such testing is medically indicated to provide appropriate diagnosis and treatment to the patient, provided that the patient has otherwise provided his or her consent to such physician for medical treatment, if able to do so.

4.22 MILITARY DUTY POLICY

Students enrolled in the UAMS CHP, who are members of military reserve or national guard units may elect one of the following options when called to active military duty as a result of the activation authorized by the President of the United States. Spouses of members with a dependent child living with them who are enrolled in the UAMS CHP may also elect one of the following options when their spouse is called to active military duty.

- 1. The student can officially withdraw from the CHP, and receive a full adjustment and refund of tuition and nonconsumable fees for the terms involved. A copy of the activation orders must be attached to the official withdrawal form for the student to obtain the full tuition and fee adjustment and refund. Students electing this option will not receive credit for any courses for the semester(s) involved; however, the academic record will indicate enrollment until the official date of withdrawal.
- 2. The student can remain enrolled and arrange for a mark of "Incomplete" for each class for which he or she is enrolled, provided the work to date is of passing quality. In order to receive a mark of "Incomplete" in any course, the student must obtain agreement from the instructor of the course. Upon discharge from the service, the student must within six months develop with the department in question a satisfactory plan to remove the "Incomplete".
- 3. An instructor who believes a sufficient portion of a course has been completed may assign an appropriate final grade in that course at the time the student leaves. This grade will be reported on the final grade roster.
- 4. A student activated during the course of a semester shall be entitled, within a period of two (2) years following deactivation, to free tuition for one (1) semester at the institution where attendance had been interrupted unless federal aid is made available for the same purpose.

4.23 POLICY ON ADMINISTRATIVE ACTIONS

In the College of Health Professions, certain individuals have the authority to impose interim administrative actions in order to protect the safety and welfare of members of the University community. These "authorized individuals" include the Dean and/or his/her designees. As defined below, the Deans and their designees are permitted, when necessary, to take the following interim administrative actions: (A) interim actions; (B) interim suspensions; and/or (C) referrals for psychological or psychiatric evaluations.

A. Interim Actions

In special circumstances the authorized individuals named above may impose "interim actions" to ensure the safety and welfare of members of the University community, including, but not limited to, student restrictions from certain activities or locations and changes in class schedules. Any restrictions outlined in the interim action will be clearly presented in a written notice to the student.

- Appeal of Interim Administrative Action: In the event that interim action is invoked, the student may
 appeal the action through the College's non-discriminatory grievance policy as further explained in the
 "CHP Grievance Procedures" which is detailed in the CHP Handbook. During the grievance process, a
 hearing will be provided. At this hearing, the student will be given the opportunity to explain why
 he/she does not constitute a threat to the safety, health, or welfare of members of the University
 community.
- 2. Violation of Interim Action: Any violation of an interim action will result in a meeting with the student, his/her department chairman, and the Dean's designee to determine the actions to be taken. Actions may range from disciplinary probation to immediate dismissal.

B. Interim Suspension

Notwithstanding any other provision of this Code, an "interim suspension" may be imposed upon a student by the Dean and/or his/her designees when there is reasonable cause to believe, based on available facts, that the student is an immediate threat to the safety of himself or herself, other members of the University community or University property, or is persistently disruptive to the University community. When an "interim suspension" action is imposed, a student will be given a written notice containing the reasons for suspension, the duration, and any conditions that apply, along with a copy of this interim suspension policy. After receiving such notice, a student is required to leave the campus and University property immediately and make no future visits to any University property unless invited by his/her college Dean, the Dean's designee, or the Vice Chancellor for Academic Affairs. Following notice of an interim suspension, the student will be suspended from participation in all classes and all other University activities.

- 1. Appeal from the Interim Suspension: In the event that interim suspension is invoked, the student may appeal the action through the College's non-discriminatory grievance procedures as further explained in the "CHP Grievance Procedures" in the CHP Handbook. During the grievance procedures, a hearing will be provided to afford the student with an opportunity to explain why he/she does not constitute an immediate threat to the safety, health or welfare of himself or herself, or other members of the University community or University property, or is not persistently disruptive to the University community.
- 2. Violation of Interim Suspension: Any student who is suspended on an interim basis and returns to the campus and University property without proper authorization to do so or otherwise violates the terms of the interim suspension will be asked to meet with the Dean's designee and his/her department chairman to determine the action to be taken for the violation. The action may range from disciplinary probation to immediate dismissal. Further, the student may be treated as a trespasser. Permission to be on campus for a specific purpose (e.g., to consult with the Vice-Chancellor for Academic Affairs, the student's college Dean or his/her designees, or to participate in the disciplinary procedures against him/her) may be granted in writing by the Vice-Chancellor for Academic Affairs, the student's college Dean or his/her designee.

C. Referral for Psychological Evaluation

The authorized individuals (department chairmen and the Dean's designees) may determine that a student should undergo a psychological or psychiatric evaluation prior to an administrative action or a Grievance Committee hearing. When such determination has been made, the student should be administratively referred to the appropriate agency for such evaluation according to the guidelines outlined below:

- 1. Referral to The Student Wellness Center: When an authorized individual has reasonable cause to believe that a student has severe emotional problems, and when there is reasonable cause to believe that a student's continued presence on campus would present a danger to himself/herself and/or others, or to university property, the staff member may direct the student to consult with the Director of Counseling and Psychological Services (The Student Wellness Program). In the event of a student's refusal to obtain such consultation in a timely manner, interim action may be invoked.
- 2. Procedure: Whenever possible, the student who is being administratively referred to the Center for Counseling and Psychological Services (The Student Wellness Program) will be accompanied by an appropriate professional staff or faculty member from his/her respective College.
- 3. Recommendations: Following an evaluation, the Director of The Student Wellness Program may recommend that the student be placed on an administrative leave of absence from the University to seek psychological/medical treatment if:
 - a) The student has violated institutional regulations and appears to lack the capacity to respond to the disciplinary process, or did not appear to know the nature and wrongfulness of the alleged violation; or
 - b) The student has threatened or attempted harm to himself or herself or another individual, or to University property, and is suffering from a serious mental disorder that is being exacerbated in the campus environment; or
 - c) A student is engaged in behavior exacerbated in the academic setting, which places him or her in serious medical jeopardy producing conditions that cannot be treated effectively without leaving the University.
- 4. Report: The Director of The Student Wellness Program will send a report summarizing the results of the evaluation and any recommended action to the student's Dean or his/her designees. Other appropriate personnel will be notified of any action taken regarding a change in the student's status by the student's Dean's Office (e.g., the University Housing staff member if the student is living in a residence hall).

