

THE UNIVERSITY OF TEXAS AT TYLER

SCHOOL OF NURSING

NURS 5337 Delivery of Care

Syllabus, Summer 2017

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**Calls and e-mail are returned within 24 hours Monday through Friday unless out of town. If we do not return your call or respond to your e-mail within 24 hours, feel free to repeat.

The content of this syllabus is subject to change at the discretion of the faculty according to current learning needs

[University Policies referenced in Syllabus can be found at:
<http://www.uttyler.edu/academicaffairs/files/syllabuspolicy.pdf>

NURS 5337 Class Calendar—Summer 2017

Modules and weeks will begin on Monday and end on Sunday at Midnight.

Blue Font: Discussion Board postings

Green Font: Assignments Posted via Assignment Links

Orange Font: Important Reminders

Assignments and Discussion Boards are due by Midnight on Sunday to Canvas

Modules and Weeks	Focus	Assignments, Discussion Boards and Due Dates
<p>Module 1, Week 1 05/22/2017</p>	<p>Introduction of selves Organized Delivery Systems</p>	<p><i>This week, you will be addressing 3 items for DB#1. Please refer to the document in the Discussions tab on Canvas, Discussion Boards Sum 2017 for instructions and details for all discussion board requirements this summer.</i></p> <ul style="list-style-type: none"> • <i>Your introductions (post on main class DB)</i> • <i>Identification of your group's name</i> • <i>Organized delivery systems (post on group DB under your group's name).</i> <p><i>The other important thing to do this week is to meet with your preceptor to establish your clinical objectives for this semester (refer to the Clinical tab in Canvas for Clinical Reflective Journal (CRJ) Guidelines and CRJ Template).</i></p> <p><i>Your Preceptor/Facility Agreement MUST be approved by UT Tyler by the end of the first week of class. If you are unable to locate a preceptor, you may need to drop the course.</i></p> <div style="text-align: center;">  </div> <p><i>Don't forget to post your initial posting 2 days in advance so peers can have time to respond!!</i></p>

Readings for this week:

Dangremond, C.K. (2015). A visual overview of health care delivery in the United States. In J. R. Knickman & A.R. Kovner (eds.) *Health care delivery in the United States* (11th ed., pp. 13-27.) New York, NY: Springer Publishing Company.

Piña, I.L., Cohen, P.D., Larson, D.B., Marion, L.N., Sills, M.R., Solberg, L. I., & Zerzan, J. (2015). A framework for describing health care delivery organizations and systems. *American Journal of Public Health, 105*(4), 670-679.

<https://ezproxy.uttyler.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=a9h&AN=101696071&site=ehost-live&scope=site>

Optional:

Shi, L., & Singh D. A. (2017). Major characteristics of U.S. health care delivery. In *Essentials of the U.S. health care system* (4th ed., pp. 1-27). (this can be located in Module 1 on Canvas).



1. On your group's DB, post your group's name.
2. Note that this week's DB has 2 parts:
Introduction of yourself and Organized Delivery Systems
3. On the Main DB, Post your Introduction according to the instructions.
4. On your Group DB, post the 2nd part: organized delivery systems.

