

### **Practical Nursing Program**

# Information Guidelines 2023-2024

**Application Deadline for Practical Nursing Program: April 15, 2024** 

Last Revised: 7/2023

#### Arkansas Northeastern College Practical Nursing Program Information Guidelines 2023 – 2024

The Practical Nursing (PN) Program at Arkansas Northeastern College (ANC) is a 10.5-month program that prepares students to become Licensed Practical Nurses (LPN). The program consists of nursing courses combined with client care in the clinical settings that include hospitals and other health care facilities in the service area. The nursing courses integrate application of the nursing process, communication skills, nutrition, pharmacology, and drug administration in the care of clients. Legal and ethical responsibilities along with current trends in nursing and health care are integrated throughout the curriculum. Upon successful completion of the practical nursing program, students graduate with a Technical Certificate in Practical Nursing and contingent on meeting application criteria are eligible to take the National Council of Licensure Examinations for Practical Nursing (NCLEX-PN) for licensure. The ANC Practical Nursing Program is approved by the Arkansas State Board of Nursing and selects a class beginning in the Fall semester each year. ANC does not allow advanced placement into the Practical Nursing Program.

#### **College Admission:**

If no classes have ever been taken at ANC, complete the following and have submitted to the Registrar's Office at 2501 South Division P.O. Box 1109 Blytheville, AR 72316-1109 by March 31:

- College admission application.
- o Official High School Transcript or GED with scores.
- Official transcripts from any college(s) previously attended.
- o Immunization record showing proof of two MMRs.

NOTE: Admission to the College does not guarantee admission into the Practical Nursing Program.

#### **Practical Nursing Program Admission Criteria:**

Admission to the Arkansas Northeastern College PN program is a selective process. In order to be considered for admission, students must meet the following minimum criteria:

- Meet with the Nursing and Allied Health Advising Specialist to ensure any required College Admission Placement Tests (ACT, ACCUPLACER) meet the minimum skill level.
- Attend all scheduled Advising sessions and complete required Advising Check List with the Nursing and Allied Health Advising Specialist.
- Complete and submit the Practical Nursing (PN) Application for Admission to the Nursing Office on the Main campus (2501 South Division P.O. Box 1109 Blytheville, AR 72316-1109) by April 15.
- Successfully complete prerequisite courses as outlined in the PN Curriculum Plan.
  - Mathematical Applications for Allied Health OR College Algebra
  - Body Structure and Function or Anatomy and Physiology (A&P) I and II with Labs
    - Science classes must be completed within 5 years of admission to the PN Program
- Submit unofficial transcripts from any college(s) previously attended to the Nursing Office on the Main Campus.
  - o Transcripts must include the required prerequisite courses.
  - Updated transcripts must be submitted at the end of the spring semester to include any required prerequisite courses.
- Have a cumulative 2.0 minimum grade point average on all college course work attempted, including transfer work and excluding developmental education courses.

- Must have ANC GPA of 2.0 or greater to graduate from ANC.
- TEAS Preadmission Exam: Test of Essential Academic Skills (TEAS) Exam-minimal composite score of 58.7%
  - o See preadmission testing information below regarding TEAS exam for more information
- Read the following, sign, and submit to the Nursing Office with the PN Application Packet:
  - Practical Nursing Program Statement of Responsibility
  - o Understanding of Functional Abilities
  - Criminal Background Check Verification and Arkansas State Board of Nursing Nurse
     Practice Act Subchapter 3 Licensing Criminal Background Checks
- Students applying to the PN program who have previously been enrolled in another Nursing or Allied Health Program or Course at ANC must have a written letter of recommendation from the previous program Director validating the student's professional good standing.
- A student requesting transfer from another college into ANC's Nursing or Allied Health
  Programs/Courses is required to meet the ANC Transfer Policies as outlined in the ANC Catalog and
  PN Information Guidelines.

It is the student's responsibility to provide accurate contact information at the time of application and to notify the Nursing Office of any changes. Admission criteria must be met and student files updated with all required information for inclusion in the admission/selection process.

<u>Selection Process</u>: The PN program may have more applicants that meet the minimum requirements for admission than positions available. Admission is competitive; therefore students are ranked according to their TEAS test score, cumulative grade point average (from all colleges/universities attended) and completion of prerequisite courses and any developmental education courses required. Applicants providing a current credential as a Certified Nursing Assistant in the State of AR will be eligible for 1 bonus point in the selection process (optional and not a requirement for admission into the PN Program).

#### Ranking process:

- o TEAS Entrance Exam: Points are earned for TEAS Scores of **58.7%** or greater.
- Applicants earn points for their overall GPA (2.0 or greater) on all college course work attempted and the points are added to the points earned for the PAX score.
- O Applicants providing a current credential as a Certified Nursing Assistant (CNA) in the State of AR will be eligible for 1 bonus point in the selection/ranking process. A copy of the current AR CNA certification must be attached to the PN Application or submitted to the Nursing Office on or prior to the April 15<sup>th</sup> application deadline to receive bonus points. This is optional and not a requirement for application in the PN Program.
- Points earned from TEAS Scores, GPA and if applicable, the Bonus Point for AR CNA, are added to provide Total Points. Students are ranked from highest to lowest on over-all earned points. See Example below.

Example: TEAS Score of 62% = 62 points

Overall GPA of 2.9 = 2.9 points

Current CNA in AR = 1.0 points (bonus points)

Total Points: 65.9

**Selection for the Fall class is completed in June of each year**. All applicants are notified if they have been selected, if they are alternates for the program, or if they have not been accepted.

All applicants who meet the **minimum PN Admission Criteria** will be notified of their acceptance status (accepted and / or alternate) in the PN Program and be invited to a **Mandatory Orientation Session**. All students (accepted and/ or alternate) will be expected to attend. The orientation will provide details and expectations of the PN Program. All students attending will complete and sign their **PN Letter of Intent** to officially accept their admission status in the PN Program.