- 5. Administrative Leave of Absence: If an administrative leave of absence is recommended, the Director of The Student Wellness Program will notify the student's Dean or designee. If the Dean or designee accepts the Director's recommendation, the student shall be immediately placed on a leave of absence from the College of Health Professions.
 - a) Return from Leave of Absence: If a student has been placed on an administrative leave of absence from the College of Health Professions based on recommendations from the Director of The Student Wellness Program, prior to ending the leave and returning to school the student will be required to submit a report to his/her Dean or designee from a licensed mental health practitioner stating that he/she is capable of participating in the College's academic/disciplinary/grievance processes, and/or that the student has received sufficient treatment to be capable of returning safely to the University community. The College of Health Professions may require further evaluation by the Director of The Student Wellness Program or by another licensed practitioner.
 - b) Appeal from Administrative Leave of Absence: After the Dean or designee has received a report from the Director of the Student Wellness program stating that the student is capable of participating in the College's academic/disciplinary/grievance processes, the student may appeal any disciplinary charges through the College's grievance procedures in the "CHP Grievance Procedures" in the CHP Handbook to determine the appropriateness of sanction(s).
- 6. Dismissal: If the Interim Action, Interim Suspension, or Leave of Absence extends for a period of time making it impossible for the student to complete all requirements for the degree or certificate specified in his/her academic plan within the period of time as outlined in the program's academic policy, then the student will be dismissed from the College of Health Professions.

4.24 INCLEMENT WEATHER POLICY

UAMS recognizes that transportation problems result from inclement weather and hazardous road conditions. However, by virtue of our commitment to patient care, academics, and research, this campus never closes. When such conditions occur, the inclement weather alert will be invoked by the Chancellor of the University for the day the policy is to be effective. If the invocation states that the alert applies to day shift workers, then all CHP classes are canceled for that calendar day (day and evening). Canceled classes and examinations will be rescheduled by the department or course faculty at a later time, possibly at night or on weekends. Students assigned to clinical activities should follow the procedures specified by their respective departments. If the inclement weather policy has not been invoked but the road conditions where students live precludes safe travel, students should notify their Department Chairman of their inability to attend class. Students should then work with the course faculty to make up what was missed.

If the alert is invoked sometime after the beginning of the workday, CHP classes scheduled after that alert are canceled. The following day after the weather alert, CHP classes should meet as scheduled unless another alert is invoked for that day. If the alert occurs on the day of CHP registration, the next available workday that is not another UAMS' College registration day will be used to register CHP students. The department chairman will notify students as to which day will be used for alternate registration.

The inclement weather alert should be announced on KARN (AM 920), KUAR (FM 89.1), KARK (Channel 4), KATV (Channel 7), and KTHV (Channel 11).

4.25 COMPUTING SERVICES (STUDENT COMPUTER AND EMAIL RESOURCES)

1. Network access: Access to the UAMS network, including access to the Internet via the UAMS network, online reference and information resources provided through the UAMS Library, and other UAMS computing resources is, generally speaking, restricted to persons having a UAMS network account; i.e., a UAMS network domain logon ID and password. All active UAMS students receive UAMS network accounts. Information about network accounts is provided to new students during the registration or orientation sessions.

Everyone granted access to the UAMS network must review and sign the UAMS Confidentiality Agreement (http://www.uams.edu/AdminGuide/PDFs/3.1.15.pdf). This requirement will also be dealt with during registration or orientation.

Your UAMS network account is to be used only by you. Do not share your UAMS network logon identification and password. This is one of the provisions of the Confidentiality Agreement.

2. Network access passwords

- Passwords for UAMS network accounts must contain a minimum of eight (8) characters and include three (3) of the following four (4) types of characters lower case, upper case, numeric, and special characters (!@.,#\$%, etc.).
- Network passwords may include spaces.
- Passwords should not be overtly based on personal information such as family members' or pets' names, birth dates, or similar information.
- UAMS network account passwords expire every 120 days. As the expiration of your password approaches, you will receive warnings when you log onto the UAMS network. You can change your password at that time. You can also change your password at any time by clicking on "Reset Your UAMS Domain Password" at http://webmail.uams.edu/.
- Sharing your logon information or using someone else's logon information to gain access to the UAMS network or information systems violates UAMS policy and the UAMS Confidentiality Agreement.
- Change your password if you suspect any problems. If you suspect someone else has used your account, notify the IT Security Department at (501) 686-6207.
- 3. Acceptable Use Guidelines for Student Use of UAMS Network and Computer Resources

The UAMS network, computer laboratories, and other computing resources support the teaching, research, clinical care, and service missions of the UAMS. Faculty, staff, and students are encouraged to use these resources as tools for work, learning, communication, and research. It must be recognized, however, that these resources serve a large number of users for a variety of purposes. The following guidelines describe acceptable and unacceptable uses of these resources. They are intended to foster use of these resources that is consistent with their intended purposes and that is responsible, appropriate, efficient, and in accord with legal and ethical standards.

Appropriate and acceptable uses include:

- Use for UAMS course assignments or any project assigned by a UAMS faculty member.
- Use to facilitate UAMS research projects or other UAMS work-related projects.
- Communication with faculty, staff, and students at UAMS to share information.
- Communication with faculty, staff, and students at other universities for the purpose of exchanging educational or general information.
- Use of Internet access for personal information research and personal communication with others at UAMS and elsewhere is acceptable if such use is not excessive, does not interfere with use of resources for education or research, and does not violate any other acceptable use provisions or UAMS policies.

Unacceptable uses include but are not limited to:

- Use of Internet access or other resources for mass transfers or personal files or other materials or for any
 other personal purpose which consumes a large amount of network bandwidth or other network or
 computing resources is unacceptable.
- Unauthorized use of these resources by non-UAMS personnel.
- Use for any purpose that violates U.S. or state laws including copyright laws. (See the Guidelines for UAMS Faculty, Staff, and Students Using Copyrighted Materials at http://www.library.uams.edu/policy/copyguide.aspx.)
- Use which violates any other applicable UAMS policy.
- Downloading information from Internet sites to be used in committing a crime or for any purpose which can result in harm to others.
- Use for any commercial enterprise or for outside employment.

- Creation or propagation of computer viruses.
- Unauthorized entry into other computers or information systems.
- Use in a manner that interferes with or disrupts other users, services, or equipment.