Due 5/22/17 through 6/4/17

<p>Module 2, Week 2</p> <p>05/29/2017</p>	<p>Reflective Leadership International Health Care Systems</p>	<p><i>This week you will be posting your group's country for the powerpoint presentation due 7/24/17, and submitting your individualized clinical objectives you want to achieve this summer.</i></p> <p><i>You will also be completing DB from Week 1.</i></p> <p>In preparation for your clinical reflective journals (CRJ), you need to read McDaniel and DiBella (2012), and Williams et al. (2009).</p> <p><u>Readings for this week include:</u></p> <p>Irwin, J.F. (2011). Nurses without borders: The history of nursing as U.S. international history. <i>Nursing History Review</i>, 19, 78- 102.doi: 0.1891/1062-8061.19.78. (Article to be provided.)</p> <p>McDaniel, E.A., & DiBella, H. (2012). Reflective leaders become causal agents of change. <i>Journal of Management Development</i>, 31(7), 663-671.Retrieved from http://dx.doi.org/10.1108/02621711211243863</p> <p>.</p> <p>Savage, G.T., Feirman, H., van der Reis, L. Myers, A., & Moxley,A.(2011). International health care: A twelve country comparison. In L.F. Zolper (Ed.), <i>Healthcare administration:Managing organized delivery systems</i> (5th ed.) (pp. 3-66). Sudbury, MA: Jones and Bartlett Publishers</p> <p>Williams, G.B., Geradi, M.B., Gill, S.L., Soucy, M.D., & Taliaferro, D.H. (2009). Reflective journaling: Innovative strategy for self-awareness for graduate nursing students. <i>International Journal for Human Caring</i>, 123(3), 36-43.</p>
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		 <ol style="list-style-type: none"> 1. On the class Main Discussion Board, post your group's choice of country for International Health Care Delivery Presentation Due 5/29/17 through 6/4/17 2. Clinical Objectives (refer to Bloom's Taxonomy and Clinical Objectives under the Clinical tab in Canvas) Due 6/4/17
<p>Module 3, Week 3</p> <p>06/05/17</p>	<p>Models of Care Delivery</p> <p>Nursing Leadership Matters: Leading in the New Age of Health Care</p>	<p><i>This week will shed light on the ANA's standards for nursing leadership and on models of care delivery via your group discussion boards. These are essential to be familiar with as you further enhance your respective roles as tomorrow's executive nurse leaders!</i></p> <p><u>Readings for this week:</u></p> <p>Roussel et al. (2016) Chapter 1</p> <p>The American Nurses Association. (2016). <i>Nursing administration. Scope & standards of practice</i> (2nd ed.). pp.5-18.</p>  <p>DB #2: Models of care delivery within your institution</p> <p>6/05/17 through 6/11/17</p>

<p>Module 4, Week 4</p> <p>06/12/17</p>	<p>International, National, State and Organizational Indicators</p>	<p><i>Measurement of how well we perform in our healthcare institutions and roles varies on global, national, state and local levels. Indicators are the criteria that we use to determine quality of care on multiple levels.</i></p> <p><i>This week we will examine these indicators and how they apply in our institutions through development of the 1st of 2 Environmental Scan Reports (ESR).</i></p> <p><u>Readings (select the most relevant for you) for this week:</u></p> <p>World Health Organization. (2016). GHO data. http://www.who.int/gho/publications/world_health_statistics/2016/en/</p> <p>World health Organization. (2012). World health statistics 2012: Part III Global health indicators. http://www.who.int/healthinfo/EN_WHS2012_Part3.pdf</p> <p>Gary Claxton, Cynthia Cox, Selena Gonzales, Rabah Kamal, Larry Levitt (2015), Measuring the quality of healthcare in the U.S. http://www.healthsystemtracker.org/insight/measuring-the-quality-of-healthcare-in-the-u-s/</p> <p>http://www.commonwealthfund.org/~media/Files/Publications/Issue%20Brief/2011/Jun/1510_Tollen_delivery_sys_reform_tracking_ib_v2.pdf</p> <p>http://www.sciencedirect.com/science/article/pii/S0149718915000932</p> <p>http://www.commonwealthfund.org/~media/files/publications/fund-report/2016/jan/1857_mossialos_intl_profiles_2015_v7.pdf</p>
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		 <p style="text-align: center;">Environmental Scan Report (ESR) #1</p> <p style="text-align: center;">Due 6/18/17</p>
<p>Module 5 Week 5 06/19/17</p>	<p>Interprofessional Collaboration and Teams in Professional Practice</p> <p>Organizational Structure and Accountability</p>	<p><i>This week we will be discussing the importance of interprofessional collaboration in professional practice.</i></p> <p><i>Evidence shows that interprofessional collaboration helps us to improve patient outcomes. We once again visit the ANA's standards for nurse leaders.</i></p> <p><i>Organizational structure and accountability will be reflected upon in your DB#3 as you discuss workflow, technologies, risk management and performance improvement.</i></p> <p><i>If you have 50% or more of your International Health Care Delivery powerpoint presentation completed, you may submit it for preliminary feedback. Although this is optional, it is strongly encouraged.</i></p> <p><u>Readings for this week:</u></p> <p>The American Nurses Association. (2016). <i>Nursing administration. Scope & standards of practice</i> (2nd ed.). P. 50</p> <p>Roussel et al. (2016) Chapter 3 & Ch. 6</p> <p>Interprofessional Education Collaborative (2016). <i>Core competencies for interprofessional collaborative practice: 2016 Update</i> http://www.aacn.nche.edu/education-resources/IPEC-2016-Updated-Core-Competencies-Report.pdf</p>