#### **Preadmission Testing TEAS EXAM-**

The Test of Academic Essential Skills (TEAS) Exam is required for applicants to the Associate Degree or Practical Nursing Program. The TEAS exam is a multiple-choice assessment of basic academic knowledge in reading, mathematics, science, and English and language usage.

- Applicants must score a proficient (minimum of 58.7%) to be eligible for consideration into the program.
- Applicants may take the TEAS exam twice per application period. It is recommended applicants
  test once in the Fall and once in the Spring prior to the April 15<sup>th</sup> application deadline. If
  students choose to test twice in the same semester, they must wait a minimal of four weeks
  after the first exam before taking the second exam.
  - The higher of the two scores will be used in the selection process.
  - TEAS scores are valid for two (2) years following the date of examination in an application period for admission into the next 2 Fall Classes. Example: Tested January 2023. Scores valid for application in Fall 2023 and Fall 2024 classes.
- The ANC Nursing & Practical Nursing Departments require applicants take the ANC On-site TEAS
   Testing or test from another approved On-site TEAS testing center with official scores submitted
   from the ATI TEAS directly to the ANC Nursing Department at: <a href="mailto:ancnursing@smail.anc.edu">ancnursing@smail.anc.edu</a>

ANC On-site Testing. Dates for TEAS on-site testing will be posted on the ANC website as noted below.

- o If questions, please contact the ANC Testing Center at 870-762-1020 ext. 1161 or access online at: http://www.anc.edu/testingcenter/index.htm
- The cost of the exam is approximately \$65.00 but may be subject to change.
- For more information regarding the TEAS exam or to purchase a study guide go to: <a href="https://www.atitesting.com/">https://www.atitesting.com/</a>

The TEAS Entrance Exam is the only Entrance Exam accepted for applicants in the ADN/PN Programs.

<u>Conviction of a Crime</u>: Any student, who has been or is convicted of a crime, either prior to entering the nursing program or during the course of the program, *must report* this conviction to the Director of the Practical Nursing Program. Failure to report the crime may result in an immediate suspension and/or dismissal from the Practical Nursing Program. Students convicted of a crime will be responsible for submitting copies of all court documents related to the conviction(s) to the Arkansas State Board of Nursing who will determine eligibility to challenge the NCLEX – PN exam upon completion of the PN Program.

Refer to Arkansas State Board of Nursing – Nurse Practice Act - SUBCHAPTER 3 – LICENSING §17-87-312 Criminal Background Checks.

#### **BACKGROUND VERIFICATION POLICY (Beginning of PN Program)**

Policy Statement: Arkansas Northeastern College Practical Nursing Program requires students selected for admission into the PN Program to complete a criminal background investigation by a third party vendor prior to the beginning of clinical rotations in the first nursing course. All background verification information and results will be treated confidentially but will be accessible to the Practical Nursing Director, the Dean of Nursing, Allied Health & HPER and clinical agencies as warranted. All adverse or negative outcomes on the background verification checks will require permission from the clinical affiliate before a student is scheduled at that agency for a clinical rotation. This requires each clinical affiliate to independently determine if an adverse or negative outcome on the criminal background verification check will prohibit a student nurse from being assigned in their facility.

Students will be responsible for all fees associated with any components of the background verification process. Students must authorize the background check verification by completing the background authorization form provided by the vendor.

Students found to be ineligible to complete clinical rotations due to an adverse or a negative outcome from the criminal background check will not be able to meet clinical and program objectives and therefore dismissal from the program will be necessary. The background investigation completed through a third party vendor will include the following components:

- Arkansas Statewide Criminal
- 7 Year U.S. County Criminal Records (Outside of Arkansas)
- Residency History
- Social Security Alert
- National Record Indicator with Sex Offender Registry
- Nationwide Healthcare Fraud & Abuse Scan
- Arkansas Child Abuse Clearance
- Missouri Family Care & Safety Registry
- Maiden Names and Aliases

#### **CRIMINAL BACKGROUND CHECKS**

Students accepted into the Practical Nursing Program must complete a state and federal background check in the Spring Semester prior to graduation. Associated costs will be the responsibility of the student. Background checks must be cleared by appropriate agencies prior to graduates being provided a test date for the NCLEX-PN. Fingerprints and criminal background application to the Arkansas State Police is required.

Please be informed that persons convicted of certain crimes may not be eligible to take the NCLEX – PN at the completion of the program. Refer to the Arkansas State Board of Nursing – Nurse Practice Act - SUBCHAPTER 3 – LICENSING §17-87-312 Criminal Background Checks outlined below.

If students have questions or concerns they should contact the Director of Practical Nursing or any designated instructor.

## Arkansas State Board of Nursing- Nurse Practice Act SUBCHAPTER 3 LICENSING § 17-87-312. Criminal Background Checks.

- (a) (1) Each first-time applicant for a license issued by the Arkansas State Board of Nursing shall apply to the Identification Bureau of the Division of Arkansas State Police for a state and national criminal background check, to be conducted by the Federal Bureau of Investigation.
- (2) At the time a person applies to an Arkansas nursing educational program, the program shall notify the applicant in writing of the provisions and requirements of this section.
- (b) The check shall conform to the applicable federal standards and shall include the taking of fingerprints.
- (c) The applicant shall sign a release of information to the board and shall be responsible to the Division of Arkansas State Police for the payment of any fee associated with the criminal background check.
- (d) Upon completion of the criminal background check, the Identification Bureau of the Division of Arkansas State Police shall forward to the board all releasable information obtained concerning the applicant.
- (e) For purposes of this section, the board shall follow the licensing restrictions based on criminal records under § 17-3-102.