Use of these resources for course assignments, education, research, and UAMS work-related projects has precedence over all other uses. Additional rules governing their use may apply in particular facilities.

4. As a member of the UAMS community, you are also obligated to observe all UAMS policies relating to the use of network and computer resources. Consult the UAMS Administrative Guide at http://www.uams.edu/AdminGuide/index.html to review UAMS policies. See in particular:

Confidentiality Policy Email Access and Usage Wireless Networking Access to Internet http://uams.edu/AdminGuide/PDFs/3 1 15 Confidentiality Policy.pdf http://uams.edu/AdminGuide/PDFs/7 1 12 Email and Access Usage.pdf

http://uams.edu/AdminGuide/PDFs/7.1.13.pdf http://uams.edu/AdminGuide/PDFs/7.2.11.pdf

- 5. Revocation of Access: Violation of the Acceptable Use Guidelines or other UAMS policies may result in loss of your privileges to use the UAMS network and computing resources and/or disciplinary action by your department or college.
- 6. Recordings of Lectures: Lecture and lab presentations are the intellectual property of the faculty and faculty must give their permission for their lecture, lab, and other presentations to be recorded. Some lectures/labs will not be recorded. Recorded lectures/labs may only be posted on websites or other locations approved by your school. Students are prohibited from providing or distributing these materials in any manner print, electronic, or any other media or links to these materials to anyone outside of their UAMS classes.
 - Failure to abide by this policy may constitute a copyright infringement which may have legal consequences. Furthermore, failure to abide by this policy may result in disciplinary action by your school including dismissal.
- 7. Internet Access: Access to the Internet is provided through the UAMS network. Other than in particular cases, such as the public access PC's in the UAMS Library, you must log onto the UAMS network in order to gain access to the Internet. Moreover, further restrictions may be enforced in clinical work areas or other areas in which more stringent security requirements apply.
- 8. Email: All students receive UAMS email accounts. You will receive information about your email account during the registration or the orientation process. Email services for UAMS students, faculty, and staff are provided through Microsoft Exchange and Outlook. You can access your email account via the Web at http://webmail.uams.edu/. This requires that you have an active UAMS network logon ID and password.
- 9. Emergency Notification Listserv: UAMS provides an email messaging process (a listserv) which is used to send emergency alerts to UAMS students in circumstances on campus which pose an imminent and serious threat. It is expected that such alerts will very rarely, if ever, occur. You can designate (subscribe) email addresses and any other email-enabled messaging services to which you subscribe (text messaging, paging, etc.) to be included in the listserv. You do NOT need to subscribe your UAMS email address. Alerts will automatically be sent to UAMS student email addresses. You will receive more information about the listserv and how to subscribe at registration or orientation. If you already have a UAMS network account (UAMS user name and password), you can subscribe by going to the subscription website: https://online-apps.uams.edu/info/Home.aspx. Click on the To Do tab.
- 10. Clinical Information Systems: Access to clinical information systems is only available after appropriate training. Logon IDs and passwords for access to these systems will be made available to students when training has been completed.
- 11. Technical Support: For resolution of issues related to your UAMS network or email accounts, access to clinical information systems, and computer security provisions contact the UAMS Technical Support Center at 686-8555 or TechSupportCenter@uams.edu. Support Center staff will answer your questions or direct your call or request to the appropriate personnel.

12. Computer Laboratories: Computers for student use are available in several areas in the UAMS Library. Two of these areas are available for student use 24 hours a day. After-hours entry into these facilities is controlled by card-swipe controlled entrances. A current UAMS student ID badge is required to enter. These facilities also incorporate door alarms and security cameras for additional security.

Computers in the Library provide access to the Library resources, the Internet, and Microsoft Office applications. A wide variety of computer-based educational resources and other software are also available through the Library Learning Resource Center.

- In addition, the college may provide access to computers for their students in the CHP facilities and the student area of the Department of Audiology and Speech Pathology.
- 13. Computer Classrooms: UAMS educational facilities include several computer classrooms used for scheduled computer-based classes and exams. These computer classrooms are equipped with security provisions including card-swipe door access devices, door alarms, and monitored security cameras. Use of these facilities is scheduled through the Office of Academic Services and is ordinarily restricted to UAMS curricular activities or other UAMS sponsored activities.

4.26 USE OF SOCIAL NETWORKING SITES

The University of Arkansas for Medical Sciences recognizes that social networking websites and applications such as Facebook, MySpace, Twitter, etc. are important and timely means of communication. Students who use these websites and applications must be aware of the critical importance of privatizing these websites and applications so that only trustworthy "friends" have access to the sites. They must also be aware that posting certain information is illegal. Violation of existing statutes and administrative regulations may expose the offender to criminal and civil liability, and punishment for violations may include fines and imprisonment. Offenders also may be subject to adverse academic actions that range from a letter of reprimand to probation to dismissal from the University.

The following actions are strictly forbidden:

- Students may not report the personal health information of patients. Removal of an individual's name does not constitute proper de identification of protected health information. Furthermore, inclusion of data such as age, gender, race, or date of evaluation may still allow the reader to recognize the identity of a specific individual.
- Students may not report private (protected) academic or financial information of another student or trainee. Such information might include, but is not limited to: course grades, narratives evaluations, examination scores, adverse academic actions, or financial aid information.
- In posting information on social networking sites, students may not present themselves as official representatives or spokespersons for the University of Arkansas for Medical Sciences or their college, department, or program.
- Students may not represent themselves as another person.
- Students may not utilize websites and/or applications in a manner that interferes with educational or work commitments.

In addition to the absolute prohibitions outlined above, the following actions are <u>strongly discouraged</u> as these are considered unprofessional and reflect poorly on the individual, the healthcare profession, program, department, college, and the University of Arkansas for Medical Sciences:

- Display of vulgar language
- Display of language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity, sexual orientation, or disability.
- Presentations of photographs that may reasonably be interpreted as condoning irresponsible use of alcohol, substance abuse, or sexual misconduct.

The following actions are strongly encouraged:

- Students should use privacy settings to limit the unknown or unwanted access to the student's profile or application.
- When listing an email address on a social networking site, students should use a personal email address (not a uams.edu address) as the primary means of identification.

When using these social networking sites, students are strongly encouraged to present themselves in mature, responsible, and professional manners. Discourse should always be civil and respectful. No privatization measure is perfect and undesignated persons may still gain access to the site. Once an item is posted on a networking site, it may not be easily removed. Future employers (e.g., residency or fellowship program directors, representatives of employers) may review these sites when considering potential candidates for employment.