		<p>Suter, E.; Arndt, N.; Arthur, N.; Parboosingh, J.; Taylor, E.; & Deutschlander, S. (2009). Role understanding and effective communication as core competencies for collaborative practice. <i>Journal of Interprofessional Care</i>, 23(1), 41-51.</p>  <p>1. DB#3: Collaboration, Work Flow, Accountability</p> <p style="text-align: center;">Due 6/191 through 6/25/17</p> <p>2. Rough Draft International Health Care Delivery Presentation (50% must be completed to submit as a draft). Due by 06/25/17 (optional, but recommended)</p> <p style="text-align: center;">Due 6/25/17</p>
<p>Module 6, Week 6</p> <p>06/26/17</p>	<p>Maximizing Human Capital Managing Performance</p>	<p><i>In this day and age of rapid change, unpredictability, and new technology, it's almost impossible to keep up. Healthcare executives must maximize their workforce capabilities, yet at the same time facilitate efforts toward healthy balances.</i></p> <p><i>Emotional intelligence and other interesting concepts are presented by Roussel et al. (2016), plus, you will find it is not difficult to locate other pertinent literature on this subject as it pertains to health care.</i></p> <p>Roussel et al. (2016) Chapters 9 & 10</p> <p>1. CRJ #1 (minimum of 10 hours posted in this journal)</p> <p>2. ESR #2</p> <p style="text-align: center;">Due by 7/2/17</p>

<p>Module 7, Week 7 07/03/17</p>	<p>Information Management and Knowledge Development in Leadership</p>	<p><i>This is a week to ponder the interrelatedness of knowledge and information management to leadership.</i></p> <p><i>The Haughom (2016) citation actually incorporates several different articles in this one link, and it is highly suggested you read these. Much of the information relates to previous modules and will likely be helpful to you as you move forward in your leadership role and in your capstone course.</i></p> <div data-bbox="771 588 1494 903" style="text-align: center;">  </div> <p><u>Readings for this week:</u></p> <p>Haughom, J. (2016). Knowledge management in health care: It's more important than you realize. https://www.healthcatalyst.com/enable-knowledge-management-in-healthcare</p> <p>Roussel et al. (2016) Chapter 11</p>
<p>07/10/2017</p>	<p>Last Day to Drop with a W</p>	<p>Recorded on your transcript</p>
<p>Module 8, Week 8 07/10/17</p>	<p>Laws, Regulations, and Healthcare Policy Shaping Administrative Practice</p>	<p><i>This is a particularly interesting week, especially with our current state of affairs in the US regarding health care reform!</i></p> <p><i>Your last Discussion Board will immerse you into the news media to explore how current affairs may impact your leadership role in healthcare.</i></p> <p><u>Readings for this week:</u></p> <p>Roussel et al. (2016) Chapter 12</p>

		 <p>DB#4: Health care plan comparisons and contrasts Due 7/10/17 through 7/16/17)</p>
<p>Module 9, Week 9 07/17/17</p>	<p>Managing Risk in a Culture of Quality, Safety and Value</p>	<p><i>This week brings us into exploring safety and quality and how the magnet model facilitates optimal outcomes at all levels.</i></p> <p><i>In your readings you will likely note patient quality indicators that you can relate to as you complete your final CRJ next week. An effective leader must have a heightened consciousness of safety and quality at all times while carrying out one’s leadership role.</i></p> <p><u>Readings for this week</u></p> <p>Roussel et al. (2016) Chapter 13</p> <p>Institute for Healthcare Improvement. (2016). <i>Develop a culture of safety</i>. Retrieved from http://www.ihl.org/resources/Pages/Changes/DevelopaCultureofSafety.aspx.</p> <p>Doucett, J. (2012). Aligning systems with the Magnet Model to create a culture of safety. <i>Nursing Management</i>, 52-55. Retrieved from www.nursingmanagement.com.</p> <p>Brewer, B. & Verran, J.A. (2013). Measuring nursing unit environments with four composite measures. <i>Nursing Economics</i>, 31(5), 241-249. Retrieved from http://www.nursingeconomics.net/cgi-bin/WebObjects/NECJournal.woa.</p>