(f)

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

(g)

- (1) Any information received by the board from the Identification Bureau of the Division of Arkansas State Police under this section shall not be available for examination except by:
- (A) The affected applicant for licensure or his or her authorized representative; or
- (B) The person whose license is subject to revocation or his or her authorized representative.
- (2) No record, file, or document shall be removed from the custody of the Division of Arkansas State Police.
- (h) Any information made available to the affected applicant for licensure or the person whose license is subject to revocation shall be information pertaining to that person only.
- (i) Rights of privilege and confidentiality established in this section shall not extend to any document created for purposes other than this background check.
- (j) The board shall adopt the necessary rules to fully implement the provisions of this section. (k)
- (1) The board may participate at the state and federal level in programs that provide notification of an arrest subsequent to an initial background check that is conducted through available governmental systems.
- (2) The board may submit an applicant's fingerprints to the federal Next Generation Identification system.
- (3) The fingerprints may be searched by future submissions to the Next Generation Identification system, including latent fingerprint searches.
- (4) An applicant enrolled in the Next Generation Identification system is not required to re-fingerprint when a subsequent request for a state or federal criminal history background check is required if:
- (A) A legible set of the applicant's fingerprints is obtained when the applicant enrolls in the Next Generation Identification system; and
- (B) The applicant is subject to the Rap Back service of the Next Generation Identification system.
- (I) The Identification Bureau of the Division of Arkansas State Police and the Federal Bureau of Investigation may maintain fingerprints in the Integrated Automated Fingerprint Identification System. 17-3-102. Licensing restrictions based on criminal records.
- (a) An individual is not eligible to receive or hold a license issued by a licensing entity if that individual has pleaded guilty or nolo contendere to or been found guilty of any of the following offenses by any

court in the State of Arkansas or of any similar offense by a court in another state or of any similar offense by a federal court, unless the conviction was lawfully sealed under the Comprehensive Criminal Record Sealing Act of 2013, § 16-90-1401 et seq., or otherwise previously sealed, pardoned or expunged under prior law:

- (1) Capital murder as prohibited in § 5-10-101;
- (2) Murder in the first degree and second degree as prohibited in §§ 5-10-102 and 5-10-103;
- (3) Manslaughter as prohibited in § 5-10-104;
- (4) Negligent homicide as prohibited in § 5-10-105;
- (5) Kidnapping as prohibited in § 5-11-102;
- (6) False imprisonment in the first degree as prohibited in § 5-11-103;
- (7) Permanent detention or restraint as prohibited in § 5-11-106;
- (8) Robbery as prohibited in § 5-12-102;
- (9) Aggravated robbery as prohibited in § 5-12-103;
- (10) Battery in the first degree as prohibited in § 5-13-201;
- (11) Aggravated assault as prohibited in § 5-13-204;
- (12) Introduction of a controlled substance into the body of another person as prohibited in § 5-13-210;
- (13) Aggravated assault upon a law enforcement officer or an employee of a correctional facility as prohibited in § 5-13-211, if a Class Y felony;
- (14) Terroristic threatening in the first degree as prohibited in § 5-13-301;
- (15) Rape as prohibited in § 5-14-103;
- (16) Sexual indecency with a child as prohibited in § 5-14-110;
- (17) Sexual extortion as prohibited in § 5-14-113;
- (18) Sexual assault in the first degree, second degree, third degree, and fourth degree as prohibited in  $\S\S5-14-124-5-14-127$ ;
- (19) Incest as prohibited in § 5-26-202;
- (20) Offenses against the family as prohibited in §§ 5-26-303 5-26-306;
- (21) Endangering the welfare of an incompetent person in the first degree, as prohibited in § 5-27-201;
- (22) Endangering the welfare of a minor in the first degree as prohibited in § 5-27-205;
- (23) Permitting the abuse of a minor as prohibited in § 5-27-221;
- (24) Engaging children in sexually explicit conduct for use in visual or print media, transportation of minors for prohibited sexual conduct, pandering or possessing visual or print medium depicting sexually explicit conduct involving a child, or use of a child or consent to use of a child in a sexual performance by producing, directing, or promoting a sexual performance by a child, as prohibited in §§ 5-27-303 5-27-305, 5-27-402, and 5-27-403;
- (25) Computer child pornography as prohibited in § 5-27-603;
- (26) Computer exploitation of a child in the first degree as prohibited in § 5-27-605;
- (27) Felony adult abuse as prohibited in § 5-28-103;
- (28) Theft of property as prohibited in § 5-36-103;
- (29) Theft by receiving as prohibited in § 5-36-106;
- (30) Arson as prohibited in § 5-38-301;
- (31) Burglary as prohibited in § 5-39-201;
- (32) Felony violation of the Uniform Controlled Substances Act, §§ 5-64-101 5-64- 510, as prohibited in the former § 5-64-401, and §§ 5-64- 419 5-64-442;
- (33) Promotion of prostitution in the first degree as prohibited in § 5-70-104;
- (34) Stalking as prohibited in § 5-71-229;
- (35) Criminal attempt, criminal complicity, criminal solicitation, or criminal conspiracy, as prohibited in §§ 5-3-201, 5-3-202, 5-3-301, and 5-3-401, to commit any of the offenses listed in this subsection; and (36) All other crimes referenced in this title.

(b)