SECTION 5.0

FINANCIAL AID

5.1 GENERAL INFORMATION

Student financial aid programs are intended to provide financial assistance for educational purposes. A combination of types of financial aid is available to students based on their needs and is divided into the following categories:

- 1. **Scholarships:** To be eligible for any of the CHP scholarships you must be enrolled at least half-time (6 SC or more) during the semester you expect to receive the scholarship. You will need to provide a copy of your degree plan and a confirmation from the department chairman with the application. Contact the College of Health Professions Office at 686-5730 for additional information.
- 2. **Federal Financial Aid:** The UAMS Student Financial Services Awards Division processes aid offered through the Title IV Federal Aid programs and the Arkansas Department of Higher Education. Generally, this aid is divided into the following categories:
 - a. **Grants:** Grants do not have to be repaid and are usually awarded to students who have exceptional financial need.
 - b. **Loans:** Loans MUST be repaid. Principal and interest are usually deferred until the student ceases to be enrolled at least half time; however, certain loans require interest and/or principal payments while students are in school.

To apply for grants and loans, the student should complete the Free Application for Federal Student Aid (FAFSA). This application is on-line at: www.fafsa.ed.gov.

UAMS Student Financial Services Awards Division is located in the Administration West Building, first floor, Room 1.120. For more details about these financial aid programs, visit our website at: http://www.uams.edu/studentfinancialservices/.

To request a packet or additional information, call the UAMS Student Financial Services Awards Division at (501) 686-5451; office hours are Monday through Friday, 8:00 AM to 4:30 PM. It is not necessary to make an appointment to visit with the Awards Division staff, and any student, prospective student, or parent may visit or call at any time.

Students are encouraged to apply for financial aid (after filing a federal tax return) between January and March of the academic year that they plan to attend. Acceptance into a program of study is not required to apply for financial aid, and it is strongly recommended that students complete the Free Application for Student Financial Aid (FAFSA) as soon as they decide to pursue their education.

In order to receive financial aid, according to federal regulations, eligible students must maintain satisfactory academic progress requirements. Please refer to the policy on the Student Financial Services website regarding satisfactory academic progress requirements.

5.2 SATISFACTORY ACADEMIC PROGRESS

A student receiving Federal Title IV financial aid or other financial aid directly administered or certified by the University of Arkansas for Medical Sciences must maintain satisfactory academic progress (SAP) toward the completion of a certification or degree program of study. Satisfactory academic progress for financial aid recipients is measured by both quantitative and qualitative standards and is an assessment of a student's cumulative academic record at UAMS.

To ensure Satisfactory Academic Progress, students must meet all of the following standards and requirements.

- Minimum Cumulative Grade Point Average (GPA)
- Minimum Completion Standard for Attempted Credit Hours
- Maximum Time Frame for Degree Completion

The Student Financial Services Awards Division will request confirmation from each college verifying SAP for those recipients of financial aid. The verification will be measured by both quantitative and qualitative standards. Students must maintain a minimum 2.00 cumulative grade point average measured on a 4.00 scale at the end of each semester. In addition to maintaining the specified grade point average, students must complete their degree within a maximum time frame outlined by the specific program enrolled in. Students are expected to complete 67% of their cumulative attempted hours. Completing less than 67% of the cumulative attempted hours and/or scoring less than 2.0 GPA will result in financial aid probation for the next term of enrollment. At the end of the next term of enrollment, if the student has not met the minimum requirements, the student will be placed on Financial Aid Suspension.

A student is deemed to have met the qualitative requirements for satisfactory academic progress for financial aid purposes provided the student's academic status is not one of Academic Dismissal.

Transfer Credit: For transfer students, the total years of credit hours includes time spent at the previous institution, to the extent that credit hours are transferred and applied toward the degree objective at this institution. Applicants must qualify and meet the individual college's admission requirements prior to enrollment.

Unofficial Withdrawals: An unofficial withdrawal is determined by comparing the SSCR to our OASIS financial student database, or by notification from the registrar, or by confirmation of an unearned F.

The registrar will request faculty to provide the last date of attendance for a student that is considered unofficially withdrawn. A Title IV Return of Funds calculation will be processed and may result in a portion of their aid being returned to the federal government.

Course Repetitions: Students may repeat courses but will be placed on financial aid probation if:

- The student's GPA is below the minimum requirement to proceed in the curriculum.
- 2. The student does not make incremental progress as determined by the college and/or the Awards Division.
- 3. The student reaches the maximum time frame for completion of his/her program of studies.

Students who fail to meet the SAP requirements will be notified that their financial aid has been denied. Each student denied aid will automatically be given an option to appeal to the Awards Division. Each appeal will be reviewed to determine whether there are circumstances beyond the student's control that prevented him or her from maintaining satisfactory progress. The decision of the Awards Division is final in appeal matters.

If a student is denied aid, an "Alert Flag", will be placed on his/her account in our financial aid software, ProSam, to monitor/manage any requests for future awards.

SECTION 6.0

ACADEMIC INFORMATION

6.1 ACADEMIC REQUIREMENTS

6.1.1 Progression

For a student to progress in a CHP professional program from one semester to the next, including progression from one year to the next, each semester he/she must achieve a grade of "C" or higher in all professional courses designated by the respective program (see individual departmental sections of the current CHP Catalog) as prerequisite to progression to subsequent course work. In addition, students are required to maintain a program grade point average (PGPA) of at least 2.0, with the following stipulations:

- 1. A first semester student who meets the specific course grade(s) and other program requirements but has not maintained a PGPA of 2.0 for all courses taken since entering the program will be allowed to progress on probation to the second semester. Since a student cannot be on probation for two consecutive semesters, however, a student on probation because of insufficient PGPA at the end of the first semester must raise his/her PGPA to at least 2.0 by the end of the next (probationary) semester in order to remain in the program. Students failing to do so will be dismissed from the College.
- 2. For a student who is in the **second or subsequent semester** of a program to continue to progress, however, he/she must maintain a PGPA of not less than 2.0 for all courses taken since entering the program, including both professional and concurrent courses. These students, therefore, are **not** eligible for probation if their PGPA falls below 2.0 (eligibility for probation on other grounds is described elsewhere in this Handbook, the CHP Catalog, and in various program materials). If a student fails to meet this requirement, he/she will be dismissed from the College.