		 <p style="text-align: center;">Completed International Health Care Delivery Presentation</p> <p style="text-align: center;">Due 7/23/17</p>
<p>Module 10, Week 10</p> <p>07/24/17</p>	<p>Leaders Achieving Sustainable Outcomes</p>	<p><i>Your readings thus far should lead you in a focused direction for strategies to achieve sustainable outcomes at multiple levels in your organization.</i></p> <p><i>We are reaching the end of this course, and as you will note, there are multiple documents to submit!</i></p> <p>Roussel et al. (2016) Chapters 14</p>  <ol style="list-style-type: none"> 1. Final CRJ (CRJ #2) 2. Clinical Log to be signed by Preceptor 3. Preceptor Evaluation of Student (Qualtrics link for evaluation will be emailed to preceptor) 4. Student Evaluation of Preceptor 5. Evaluate PowerPoint Presentation of another group on Discussion Board. <p style="text-align: center;">Due by 07/30/17</p>

<p>Module 11 07/31/17</p>	<p>Excellence in Leadership & Ethical Implications</p> <p>Avoiding Blinded Healthcare Leadership</p>	<p><i>Though this is the final reading in this course, please take the time to read and absorb the importance of owning up to your values and ensuring your organization is doing the same. Nelson's article is excellent!!!</i></p> <p><i>You should by now have gained a solid sense of what it takes to be a strong, effective leader.</i></p> <p><i>Always remember we never stop learning, and always mentor within a culture of ethical responsibility.</i></p> <p>Nelson, W. A. (2014, Nov/Dec). Avoiding blinded healthcare leadership. <i>Healthcare Executive</i>, 29(6), 46-49.</p> <p>Roussel et al. (2016) Chapter 15</p>
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TITLE: NURS 5337: Delivery of Care.

COURSE DESCRIPTION: Focuses on the Delivery of Care within the Healthcare Environment at the organizational, community, state, and national levels. Enables the professional nurse to participate in the design of care delivery systems within healthcare organization in community, state and national environments.

CREDIT: 3 (2:1)

SEMESTER CREDIT HOURS: Three (3) credit hours, allocated as follows: Two (2) lecture hours per week. Thirty Seven and One Half (37.5) clinical hours over the entire semester, with a mutually agreed upon clinical preceptor

PREREQUISITES: NURS 5302 & NURS 5325 or consent of the instructor.

STUDENT LEARNING OUTCOMES/ COURSE OBJECTIVES: Upon successful completion of this course, the student will have demonstrated the ability to do the following:

1. Utilize state, national and organizational indicators of healthcare evaluation and outcomes incorporating interdisciplinary healthcare teams.
2. Synthesize strategic plan and vision integrating workflow design with emerging technologies, performance improvement and risk management strategies to assure positive patient outcomes.
3. Incorporate theories of management systems, process and analysis in the design and implementation of new models of care delivery and coordination.
4. Integrate socio-cultural competence, effective communication, and state, national and international quality indicators to facilitate patient centered care within community organizations.

TEXTBOOKS:

American Psychological Association. (2009). *Publication manual of the American Psychological Association*. (6th ed.). Washington, D.C.: Author. (ISBN 1433805618)

Roussel, L., Thomas, P.L. & Harris, J.L.(2016). *Management and leadership for nurse administrators* (7th ed.). Burlington, MA: Jones & Bartlett Learning. (ISBN: 978-1-284-06762-0)

The American Nurses Association. (2016). *Nursing administration. Scope & standards of practice* (2nd ed.). Silver Springs, MD: Nursebooks.org. (ISBN-13: 9781558106437)

COURSE REQUIREMENTS AND EVALUATION:

1. Discussion Boards	30%
2. Environmental Scan Reports (ESRs) (Two @ 15% each))	30%
3. International Health Care Delivery Group Presentation	20%
4. Clinical Reflective Journals (CRJ) (2 @ 10% each)	20%
5. Clinical (to include satisfactory completion of 37.5 clinical hours and submission of required clinical logs, journals, and preceptor evaluation by due dates on Calendar	*Pass/Fail

***Clinical failure will constitute a course failure.**

TOTAL 100%

The requirements for these can be found on the following Canvas tabs:

- Discussion Boards: on the Discussions tab
- ESRs, CRJs on Clinical tab
- International health Care Delivery Group Presentation on the Assignment tab
- All other clinical-related documents are located on the Clinical tab

GRADING SCALE:

90-100: A
 89-80: B
 79-70: C
 69-60: D
 59 and below: F

The student must achieve an average of 80% to successfully complete the course. (Please note: Written Assignments will be submitted through Turnitin. Turnitin is a feature provided by Canvas that is designed to detect plagiarism or non-original student work. Your instructor may set up this feature so that when you submit papers, they are automatically sent through Turnitin. The program checks your work against a comprehensive database of source material including previous students' work and other papers and materials found on the web. An originality report will be generated that indicates the percentage of non-original material (text that matches existing sources) found in your paper. The purpose of using Turnitin in your course is to ensure you are writing original papers and to encourage you and all students to properly attribute all sources used.)