- (1) If an individual has been convicted of a crime listed in subsection (a) of this section, a licensing entity may waive disqualification or revocation of a license based on the conviction if a request for a waiver is made by:
- (A) An affected applicant for a license; or
- (B) The individual holding a license subject to revocation.
- (2) A basis upon which a waiver may be granted includes without limitation:
- (A) The age at which the offense was committed;
- (B) The circumstances surrounding the offense;
- (C) The length of time since the offense was committed;
- (D) Subsequent work history since the offense was committed;
- (E) Employment references since the offense was committed;
- (F) Character references since the offense was committed;
- (G) Relevance of the offense to the occupational license; and
- (H) Other evidence demonstrating that licensure of the applicant does not pose a threat to the health or safety of the public.
- (c) If an individual has a valid criminal conviction for an offense that could disqualify the individual from receiving a license, the disqualification shall not be considered for more than five (5) years from the date of conviction or incarceration or on which probation ends, whichever date is the latest, if the individual:
- (A) Was not convicted for committing a violent or sexual offense; and
- (B) Has not been convicted of any other offense during the five-year disqualification period.
- (d) A licensing entity shall not, as a basis upon which a license may be granted or denied:
- (1) Use vague or generic terms, including without limitation the phrase "moral turpitude" and "good character"; or
- (2) Consider arrests without a subsequent conviction.
- (e) Due to the serious nature of the offenses, the following shall result in permanent disqualification for licensure:
- (1) Capital murder as prohibited in § 5-10-101;
- (2) Murder in the first degree as prohibited in § 5-10-102 and murder in the second degree as prohibited in § 5-10-103;
- (3) Kidnapping as prohibited in § 5-11-102;
- (4) Aggravated assault upon a law enforcement officer or an employee of a correctional facility as prohibited in § 5-13-211, if a Class Y felony;
- (5) Rape as prohibited in § 5-14-103;
- (6) Sexual extortion as prohibited in § 5-14-113;
- (7) Sexual assault in the first degree as prohibited in § 5-14- 124 and sexual assault in the second degree as prohibited in § 5-14-125;
- (8) Incest as prohibited in § 5-26-202;
- (9) Endangering the welfare of an incompetent person in the first degree as prohibited in § 5-27-201;
- (10) Endangering the welfare of a minor in the first degree as prohibited in § 5-27-205;
- (11) Adult abuse that constitutes a felony as prohibited in § 5-28-103; and
- (12) Arson as prohibited in § 5-38-301.
- (f) This chapter does not preclude a licensing entity from taking emergency action against a licensee as authorized under § 25-15-211 for the sake of public health, safety, or welfare.
- (g) The permanent disqualification for an offense listed in subsection (e) of this section does not apply to an individual who holds a valid license on the effective date of this chapter.

NOTE: A copy of this subchapter 3 related to Criminal Background Checks will be signed at a scheduled orientation and placed in the student's file.

#### **FUNCTIONAL ABILITIES**

Nursing is a practice discipline, with cognitive, sensory, affective and psychomotor performance requirements. The knowledge and skills and abilities to safely and effectively practice nursing are varied and complex. The National Council of State Boards of Nursing has defined functional abilities that a nurse must possess to practice safely and effectively.

The functional abilities are the non-academic requirements of the program, and they comprise physical, emotional and professional demands of a nurse. Take into consideration whether you can perform the functions, with or without accommodations. If you determine that you are unable to do any of the skills listed and have a documented disability, you will need to determine if a reasonable accommodation can be provided. To request an accommodation, you will need to contact Arkansas Northeastern College's Student Services office and present documentation of your disability. *Students are required to read and sign understanding of the established Functional Abilities.* 

#### <u>Functional Ability Categories, Descriptions, and Representative Activities & Attributes</u>

Gross Motor Skills sufficient to provide the full range of safe and effective nursing care activities.

- Move within confined spaces
- Sit and maintain balance
- Stand and maintain balance
- Reach above shoulders (e.g. IV poles)
- Reach below waist (e.g. plug electrical appliances into wall outlets)

Fine Motor Skills sufficient to perform manual psychomotor skills integral to patient care.

- Pick up objects with hands
- Grasp small objects with hands (e.g. IV tubing, pencil)
- Write with a pen or pencil
- Key/type (e.g. use a computer)
- Pinch/pickup or otherwise work with fingers (e.g. manipulate a syringe; withdraw medications from ampules, vials, etc.)
- Twist (e.g. turn objects/knobs using hands)
- Squeeze with fingers (e.g. eye dropper)

Physical Endurance and Stamina sufficient to perform client care activities for entire length of work role.

- Stand (e.g. at client side during surgical or therapeutic procedure)
- Sustain repetitive movements (e.g. cardiopulmonary resuscitation (CPR)
- Maintain physical tolerance (e.g. work 8 or 12 hour shifts, days, evenings, nights, weekend, holidays)

Physical Strength sufficient to perform a full range of required client care activities.

- Push and pull 25 pounds (e.g. position patients)
- Support 25 pounds of weight (e.g. ambulate patient)
- Lift 25 pounds (e.g. pick up a child, transfer a patient)
- Move light objects weighing up to 10 pounds (e.g. IV poles)
- Move heavy objects weighing from 11 to 50 pounds
- Defend self against combative client
- Carry equipment and/or supplies
- Use upper body movements (e.g. CPR, physically restrain a client)
- Squeeze with hands (e.g. operate a fire extinguisher)

**Mobility** including physical abilities sufficient to move from place to place and maneuver to perform nursing activities.

- Twist
- Bend
- Stoop/Squat
- Move quickly (e.g. respond to an emergency)
- Climb (e.g. ladders/stools/stairs)
- Walk

Hearing/Auditory ability sufficient for physical monitoring and assessment of client health care needs.

- Hear normal speaking level sounds (e.g. person-to-person report)
- Hear faint voices
- Hear faint body sounds (e.g. blood pressure sounds, assess placement of tubes)
- Hear in situations when not able to see lips (e.g. when masks are worn)
- Hear auditory alarms (e.g. monitors, fire alarms, call bells)

Visual ability sufficient for accurate observation and performance of nursing care.

- See objects up to 20 inches away (e.g. information on a computer screen, skin conditions)
- See objects up to 20 feet away (e.g. patient in a room)
- See objects more than 20 feet away (e.g. patient at the end of the hall)
- Use peripheral vision
- Distinguish color (e.g. color codes on supplies, charts, bed)
- Distinguish color intensity (e.g. flushed skin, skin paleness)

Tactile ability sufficient for physical monitoring and assessment of health care needs.