6.1.2 Authorization for Progression with an Incomplete ("I") Grade in a Pre-requisite Professional Course

If a student receives an incomplete ("I" grade) in a program pre-requisite course, is subsequently allowed to enroll in the next semester of a program, fails to replace the "I" with a passing grade, and is administratively dismissed during the semester and not allowed to complete course work for that semester, the college may be responsible for repaying any and all financial aid received by the student for that semester. Consequently, for students who are receiving financial aid at the time of registration who also have a grade of "I" in a professional course from the previous semester that is a prerequisite to progression to subsequent course work, there will be three options:

- 1. The student may not be allowed to register for classes.
- 2. The chairman of the department in which the student's program resides may provide written authorization for the student to register for courses; however, he/she will be not be eligible to receive financial aid until the grade of "I" is converted to a grade of "C" or better. In this option, the student may be administratively withdrawn from the program at any time during the semester should he/she not meet the standards of progress for the pre-requisite course for which they received an "I" grade.
- 3. The department chairman may provide written authorization for the student to enroll and continue in the program and complete all required current semester course work. In this option, students will be eligible to receive the financial aid for which they have been approved, assuming they meet all other financial aid requirements. If, at the conclusion of the semester, the student has failed to convert the "I" to a grade of "C" or better, the student will not be allowed to continue in the program. Students will, however, receive grades earned for other course work that is completed during the semester. All other departmental and college policies regarding student progression remain in effect.

For all these options, permission to enroll in classes for the semester following the one in which an "I" grade was awarded must be based on a review by the chairman of the student's past academic performance, progress in the curriculum, amount of material and other requirements yet to be completed, and any special circumstances regarding the student and the reason for the "I" grade (e.g., illness, injury, death in the family). The option selected should reflect the chairman's conclusion that it is the one least likely to result in the college having to bear the cost of repaying the student's financial aid award, while recognizing the importance of upholding the academic standards and the rules and regulations of the university, college, and program as well as assisting the student in achieving his/her academic objectives to the extent possible consistent with the foregoing considerations.

6.1.3 CHP Leave of Absence Policy

The CHP Leave of Absence Policy exists to bring some standardization to the process of requesting a Leave of Absence in the College. Some programs within CHP also have a Leave of Absence policy. Should there be a difference between the CHP Leave of Absence Policy and that of the program, the program policy takes precedence.

With approval of the student's program director and the associate dean for academic affairs, a student may take a Leave of Absence for non-academic reasons such as family care, serious illness or accident, or other extenuating reasons. A Leave of Absence may be granted for up to one year to students in good academic standing. The Leave of Absence offers the student the opportunity to leave school temporarily with the assurance that studies can be resumed with minimal administrative difficulty.

To initiate a Leave of Absence, the student must (1) discuss his/her plans with the program director and (2) then make a formal request in writing (see Request for Leave of Absence form) to the associate dean for academic affairs. The formal request must include a plan by the program director or department chair to integrate the student into the program upon completion of the leave and verification that the student is currently in good academic standing. The associate dean will approve or deny the leave request and communicate the outcome in writing to the student and program director or department chair. If the student is not satisfied with the decision of the associate dean, he/she may appeal to the dean of the college within five working days of being informed of the associate dean's decision. The appeal must be in writing and state the rationale for reconsideration.

If a student is granted a Leave of Absence before the end of a semester, a grade of I (Incomplete) may be recorded for each course that has not been completed, on the condition that the student is in good academic standing in the course at the time of the Leave of Absence, *i.e.*, the student's grade in each course is satisfactory by the program's published standards. The student is required to complete requirements for these courses under conditions prescribed by the program director or department chair.

A student must inform the program director or department chairman in writing of his/her intention to return by the program application deadline to assure clinical space for the returning student.

Students on Leave of Absence are not eligible for student health services including visits to the Wellness Center. They do, however, retain access to their UAMS Internet account.

A Leave of Absence does not automatically override a program requirement to complete the degree within a required period of time. However, the program director or department chair may take the Leave of Absence into consideration if extension is requested.

Financial obligations to the University for past periods of enrollment are not waived by a leave of absence. Certain regulations exist with regard to the financial impact of a leave of absence. Anyone contemplating a leave is advised to look into the regulations and discuss them with personnel in Student Financial Services.

See: http://www.uams.edu/chp/current students/ for the Leave Request Form.

6.1.4 Denial of Entry into Clinical Phases

A grade of "C" or higher is required for designated courses which are prerequisites to subsequent clinical course work. Students failing to achieve this requirement may be denied entry into subsequent course work.

6.1.5 Academic Probation and Dismissal

If at the end of any semester, a student's grade point average for the total number of hours attempted for that semester falls below 2.0, he/she will be placed on College academic probation for the following semester providing he/she meets the progression requirements (see above). At the end of the probationary semester:

- 1. If the student achieves the minimum cumulative grade point average, he/she will be reinstated in good standing, or
- 2. If the student fails to achieve the minimum cumulative grade point average, (i.e., 2.0) he/she will be dismissed from the College.

Departments reserve the right to impose more stringent requirements beyond these minimal provisions for the College as a whole. Students who fail to meet departmental regulations pertaining to academic standing will be placed on departmental academic probation or dismissed and are subject to the policies regarding progression within their respective departments to regain or retain student status.

6.1.6 Clinical Probation and Dismissal

Since patient well-being is a major concern of the University, action will be taken when a student's clinical practice poses a potential threat to patient health, welfare, or safety. Students, therefore, are subject to the Department's specific regulations governing clinical practice and may be placed on clinical probation by the Department and/or dismissed from the Department and the College for unsatisfactory clinical behavior as defined by his/her Department. The specific regulations are contained in the respective departmental handbook and/or clinical course syllabi and distributed to students prior to their entering the clinical area.

6.1.7 Readmission

Each department has a policy on readmission to its program(s). The policy includes voluntary and involuntary withdrawal and continuous enrollment. Please review the department handbook or contact the department chairman for specific policy.

Students who withdraw or are dismissed from the CHP for any reason and wish to be considered for readmission to the same program in the CHP (if readmission is permissible under the circumstances in question) must follow the respective department's policy on readmission to its program(s). In addition, the College policy states that the Cumulative Grade Point Average (CGPA) is used to determine eligibility for admission. The CGPA is based on all courses taken prior to applying for admission to a CHP program. Students seeking readmission will be considered "new" applicants to the program, and the CGPA will be calculated on all courses taken to date, including those taken in the CHP prior to the reapplication.