ACADEMIC INTEGRITY: Students are expected to assume full responsibility for the content and integrity of all academic work submitted as paperwork and examinations. The official policy is available in the *Graduate Nursing Student Guide* and the *UT Tyler Student Guide*.

EXPECTATIONS OF STUDENTS

1. Participate in course learning activities. These activities will focus on application of concepts presented in required reading.
2. Students are responsible being familiar with all course expectations to include information provided within the syllabus and all the information and announcements posted in Canvas.
3. *****Students are expected to check their university email and Canvas announcements at least every 2 working days.***** Since this is an online course much of the communication from faculty will be through Canvas and email.
4. **Course Number (NURS 5337) along with issue in subject line in any emails to faculty to facilitate responses to student email.** Properly identified student emails are first to be read and receive a response.
5. Students are expected to make arrangements for online access to course even while traveling. Since this is an online course, lack of internet access during travel etc will not be considered an acceptable excuse for lack of timely participation in course activities.
6. All assignments will be turned in on the date assigned unless **PRIOR** arrangements have been made with the faculty prior to the assignment being due. Late work will only be accepted at the discretion of the faculty. **If student finds it necessary to submit an assignment late, they are expected to request an extension at least 24 hours before assignment is due, provide a valid reason for requesting the extension, and provide an action plan for completion and submission of assignment to include planned day and time of submission. A five (5) point deduction may be taken for each day the assignment is late.**
[Calendar week begins on Monday and ends on Sunday at midnight.
7. Faculty check emails daily during the work week. Do not expect responses on the weekend. Business travel during the work week may cause some delays but we are committed to communicate with you in a timely manner, so if there are any problems, we will work together to solve them.
8. All assignments including clinical journals and logs will be submitted to the appropriate assignment link. **NO** assignments will be accepted by email except at the discretion of the instructor.
9. Should students find it necessary to withdraw from the course for any reason, the student is strongly encouraged to notify the graduate nursing advisor and the course faculty as a matter of professional courtesy.

EXPECTATIONS OF FACULTY

1. Respond to student emails and discussion board questions in a timely manner. Contact faculty again if you do not have an answer to your question after one working day.
2. Be available **by office phone or cell phone** during office hours posted under Faculty in Canvas.

CLINICAL REQUIREMENTS

The following are required of each student in the course:

1. Thirty seven and a ½ (37.5) hours of clinical with a preceptor. This Preceptor is preferably a registered nurse who has either a Master of Science in Nursing (MSN), Master of Business Administration (MBA), or a Masters of Health Administration (MHA). Students are discouraged from using a preceptor who is in an educator role at the facility. Faculty to have final approval of a preceptor assignment. (Students may bank up to ten hours of clinical between semesters.)
2. Validation of a facility agreement/contract between clinical agency and the School of Nursing (SON) must be evident. The SON is required to have a facility agreement/contract with any agency in which students are participating in clinical experiences. Students cannot start their clinical until this agreement is in place. Since some course activities are contingent on the clinical, the agreement must be in place **by the beginning of the first week of the semester**. If this is not the case the student may be expected to arrange clinical at another agency with whom the SON has an agreement or may be expected to withdraw from the course.
3. A signed preceptor agreement before starting clinical must be obtained **by the beginning of the first week of the semester**.
4. Students will provide the required documents (i.e. confidentiality statement, proof of immunization requirements, etc.) requested by the education department at the respective facility (even if it is the student's place of employment) in which the student will be doing the clinical experience.
5. Student and clinical preceptor will collaborate to develop clinical objectives with the goal of enhancing the student's role as a nurse leader/administrator before beginning clinical.
6. A clinical log and two clinical reflective journals (CRJ) documenting student experiences will be developed and submitted.
7. A signed clinical log, preceptor's evaluation of the student, and the student's evaluation of the preceptor will be submitted at the end of the course. (Faculty will email preceptor with a link in which to evaluate the student online.)
8. Student may use an educational activity to meet up to five clinical hours. Activity must have some type of focus on Nursing Administration/Leadership and must include contact hours. In addition student must obtain faculty approval prior to the activity.