- Feel vibrations (e.g. palpate pulses)
- Detect temperature (e.g. skin, solutions)
- Feel differences in surface characteristics (e.g. skin turgor, rashes)
- Feel differences in sizes, shapes (e.g. palpate vein, identify body landmarks)
- Detect environmental temperature (e.g. check for drafts)

**Smell/Olfactory** ability sufficient to detect environmental and client odors.

- Detect odors from client (e.g. foul smelling drainage, alcohol breath, etc.)
- Detect smoke
- Detect gases or noxious smells

**Reading** ability sufficient to comprehend the written word at a minimum of a tenth grade level.

• Read and understand English written documents (e.g. policies, protocols) **Arithmetic** ability sufficient to do computations at a minimum of eighth grade level.

**Counting**: the act of enumerating or determining the number of items in a group.

**Measuring:** the act or process of ascertaining the extent, dimensions, or quantity of something.

**Computing:** the act or process of performing mathematical calculations such as addition, subtraction, multiplication, and division.

Read and understand columns of writing (e.g. flow sheets, charts)

- Read digital displays
- Read graphic printouts (e.g. EKG)
- Calibrate equipment
- Convert numbers to and/or from the Metric System
- Read graphs (e.g. vital sign sheets)
- Tell time
- Measure time (e.g. count duration of contractions, etc.)
- Count rate (e.g. drops/minute, pulse)
- Use measuring tools (e.g. thermometer)
- Read measurement marks (e.g. measurement tapes, scales, etc.)
- Add, subtract, multiply and/or divide whole numbers

- Compute fractions (e.g. medication dosages)
- Use a calculator
- Write numbers in records

**Emotional Stability** sufficient to assume responsibility and accountability for actions.

- Establish therapeutic boundaries/relationships and communicate in a supportive, constructive manner
- Provide a client with emotional support
- Adapt to changing environment/stress
- Deal with the unexpected (e.g. patient going bad, crisis)
- Focus attention on task
- Monitor own emotions and be able to keep emotional control
- Perform multiple responsibilities concurrently
- Handle strong emotions (e.g. grief)

Analytical and Reasoning Skills sufficient to perform deductive/inductive reasoning for nursing decisions.

- Transfer knowledge from one situation to another
- Process information
- Evaluate outcomes
- Problem solve
- Prioritize tasks
- Use long-term memory
- Use short-term memory

Critical Thinking Ability sufficient to exercise sound nursing judgment.

- Identify cause-effect relationships
- Plan/control activities for others
- Synthesize knowledge and skills
- Sequence information

**Interpersonal Skills** sufficient to interact with individuals, families, and groups respecting social, cultural, and spiritual diversity.

- Negotiate interpersonal conflict
- Respect difference in patients
- Establish positive rapport with patients
- Establish positive rapport with co-workers/peers
- Establish and maintain positive rapport with faculty
- Interact with others effectively

**Communication Skills** sufficient to speak, comprehend, and write in English at a level that meets the need for accurate, clear, and effective communication.

- Teach (e.g. patient/family about health care)
   Explain procedures
- Give clear oral reports (e.g. report on patient's condition to others)
- Interact with others (e.g. health care workers)
- Speak effectively on the telephone
- Influence people and their actions
- Direct activities of others by providing clear written and oral instructions to others
- Convey information through writing (e.g. progress notes)

If the applicant's native language is other than English, an official transcript of the score for the Test of English as a Foreign Language (TOEFL) must be submitted from Educational Testing Service, Princeton, New Jersey 08540, to the Registrar's Office at Arkansas Northeastern College. This test may be taken at

various test centers throughout the world, but it is the applicant's responsibility to obtain the necessary information and application forms, and to arrange to take the test by a date which will assure that the results are reported to ANC by the required deadlines. ANC PN Department requires the overall cut scores as recommended by the National Council of State Board of Nursing on all English Proficiency Exams.

#### **DRUG SCREENING POLICY**

<u>"For Cause" Drug Screening Policy Statement:</u> Arkansas Northeastern College Practical Nursing (PN) Program requires students to complete Drug Screening based on "For Cause" conducted by a third party vendor at designated drug testing facilities. Students are responsible for fees associated with the drug screening.

Use of alcohol or illegal drugs, or misuse of prescription drugs is strictly prohibited in the classroom, clinical or laboratory setting. References to the College's Alcohol and Drug Policy along with the policies on Student Conduct and Disciplinary Sanctions and Student's Rights and Responsibilities are found in the link to the ANC Student Handbook at <a href="http://www.anc.edu/docs/anc\_handbook.pdf">http://www.anc.edu/docs/anc\_handbook.pdf</a>
The complete PN Drug Screening Policy is provided to students accepted into the program and is located in the PN Student Handbook.

#### **CLINICAL REQUIREMENTS**

**Health Statement:** Students are required to complete the Personal Health Data and Medical History Form. The requested health data and history information is kept confidential and will be used only as an aid in providing necessary health care if an emergency were to arise or to determine if medical clearance is necessary prior to entering the program. Students who are pregnant or who have an altered health status must have written approval from their physician to enter or continue in clinical rotations. Students must meet all stated clinical outcomes and objectives along with meeting all attendance requirements.

<u>Health Insurance</u>: Arkansas Northeastern College does not provide medical related services, nor does the College assume responsibility for injuries incurred by students during any College activity. Medical services may be obtained from local doctors, clinics or hospitals at the student's expense. All students are encouraged to carry their own health and accident insurance throughout the program.

#### Immunization Requirements for all Enrollees at Arkansas Colleges and Universities:

Arkansas State Law, Act 141 of 1987, requires college students born after 1/1/57 to provide proof of immunity against measles, mumps, and rubella within 30 calendar days of enrollment. Two MMR immunizations are required. Exemptions shall be granted only by the Department of Health and must be applied for each academic year. Forms can be obtained by e-mail only at <a href="https://www.immunization.section@arkansas.gov">www.immunization.section@arkansas.gov</a> after July 1, each year.

<u>Nursing and Allied Health MMR Immunization Policy:</u> Arkansas law requires all full-time students born on or after January 1, 1957 to provide proof of immunization against measles, mumps, and rubella (MMR) or immunity, or medical or non-medical exemption, or birth before 1957.