Note: The CGPA differs from the transcript GPA (TGPA) that students receive who are enrolled in a CHP program. The TGPA is based on specified prerequisite courses (a subset of all of the courses taken prior to admission to the CHP) and the professional courses subsequently taken in the CHP. The TGPA is not used when determining eligibility for readmission.

6.2 ACADEMIC REGULATIONS

6.2.1 Course Load

The maximum load is twenty (20) semester credits for the fall or spring semester, and sixteen (16) semester credits for the summer session(s). To take a course load exceeding the maximum, approval by the Department Chairman is required. Students may enroll for classes on other campuses in the University of Arkansas system as a part of their normal course load, but such concurrent enrollment must be approved by the appropriate CHP Department Chairman prior to registration.

6.2.2 Registration

Formal admission by the Department/College as well as completion of registration is a prerequisite to class attendance. Registration after the close of the announced registration period requires the payment of a late registration fee of ten percent (10%) of the applicable tuition. Registration is not permitted after the fifth day of class each semester*. A student is not considered registered until the appropriate forms have been filed with the Office of Student Affairs and payment or special arrangements regarding tuition and fees have been made with the University Treasurer.

*Class days start on the date shown on the General College Calendar, and for purposes of late registration and the add/drop policy, the number of class days specified above refers to the number of calendar days following the day on which classes started (exclusive of weekends and holidays) regardless of how many, if any, class sessions in a particular course were held.

6.2.3 Concurrent Enrollment

Concurrent enrollment at more than one campus is permitted under certain circumstances. The current policy requires applicable fees to be paid to each campus. There is no cap on tuition when combining campus fees.

6.2.4 Change of Registration

A student may add a course after the registration period only by written request approved by the Department Chairman and filed with the Office of Student Affairs by the fifth day of class. A student may drop a course after the fifth day of class only by written request approved by the Department Chairman and filed with the Office of Student Affairs.

6.2.5 Repeating a Course

When a course is repeated, the grade earned in the repeated course is used to assess the student's fulfillment of the academic plan. Though all enrollments, original and repeat, will be shown on the student's transcript, only the grade in the repeated course (even if it is lower than the first) will be used to calculate cumulative grade point averages (CGPA). Courses in the college can only be repeated once.

6.2.6 Withdrawal

A student withdrawing from the University must complete the University's Student's Clearance Certificate and have an exit interview with a staff member in the College's Office of Student Affairs. If a student does not formally withdraw by following the above procedures, a grade of "F" will be assigned in all courses in which the student has not completed all requirements.

6.2.7 Add/Drop Policy and Implementation

Students have until the close of the announced registration period to add or drop courses for the subsequent semester without penalty.

A student may add courses, if approved by the course instructor and the student's faculty advisor/department chairman, within the ten working days after the close of registration. The appropriate form for addition of courses may be obtained from the CHP Office of Student Affairs. Completed forms and a \$10 fee must be filed with the CHP Office of Student Affairs.

A student may drop a class using the appropriate form with the required signatures for a \$10 fee until the fifth day of class*. No notation will appear on the transcript concerning the deletion of a course. The change(s) in course work will be assessed or remitted at 100% of the applicable tuition. After the fifth day and at least one week before the end of the semester, a course can be dropped with the fees adjusted based on "refund of fee policy" found in the current year's catalog.

Students who withdraw after the fifth day of class and by the midpoint of a course will receive a "W"; those who withdraw after the midpoint and by the deadline for withdrawals will receive either a "WP" or "WF". Students who do not withdraw by the deadline will receive an "F" in the course. The deadlines for course withdrawals are five working days before the end of the semester or December 7, 2012 for the fall semester, May 10, 2013 for the spring semester, and August 2, 2013 for the summer semester.

*Class days start.....as is written in the Handbook.

6.2.8 Withholding of Grades and Transcripts

The Registrar is authorized to withhold grades and transcripts and refuse registration to any student or former student who fails to return athletic, military, library, or other University property entrusted to his or her care or who fails to submit all transcripts from attended colleges, or who fails to comply with rules governing the audit of student organization accounts, or who has failed to pay any fees, tuition, room and board charges, fines or other charges assessed against him or her by a University official or by the campus judicial system, or who fails to officially withdraw from the University prior to graduation.

6.2.9 Graduation

The student must file an application for graduation and pay the graduation fee at least thirty (30) days prior to the end of the semester in which the student wants to graduate. If the student wants to participate in the annual commencement exercise, the application for graduation and the graduation fee must be received by the Registrar no later than January 31 of the year in which commencement occurs. Forms are provided for this purpose at spring semester registration and may also be requested from the Office of Student Affairs.

Students must complete, by the end of spring semester, all degree or certificate requirements, except for professional (i.e., CHP) courses that will be taken in the following summer session, in order to be eligible to participate in Commencement as a candidate for that degree or certificate.

At the conclusion of the semester in which degree/certificate requirements are completed, all official transcripts must be on file in the CHP Registrar's Office. The student must then complete the University's Student's Clearance Certificate. Failure to do so will result in withholding of grades, transcripts, and diplomas. Degrees are awarded on designated dates in fall, spring, and summer. Diplomas are issued on those dates.

6.2.10 Classification of Courses

A four-digit numbering system is used to classify each course. The first digit identifies the level of the course content (difficulty of course content, not necessarily the year in which the course is taught): 1 for freshman; 2 for sophomore; 3 for junior; 4 for senior; 5, 6, or 7 for graduate. The second digit is the number of semester credit hours except for courses in Audiology and Speech Pathology (ASP). The last digit of ASP courses indicates the semester credit hours. (Courses with greater than nine (9) semester credit hours will be identified by the letter "X" in place of the second digit.* Courses with a variable number of semester credit hours will be identified by the letter "V" in place of the second digit). The third and fourth digits are assigned by the Department to identify specific courses.

*In cases where the letter "x" replaces the second digit, the number of semester credit hours will be indicated in the course descriptions.

6.2.11 Credit Hours

The standard unit of measurement for course work in the College is the semester credit. One semester credit hour is equal to 750-800 minutes of classroom instruction, 2250-2400 minutes of laboratory instruction, or 3750-4000 minutes of clinical instruction.

6.2.12 Change of Name/Address

The student must report in writing any change in name or address to the department chairman and to the Office of Student Affairs within ten (10) days of the change.