UNIVERSITY POLICIES

The following University policies must appear on each course syllabus or be provided as an informational sheet (web-links to these policies may be used in the print or electronic syllabus) <http://www.uttyler.edu/academicaffairs/files/syllabuspolicy.pdf>.

Students Rights and Responsibilities

To know and understand the policies that affect your rights and responsibilities as a student at UT Tyler, please follow this link:

<http://www.uttyler.edu/wellness/rightsresponsibilities.php>

Grade Replacement/Forgiveness and Census Date Policies

Students repeating a course for grade forgiveness (grade replacement) must file a Grade Replacement Contract with the Enrollment Services Center (ADM 230) on or before the Census Date of the semester in which the course will be repeated. Grade Replacement Contracts are available in the Enrollment Services Center or at <http://www.uttyler.edu/registrar>. Each semester's Census Date can be found on the Contract itself, on the Academic Calendar, or in the information pamphlets published each semester by the Office of the Registrar.

Failure to file a Grade Replacement Contract will result in both the original and repeated grade being used to calculate your overall grade point average. Undergraduates are eligible to exercise grade replacement for only three course repeats during their career at UT Tyler; graduates are eligible for two grade replacements. Full policy details are printed on each Grade Replacement Contract.

The Census Date is the deadline for many forms and enrollment actions that students need to be aware of. These include:

- Submitting Grade Replacement Contracts, Transient Forms, requests to withhold directory information, approvals for taking courses as Audit, Pass/Fail or Credit/No Credit.
- Receiving 100% refunds for partial withdrawals. (There is no refund for these after the Census Date)
- Schedule adjustments (section changes, adding a new class, dropping without a "W" grade)
- Being reinstated or re-enrolled in classes after being dropped for non-payment
Completing the process for tuition exemptions or waivers through Financial Aid

State-Mandated Course Drop Policy

Texas law prohibits a student who began college for the first time in Fall 2007 or thereafter from dropping more than six courses during their entire undergraduate career. This includes courses dropped at another 2-year or 4-year Texas public college or university. For purposes of this rule, a dropped course is any course that is dropped after the census date (See Academic Calendar for the specific date).

Exceptions to the 6-drop rule may be found in the catalog. Petitions for exemptions must be submitted to the Enrollment Services Center and must be accompanied by

documentation of the extenuating circumstance. Please contact the Enrollment Services Center if you have any questions.

Disability Services

Disability/Accessibility Services: In accordance with Section 504 of the Rehabilitation Act, Americans with Disabilities Act (ADA) and the ADA Amendments Act (ADAAA) the University of Tyler at Texas offers accommodations to students with learning, physical and/or psychological disabilities. If you have a disability, including non-visible diagnosis such as a learning disorder, chronic illness, TBI, PTSD, ADHD, or you have a history of modifications or accommodations in a previous educational environment, you are encouraged to visit <https://hood.accessiblelearning.com/UTTyler> and fill out the New Student application. The **Student Accessibility and Resources (SAR)** office will contact you when your application has been submitted and an appointment with Cynthia Lowery, Assistant Director Student Services/ADA Coordinator. For more information, including filling out an application for services, please visit the SAR webpage at <http://www.uttyler.edu/disabilityservices>, the SAR office located in the University Center, # 3150 or call 903.566.7079.

Student Absence due to Religious Observance

Students who anticipate being absent from class due to a religious observance are requested to inform the instructor of such absences by the second class meeting of the semester.

Student Absence for University-Sponsored Events and Activities

If you intend to be absent for a university-sponsored event or activity, you (or the event sponsor) must notify the instructor at least two weeks prior to the date of the planned absence. At that time the instructor will set a date and time when make-up assignments will be completed.

Social Security and FERPA Statement:

It is the policy of The University of Texas at Tyler to protect the confidential nature of social security numbers. The University has changed its computer programming so that all students have an identification number. The electronic transmission of grades (e.g., via e-mail) risks violation of the Family Educational Rights and Privacy Act; grades will not be transmitted electronically.

Emergency Exits and Evacuation:

Everyone is required to exit the building when a fire alarm goes off. Follow your instructor's directions regarding the appropriate exit. If you require assistance during an evacuation, inform your instructor in the first week of class. Do not re-enter the building unless given permission by University Police, Fire department, or Fire Prevention Services.