• <u>Proof of Immunization:</u> The immunization must be given in two doses. The first dose of the MMR must be given before the first birthday and after 1/1/1968. The second dose must be given at least 28 days after the first. Refer to Table III of the Arkansas State Board of Health,

Rules and Regulations Pertaining to Immunization Requirements, page 16. Accepted proof of immunizations shall be those on an immunization record provided by a licensed physician, health department, military service or an official record from another educational institution in Arkansas. All accepted immunization records shall state the vaccine type and dates of vaccine administration.

• <u>Proof of Immunity:</u> In lieu of receiving vaccine students may provide proof of immunity. Students must submit serological test results (titers) appropriate for all three diseases (measles, mumps, and rubella) to the Arkansas Department of Health (ADH) along with a letter requesting approval of immunity. Please send letter and test results to:

Arkansas Department of Health ATTENTION: Immunization Section 4815 West Markham Street Little Rock, AR 72205

After the Medical Director of the Immunization Section of the ADH has reviewed the letter and results, the student will receive either an approval or denial letter. If approved, it is the student's responsibility to provide ANC Registrar a copy of the letter for placement in the student's permanent file. Thereafter, annual approval is not required. If denied, the student must receive the required immunization or request an exemption (see below) through the Arkansas Department of Health.

<u>Medical or Non-medical Exemption</u>: Students may apply for an authorized exemption (medical, religious, or philosophical) from the Arkansas Department of Health. Exemptions must be applied for each academic year. Forms can be obtained after July 1, each year by e-mail only at: <a href="http://www.healthy.arkansas.gov/programsServices/infectiousDisease/Immunizations/Documents/2017-2018%20College%20Immunization%20Exemption%20Application%20Packet.pdf">http://www.healthy.arkansas.gov/programsServices/infectiousDisease/Immunizations/Documents/2017-2018%20College%20Immunization%20Exemption%20Application%20Packet.pdf</a>

#### **Resource:**

Rules and Regulations Pertaining to Immunization Requirements are located at: http://www.healthy.arkansas.gov/aboutADH/RulesRegs/ImmunizationRequirements.pdf

#### **Other Required Immunizations**

As a condition of admission and continued enrollment in the PN program, all students are required to submit proof of the following:

- MMR (2 doses required; refer to detailed MMR immunization policy above for more
- **Tetanus or Tdap**. Tetanus or Tdap must be received in the past 10 years to be current or a tetanus booster is required.
- **TB Screening:** At the beginning of the fall semester, students must submit proof of **ONE** of the following:
  - o documentation of a negative tuberculin (TB) skin test
  - negative result of interferon-gamma release assays (IGRAs) blood tests (T-SPOT or QuantiFERON).
  - o negative chest x-ray within the past three years; OR provide evidence of no TB disease per health screening
- Hepatitis B (series of 3 injections) or waiver: students entering the PN Program must realize the potential for exposure to the Hepatitis B virus. Faculty recommends appropriate documentation of a completed series of Hepatitis B immunizations or consent to and be in the process of receiving the series of the 3 injections prior to any contact with patients. If a student refuses or has reason to believe that the vaccine is contraindicated for him/her, the student must sign a declination form acknowledging the risk of Hepatitis B infection in a healthcare

setting.

- Influenza/flu vaccine annually (this is due each year by 10/31 or as requested by clinical facilities)
- Varicella (2 doses); Proof of varicella may be provided by ONE of the following:
  - Documentation of 2 doses of the varicella vaccine
  - Laboratory evidence of immunity (titer)
  - o Verification of history of varicella or herpes zoster by a healthcare provider

#### **COVID-19 Vaccinations**

In compliance with AR ACT 1030, The Division of Allied Health at Arkansas Northeastern College does not mandate COVID-19 vaccination as a requirement for enrollment in any of their courses or programs. However, clinical affiliates may require proof of the vaccine for both faculty and students attending their facilities for clinical experiences. The Practical Nursing Program Director will accept student's proof of COVID Vaccination for submission to these facilities upon their request and prior to attending clinical. Students may provide a copy of COVID vaccination proof to the PN faculty, PN Program Director or the Administrative Analyst for Allied Health as with all other clinical documentation.

In order to ensure all students are provided an equitable clinical educational experience necessary to meet required course and program objectives, students must be eligible for placement in any approved clinical site. Students ineligible to meet their clinical assignments will not be successful in meeting their course objectives.

#### **ACADEMIC PROGRESSION**

The PN Program is competency based in skills and theory. In order to continue in any nursing course, a student must have satisfactory clinical performance and achieve an overall average of 76%. Any student not maintaining a "C" or better in any nursing course will not be allowed to continue in other nursing courses enrolled or progress to the next semester/term. Probation and suspension may occur based on regular college policies.

Students will be required to complete standardized tests throughout the nursing curriculum. Acceptable scores on such tests are required to progress through the practical nursing curriculum. In the Summer Term of the PN Curriculum, students will be required to make an acceptable score on a comprehensive exam in order to graduate and apply for the National Council Licensure Exam (NCLEX).

Because the Practical Nursing courses utilize the content of the physical and behavioral sciences, the course of study will be according to prescribed sequence. The student may take any course desired prior to applying to the Practical Nursing Program. Completion of these courses does not guarantee admission to the Practical Nursing Program.

#### **Academic Standards:**

<u>Curriculum Plan:</u> The curriculum plan for the Practical Nursing Program is comprised of 46 nursing credit hours and 7 general education credit hours. The general education courses further compliment and support the study of Practical Nursing. The Practical Nursing Curriculum Plan or course of study is approved by the Arkansas State of Nursing and must be taken in the order outlined in the plan.

<u>Support Courses:</u> The general education courses utilize the content of the mathematics and physical sciences. The student must complete the 7 credit hours of prerequisite course work before applying to

the practical nursing program. Completion of these prerequisite courses does not guarantee admission to the practical nursing program. Most of the PN courses have co-requisite courses that call for a prescribed sequence. (Refer to ANC catalog for course descriptions). A grade of "C" or better is required in each prerequisite course and for each of the nursing courses.