6.2.13 Auditing a Course

When a student audits a course, s/he must register, pay the appropriate fees, and be admitted to class on a space available basis. Instructors will notify students of the requirements for receiving the mark of "AU" for audited courses. If the student is not satisfying the requirements specified by the instructor, the instructor or Dean may drop a student from the course being audited. The student will be notified if this action is taken.

The only successful grade or mark which may be given is "AU" and no course credit will be awarded. Courses completed with grades of "AU" are not counted toward completion of degree requirements.

The cost for auditing is the same as taking classes for semester credit. The last day to change from audit to credit is the fifth (5th) calendar day of classes. Changing from credit to audit must be done during the first one-half of the course and with the approval of the chairman of the department. Changing from credit to audit may affect the student's eligibility to receive financial aid or the amount of the financial aid awarded. Students will be responsible for the return of any financial aid due as a result of the change from credit to audit.

6.2.14 Master of Science in Clinical Nutrition

Master of Science in Communication Disorders (Speech Pathology) Master of Science in Genetic Counseling Doctor of Philosophy in Communication Sciences and Disorders

Students pursing the Master of Science degree in Clinical Nutrition, the Master of Science degree in Communication Disorders (Speech Pathology), Master of Science in Genetic Counseling, and the Doctor of Philosophy in Communication Sciences and Disorders are considered to be students in the Graduate School who are taking courses offered by the faculty of the College of Health Professions. Accordingly, the Graduate School Student Handbook is to be considered the primary handbook for all students in these programs. All provisions of the Graduate Student Handbook, including the grievance procedures, are the authority applicable to students pursing this certificate or degree.

6.2.15 Academic Forgiveness Policy

Applicants to undergraduate programs in the College of Health Professions (CHP) may request consideration under the Academic Forgiveness Policy. This policy does not apply to currently enrolled students in the CHP or to admission to a CHP graduate program.

Under the Academic Forgiveness Policy, applicants to undergraduate programs may request that all academic credits, as well as the grades assigned to them, that they earned more than seven (7) years before the anticipated date of registering for classes in the CHP program to which they have applied shall not be considered by the CHP in determining 1) their acceptance to that program or 2) the prerequisites, electives, or professional courses they have completed. If the request is granted, all courses taken at all colleges and/or universities that are more than seven (7) years old by this date will be removed from consideration irrespective of the grades earned. That is, the Academic Forgiveness Policy may not be applied to selected courses in a given term or terms or to only those with certain grades. Thus, none of the courses excluded by granting such a request may be counted toward completion of any prerequisites, electives, or professional courses.

If the request for academic forgiveness is granted, only academic work completed less than seven (7) years prior to the date of registration in the intended program will be used in calculating the applicant's grade point average (GPA) and determining transfer credit for admissions. This will be so noted on the CHP academic transcript if the applicant is admitted. Academic forgiveness may be granted only once to any student. Academic forgiveness is not to be confused with the prerogative each CHP department has to selectively decline to accept for transfer credit any course or courses taken more than seven (7) years before the intended date of registration on the grounds that the knowledge in the discipline(s) in question, and thus the content of the course(s) as currently taught, has changed so extensively in the interim that it(they) no longer will fulfill the prerequisite or other transfer requirement for the given CHP program.

Applicants seeking consideration under the Academic Forgiveness Policy must complete and submit the Petition for Admission under the Academic Forgiveness Policy form to the CHP Admissions Officer prior to the application deadline of the specific CHP program to which the individual is applying. Petitions submitted after the program's application deadline will not be reviewed. Official transcripts from all colleges and universities attended must also be provided. The petition for Academic Forgiveness and the transcript(s) will be reviewed by the CHP Admissions Officer who calculates the GPA for program admissions and determines the courses that meet the degree or certificate requirements. The petition and transcript(s) are then forwarded for approval to the CHP Associate Dean for Academic and Student Affairs and finally to the Dean of the College. Applicants will subsequently receive written notification of the determination of their Academic Forgiveness request.

The Petition for Admission under Academic Forgiveness Policy form and official transcripts from all colleges and universities attended should be sent to: Admissions Officer, College of Health Professions, University of Arkansas for Medical Sciences, 4301 West Markham Street, #619, Little Rock, AR 72205. For additional information: (501) 686-5730.

6.3 REFUND OF FEES

Students officially withdrawing may be eligible for a refund calculated as a percentage of the registration fees. Such refunds are determined according to the schedules below. Special fees are not refundable. Refund of housing deposits and overpayment of rental fees are made after the occupant has checked out of University Housing and after all Housing Policy requirements have been met. A new system-wide policy is under consideration at this time. Please check with the CHP Registrar to determine the status of this policy.

Students officially <u>withdrawing from the University</u> during a fall or spring semester shall be entitled to a refund of registration fees as follows:

Fall	and	Spring	Semesters
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Semester	Students Who Withdraw:	Will Receive Refund of:
	by August 22	100&
Fall	by August 29	50%
	after August 29	0%
	by January 16	100%
Spring	by January 24	50%
	after January 24	0%

Students officially dropping one or more courses and who <u>continue</u> to <u>be enrolled</u> in the University during a fall or spring semester shall be entitled to individual course refunds as follows:

Fall and Spring Semesters

Semester	Students Who Withdraw:	Will Receive Refund of:
Fall	by August 22	100&
Fall	after August 22	0%
Consider of	by January 16	100%
Spring	after January 16	0%

Students who drop a course or officially withdraw from the University during a summer session shall be entitled to an adjustment as follows:

Summer Session

Semester	Students Who Withdraw:	Will Receive Refund of:
1 – 4 weeks	by May 28	100&
	after May 28	0%
5 – 6 weeks	by May 29	100&
	by June 3	50%
	after June 3	0%
7 – 9 weeks	by May 30	100%
	by June 5	50%
	after June 5	0%
10 – 12 weeks	by June 3	100%
	by June 10	50%
	after June 10	0%

The date you file a completed Application for Official Withdrawal at the Dean's Office determines the amount of your refund. An Application for Official Withdrawal is not considered complete without all necessary signatures.

Class days start on the date shown on the General College Calendar, and for purposes of refunds, the number of class days specified above refer to the number of calendar days following the day on which classes started (exclusive of weekends and holidays) regardless of how many, if any, class sessions in a particular course were held.

Failure to withdraw officially from a course will adversely affect your transcript and grades. See the Section 6.1.1 on Progression for details.