<u>Nursing Courses:</u> The course of the study for Practical Nursing will be according to the prescribed sequence in the Curriculum Plan. Each student must receive a grade of "C" (76%) or better in each nursing course. If the student receives less than a "C" (76%) grade in the course, the course will result in a non-passing grade. An overall minimum grade point average (GPA) of 2.0 (on a 4.0 scale) is required for college graduation (excluding developmental education course work).

PN Program Transfer and/or Substitution Policy: Students requesting transfer credit to the ANC Practical Nursing Program must meet ANC Transfer Policies as outlined in the ANC Catalog and PN Departmental Guidelines for Admission. Nursing courses will not be considered for transfer or substitution if they have not been completed within one year of transfer/substitution to ANC. Official transcripts along with the "Request for Exception or Waiver" (Refer to attached Exception/Waiver Form) for course transfer or substitution must be submitted and approved by the Director of Practical Nursing prior to the scheduled course as noted in PN Curriculum Plan. Course substitutions will not be considered once the student is enrolled in a PN Course.

A student must complete the entire PN curriculum within 2 years or apply for re-admission and repeat all nursing courses. Two consecutive semesters must be successfully completed at ANC to meet eligibility requirements for graduation and application for the NCLEX-PN.

Letter of Good Standing Policy: Applicants seeking transfer into one of ANC's Nursing or Allied Health Programs/Courses from another college must request a letter of good standing from the dean/director of that program. To be considered in good standing, the applicant must be eligible for re-entry into the previous college's Nursing or Allied Health program. The letter of good standing must be mailed directly from the Dean/Director of the previous program attended to the ANC Director of Nursing or Allied Health Program in which the applicant is applying. If the letter of good standing is not received, then the applicant may not be considered for admission.

#### Arkansas Northeastern College Practical Nursing Curriculum Plan Credit-Contact Hours 2023 – 2024

Course	Course Name	Credit	Theory/	Clinical	Total		
Number		Hrs	Lab Hrs	Hrs	Hours		
Prerequisites							
MA 14003	Mathematical Applications for Allied	3	48	0	48		
or	Health <b>or</b>						
MA 14043	College Algebra <b>or</b>						
MA 14123	Quantitative Reasoning						
AH 16084	Body Structure & Function or	4	64		64		
BI 24003/	Anatomy & Physiology I	(4)	(48)		(96)		
BI 24011	with Lab <b>and</b>		(32)				
BI 24023/	Anatomy & Physiology II	(4)	(48)		(96)		
BI 24031	with Lab		(32)				
	Totals	7	112	0	112		
Fall Semester	r						
PN 16051	Care of the Geriatric Patient	1	16	-	16		
PN 16025	Basic Nursing Principles and Skills I	5	80	-	80		
PN 16035	Basic Nursing Principles and Skills II	5	80	-	80		
PN 16042	Pharmacology I	2	32	-	32		
PN 16072	Nursing of Children	2	32	-	32		
PN 16085	Practical Nursing Clinical I	5	-	240	240		
	Totals	20	240	240	480		
Spring Semester							
PN 16092	Nursing of Mothers and Infants	2	32	-	32		
PN 16104	Pharmacology II	4	64	-	64		
PN 16185	Medical/Surgical I	5	80	-	80		
PN 16195	Medical/Surgical II	5	80	-	80		
PN 16125	Practical Nursing Clinical II	5	-	240	240		
	Totals	21	256	240	496		
Summer I							
PN 16152	Practical Nursing Clinical III	2	-	96	96		
PN 16203	Management & Delegation	3	48	-	48		
Totals		5	48	96	144		
PN Program	Total Credit-Contact hours	53	656	576	1232		

Credit Hours/Contact Hours calculated using 1:1 ratio for classroom/didactic and 1:3 ratio for lab/clinical. Body Structure and Function and/or Anatomy & Physiology I and II with Labs must be completed within 5 years of admission to the PN Program.

Technical Certificate in Practical Nur	Sing Flugidi	ii CUST L	.131 2023-202	. <del></del>
Tuition Per Credit Hour		Amount		
Mississippi County Residents	\$75.00			
Out of County Residents*	\$85.00			
Bootheel & Tennessee Border	\$85.00			
Out of State Residents	\$135.00			
International Students	\$135.00			
			Totals	
Estimated Tuition: In County Fees			In-County	
General Education Courses (\$75 per credit hour x 7)			\$525.00	
Nursing Courses (\$75 per credit hour x 46)			\$3,450.00	
Technology Fee (\$15.00 per credit hour x 53)			\$795.00	
Registration Fee (\$25.00/semester x 3)			\$75.00	
*ZOOM/INET Classes (\$20/credit hour x 53)		1	\$1,060.00	
·	In-Coun	ty Total	\$5,905.00	
	Out-of-Coun	ty Total	\$6,435.00	
Practical Nursing Fees				
Nursing Course Fees (13 courses @ \$75.00/course)			\$975.00	
Professional Liability Insurance & Exam Soft @ \$115/ye			\$115.00	
			\$1,090.00	
Other Practical Nursing Program Costs				
Background Screening			\$95.00	
Student Nurse Club Membership			\$20.00	
Required Textbooks/Nursing			\$942.00	
Nursing Skills Pack			\$417.00	
Uniforms, Shoes & Accessories			\$285.00	
Hepatitis B Immunization/TB Skin Test/Flu Vaccine			\$200.00	
CPR Course/Card			\$40.00	
·			\$1,999.00	
Program Completion Fees				
AR State Police & Criminal Background Check			\$38.00	
LIVESCAN Mobile Fingerprint			\$20.00	
NCLEX-PN Review Course			\$350.00	
NCLEX-PN Exam			\$200.00	
AR State Board of Nursing Fees			\$100.00	
AR Temporary Permit (optional)			\$30.00	
Nursing Pin/ Lamp & Graduation Picture			\$130.00	
ANC Graduation Fee			\$40.00	
			\$908.00	
Total Program Projected Cost:	In-County Total		\$9,902.00	
	Out-of-Coun	ty Total	\$10,432.00	

#### Arkansas Northeastern College Practical Nursing Program Application for Admission

Please complete and submit/mail to: Date of Application \_\_\_\_\_ **Arkansas Northeastern College Attention: Nursing Department** Have you Met with the ANC Allied Health Advising Specialist? 2501 South Division P.O. Box 1109 ☐ YES □ NO Blytheville, AR 72316-1109 Application Received (Office Only) Name: \_ First Middle Maiden Last Contact Phone Numbers: \_\_\_\_\_\_ Primary\_\_\_\_\_ Secondary Mailing Address City State Zip Physical Address\_\_\_\_ State Street Number City Zip ANC Student ID # \_\_\_\_\_ (If available at time of application) E-mail Address:\_\_ Completion of this information is optional for statistical purposes and does not affect admission status. Gender: Male\_\_\_ Female Marital Status: Do you consider yourself Hispanic or Latino? Yes No Check all that apply: □ American Indian/Alaskan Native □ Asian/ Pacific Islander □ Black/African American □ Other (specify) \_\_\_\_\_ □ Native Hawaiian/Pacific Islander □ White Have you been enrolled in any other Nursing or Allied Health Program at ANC? Yes \_\_\_\_\_\_ No \_\_\_\_\_ No \_\_\_\_\_ Name of Program\_\_\_\_\_\_ Dates Attended\_\_\_\_\_\_ Current Certified Nursing Assistant in AR: Yes\_\_\_\_ No\_\_\_\_ If yes, must attach copy of certification to application. Have you ever been convicted of a crime? Yes \_\_\_\_\_\_ No \_\_\_\_\_ High School Attended Date of Graduation Name City State Colleges, Universities or other Schools Attended: Institution Dates Attended Hrs. Attended/Degree (Type) GPAI acknowledge that all information provided is true and that misrepresenting the truth can lead to dismissal from the ANC Practical Nursing Program. I understand that if I have been convicted of a crime I will need permission from the Arkansas State Board of Nursing to write the NCLEX-PN. Print Name Student Signature (legible please) Date

## Arkansas Northeastern College Practical Nursing (PN) Program Statement of Responsibility and Understanding

#### Please complete and submit/mail with your application to:

Arkansas Northeastern College Attention: Practical Nursing Department 2501 South Division St. P.O. Box 1109 Blytheville, AR 72316-1109

#### **Statement of Responsibility**

The following statements of responsibility indicate your understanding of the requirements necessary for evaluation of your file for possible admission into the ANC Practical Nursing Program. Please sign and return to the Nursing Secretary.

- I have received and read the Information Guidelines for the Practical Nursing Program from Arkansas Northeastern College regarding admission policies and requirements.
- I understand that it is my responsibility to ensure that all admission criteria and policies are met to be considered for acceptance into the PN Program.
- I accept the responsibility to validate that all copies of my transcripts and test scores are received by the Nursing Secretary (including those on file in other ANC offices). I will inform the Nursing Secretary of courses in which I am currently enrolled. I also accept the responsibility to have all transcripts from other colleges submitted and evaluated by the ANC Registrar.
- I have received the Arkansas State Board of Nursing Nurse Practice Act SUBCHAPTER 3 LICENSING §17-87-312 Criminal Background Checks Information. I understand that enrolling in and completing the PN Program does not guarantee me the ability to challenge the NCLEX-PN and become a Licensed Practical Nurse (LPN).
- I have received the Background Verification Policy and understand that, if selected for the PN Program, that I will be required to submit to a Criminal Background Check (CBC) by a third-party vendor. If found to be ineligible to complete clinical rotations due to an adverse or negative outcome from the CBC, I understand that I will not be able to meet clinical and program objectives and therefore dismissal from the program will be necessary.
- I have read and understand the Functional Ability Categories, Descriptions, and Representative Activities and Attributes.
- I understand that nursing is a discipline with cognitive, sensory, affective, and psychomotor performance requirements. I understand that, if necessary and if I meet certain documentation requirements of a disability, I must contact ANC Student Services at (870) 762-3180 to request accommodations.

I understand that my Application for Admission in the Practical Nursing Program will not be filed or considered unless my signature is on this form.

Printed Name
Signature (legible please)

#### Arkansas Northeastern College Practical Nursing (PN) Program Request for Exception or Waiver

#### Please complete and mail this form to:

Arkansas Northeastern College Attention: Practical Nursing Program P. O. Box 1109

Blytheville, AR 72316-1109

Exception to a prerequisite course/	curriculum sequence						
Request for Course substitution: Student must provide copy of College transcript with name and date course was completed, full course description from College Catalog. Copy of Course Syllabi recommended. Must be submitted & approved prior to the scheduled course as noted in PN							
							Curriculum Plan.
Extension of application deadline							
Missing or incomplete immunizations by application deadline							
Other requests/exceptions; please specify							
Explanation of Waiver Request (must cor	mplete and attach any suppo	orting documentation):					
This form is provided only for applicants v	who anticipate that one or mo	pre of the minimum requirements					
for admission into the Practical Nursing P	rogram may not be fulfilled b	y the application deadline. This					
form will be reviewed by the nursing facu	lty along with your application	on. Completion of this form does					
not guarantee approval of the request.							
Print Name:	Signature:	Signature:					
Contact Number:	Today's Da	Today's Date:					
E-mail Address:							
FOR NURSING OFFICE USE ONLY; DO NOT	T WRITE BELOW THIS LINE ************************************	********					
Review date	Approved	Disapproved					
Comments:							
Practical Nursing Director:		Date:					
Dean for Allied Health:		Date:					
Student Notified of Determination:		Date:					