If Student Financial Services receives an authorized refund request for payment of tuition and fees, the following schedule is followed:

- If payment was made by check, the refund will not be processed until 30 days from the date the check was deposited.
- If payment was made by credit card, the refund will be processed within 24 hours provided the student furnishes his/her credit card information.
- For all other forms of payment, the refund will be processed within 24 hours.

6.4 REFUND OF TUITION FOR PHYSICIAN ASSISTANT PROGRAM

Students officially withdrawing may be eligible for a refund calculated as a percentage of tuition. Such refunds are determined according to the schedule below. Fees are not refundable. Refund of housing deposits and overpayment of rental fees are made after the occupant has checked out of University Housing and after all Housing Policy requirements have been met.

Students officially withdrawing from the Physician Assistant Program during any semester shall be entitled to a refund of tuition as follows:

Withdrawal	Refund
from Semester Start Date	of Tuition
Within 1 - 5 days	100%
Within 6 - 10 days	50%
After 10 days	0%

The date a student files a completed Application for Official Withdrawal at the Dean's Office determines the amount of refund. An Application for Official Withdrawal is not considered complete without all necessary signatures. Failure to withdraw officially from a course will adversely affect grades on official transcripts.

If Student Financial Services receives an authorized refund request for payment of tuition and fees, the following schedule is used:

- If payment was made by check, the refund will not be processed until 30 days from the date the check was deposited.
- If payment was made by credit card, the refund will be processed within 24 hours provided the student furnishes credit card information.
- For all other forms of payment, the refund will be processed within 24 hours.

6.5 RESIDENCY STATUS

Students are classified as "resident" or "non-resident" students for fee purposes on the basis of their legal domicile or that of their parents if they are minors. In general, a student must be a bonafide domiciliary of Arkansas for at least six (6) consecutive months prior to registration to be classified as an "in-state" student. Complete regulations and forms for requesting a change in classification for this purpose may be requested from the Office of the Vice Chancellor for Academic Affairs at (501) 686-5689.

6.6 TRANSCRIPTS

6.6.1 Transcript Request from the College

Requests for transcripts can be submitted to the CHP Office of Student Affairs between 8:00 AM – 4:30 PM, Administration West Building, Third Floor, or sent to the Office through mail or by fax (if the student signs the fax request). Please allow 3-5 working days for receipt of the requested transcript. There is no fee for transcripts; however, no more than five (5) transcripts may be requested per day.

6.6.2 Submission of Transcripts to the College

Official transcripts from other institutions, required of CHP applicants or students, must be sent to the CHP Office of Student Affairs directly from those institutions. Transcripts brought by the applicant or student are not "official" and will not be accepted.

6.7 CERTIFICATION/LICENSURE/REGISTRY REQUIREMENTS

Successful completion of a CHP program does not itself insure certification/ licensure/registry eligibility. Students are advised to become familiar with the discipline-specific requirements published by each certification/licensure/registry agency.

6.8 TUITION WAIVERS

Dependents of Arkansas residents who have been declared prisoners of war or killed or missing in action may have the tuition and fees waived under certain circumstances. Contact the Office of Student Affairs at (501) 686-5730 for additional information.

SECTION 7.0

COLLEGE ADMINISTRATION

Douglas L. Murphy, Ph.D. Dean Administration West Building, Third Floor (501) 686-5731

Susan Long, Ed.D. Associate Dean for Academic Affairs Administration West Building, Third Floor (501) 686-5732

Tom Pilgreen, Ph.D. Associate Dean for Student Success Administration West Building, Third Floor (501) 686-5731

Bill Woodell, M.H.S.A. Associate Dean for Administrative Affairs Administration West Building, Third Floor (501) 686-5732

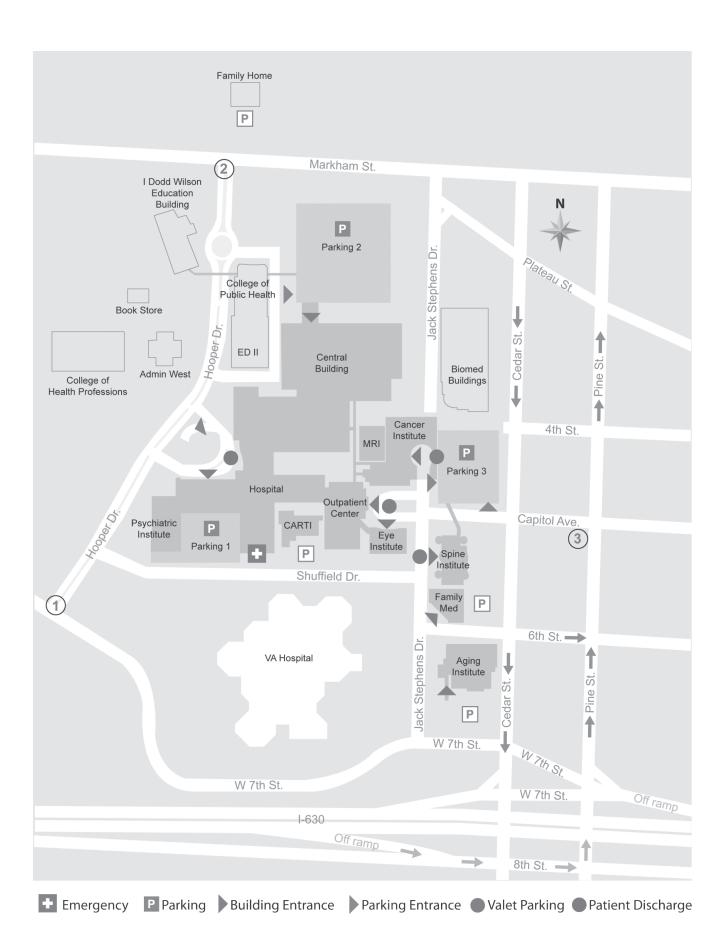
John C. Gocio, M.D. Associate Dean for VA Affairs VA Medical Center at Little Rock Chief of Staff Office, Room 2C-177 (501) 257-5300

Phyllis A. Fields, M.Ed. CHP Director of Student Services Administration West Building, Third Floor (501) 686-5730

Phyllis E. Lloyd, B.A. CHP Registrar Administration West Building, Third Floor (501) 686-5730

Monna L. Stiles, B.A. CHP Admissions Officer Administration West Building, Third Floor (501) 686-5730

Susan K. Williamson, M.A. Student Recruiter Administration West Building, Third Floor (501) 686-5730



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