

The University Senate met in regular session at 3:00 p.m., Monday, February 9, 1976, in the Court Room of the Law Building. Chairman Malcolm Jewell presided. Members absent: C. Dwight Auvenshine\*, John G. Banwell\*, Harry Barnard\*, Charles E. Barnhart, Betsy Barnum, Jerry M. Baskin\*, Robert P. Belin\*, Joanne Bell\*, Jack C. Blanton, Joan Blythe,\* Garnett L. Bradford, Joseph T. Burch, Hugh Burkett\*, H. Stuart Burness\*, Carl Cabe, Donald B. Clapp, Necia Coker\*, Ronda S. Connaway\*, Foy Cox, Alfred L. Crabb, Rhonda Crowdus, Vincent Davis\*, John A. Deacon\*, Robert J. DeAngelis, Patrick P. DeLuca\*, George W. Denmark\*, William H. Dennen\*, Ronald Dillehay, Mary Duffy, Anthony Eardley, Fred Edmonds\*, Robert O. Evans\*, Diane Eveland\*, Art Gallaher\*, Claudine Gartner\*, Dennis George\*, James Gibson, Ward O. Griffen\*, Joseph Hamburg, George W. Hardy, James Harralson, Virgil W. Hays\*, Andrew J. Hiatt, Sara L. Holroyd\*, Raymond R. Hornback, David Howard\*, Raymon D. Johnson\*, William F. Kenkel\*, James Knoblett\*, Theodore A. Kotchen\*, A. Virginia Lane\*, Thomas Lawrence, Samuel Lippincott\*, Charles Masters, William L. Matthews, Susan A. McEvoy\*, Randolph McGee\*, James Metry\*, Stacie Meyer, James T. Moore\*, Jacqueline A. Noonan\*, Elbert W. Ockerman\*, Janet Patterson\*, Margie Peak, David Peck, Steven Petrey, Jeanne Rachford\*, John A. Rea\*, Thurlow R. Robe\*, JoAnn Rogers\*, John S. Scarborough, Rudolph Schriels\*, Otis A. Singletary\*, John T. Smith, Don M. Soule\*, M. Lynn Spruill, J. Truman Stevens\*, Sharon Stevens\*, William C. Templeton\*, Earl Vastbinder, M. Stanley Wall, Richard Warren, Julie Watkins\*, Paul A. Willis, William G. Winter, Fred Zechman, Ellen Roehrig\*.

The minutes of the meeting of December 8, 1975 were accepted as circulated.

On behalf of the College of Agriculture Dr. William Schneider presented the following Resolution on the death of Dr. Clair S. Waltman. Following his presentation the Senators were asked to stand for a moment of silence in tribute and respect to Dr. Waltman and in acceptance of the Resolution.

Clair S. Waltman (1896 - 1975) a member of the Horticulture Department from 1924 - 1967 died on December 24, 1975. He had been retired since 1967.

He was a native of Michigan and graduated from Michigan State University in 1923. He received the M.S. degree in 1930 from the University of Kentucky and the Ph.D in 1940 from Michigan State University. Dr. Waltman served in the Horticulture department as teacher and researcher until his retirement in 1967 after 43 years of service. He taught the beginning horticulture course for much of this period, all of the other pomology courses and served as advisor to graduate students in Pomology. Students enjoyed "Walt's" courses because he made them so interesting with his wide knowledge and wonderful sense of humor and his personal approach to the students. He remembered them for many years after they left the University. Dr. Waltman also devoted much of his time to research with fruits in the area of nutrition and variety evaluation.

Dr. Waltman was an avid supporter of University of Kentucky athletic teams and was interested in all sports. He was an excellent bowler and bowled in the University league for many years. He also enjoyed fishing and in his later years often took his grandson on fishing expeditions - it is difficult to say who enjoyed them most.

Clair Waltman was an outstanding teacher and a true gentlemen.

The Faculty of the College of Agriculture wishes to express to Mrs. Waltman and his daughter, Betty, their deep sympathy and feeling of mutual sorrow in the loss of this beloved teacher, associate and friend.

\*Absence explained.



I move that this Resolution be spread upon the minutes of the University Senate and that copies be sent to Dr. Waltman's family.

Chairman Jewell made the following remarks to the Senate:

As most of you know, the Senate Council and the Senate Council Chairmanship change as of the first of the year, and that is why I am before you instead of Dr. Krislov. We have three new Senate Council members: Professors Paul Oberst, Secretary of the Senate Council; Constance P. Wilson; and Richard Robe.

Looking through the minutes of the previous Senate meetings I find that there is a very inconsistent precedent that the incoming Chairman make some remarks. So I decided to strengthen that precedent.

I want to say a little bit about how I think the Senate should operate and how we plan to operate during the next year. I have been on the Senate approximately half of the time in the 18 years that I have been here and I have seen it operating very well and very efficiently, and making some very intelligent decisions, and I have heard some very interesting debates. I have also seen the Senate, on occasion, doing, I thought, very poorly.

I think the job of the Council is to make sure the Senate does what it can do best with the least amount of time being wasted. I think the Senate operates best when its members understand the issue, are well informed about it, either because it is a matter that they know intimately, like problems of tenure, or because it is a matter that they have been well informed about through committee reports, through material being distributed, et cetera. In those areas, and there are many of them, where most of us know very little about details of a proposal, what we need to make the Senate work well is detailed Committee reports, a lot of information, a lot of explanation to us, as Senate members, about why a particular proposal is being brought forward, because this is an extremely varied University. Most of us not in the Medical Center know and understand very little about what goes on over there. Conversely, the Medical Center people have relatively little contact with many of the problems and questions that arise elsewhere in the University. All of us, from time to time, find ourselves grappling with problems of admission or problems of professional programs that we don't encounter in our day-to-day work within our own departments and our own fields. It is in those areas that we are particularly dependent upon committee and staff work, in effect, for information. This is one reason why we have deluged you with a very long description of this Nursing program that we are going to be dealing with today. It seemed to me that we needed enough information so that members of the Senate would not come in to this meeting completely unprepared.

We will try not to waste the time of the Senate. I suspect it costs us \$1500 to \$2000 in salaries for a meeting of the Senate and we shouldn't be spending that amount of valuable time just sitting here talking. I believe if we have briefing or information sessions, they should be kept as brief as possible with as much written background as possible. I think it is important to keep the members of the Senate informed. I think it is important to keep the members of the faculty and students who are not on the Senate well informed and I will try to see if the Council cannot explore some ways during the next few months to get more information and interchange back and forth on this campus about important issues that are coming before the Senate or that are being explored by Senate committees. I think we need to improve the information channels on campus.



Several years ago I was the Chairman of a Committee which reported a number of proposals for changing the committee structure of the Senate to strengthen the committee system. I think the plan we came up with, which was adopted, has done that. I think we succeeded in spreading the work load and in spreading the responsibility. What we were trying to do and what we are continuing to try to do is to engage the members of the Senate in the work of one committee of their choice, whenever possible, on a continuing basis for the entire three-year term, unless the Senator has some reason for particularly wanting to shift committees, so that we will develop, among other things, continuity on these committees. We are depending on the committees for continuing exploration of issues and problems in their field of jurisdiction. The Council may send to the committees, from time to time, specific suggestions, proposals, and recommendations. But we are counting on the committee members to become familiar with the issues under their jurisdiction and to initiate suggestions themselves. This requires several things to work. It requires that Senators go to committee meetings. It requires that they take an interest in the committees. We are not talking about "make" work; we are not talking about trying to keep everybody busy running to meetings. We are simply suggesting that unless these committees are working effectively, and most people are putting some time into them, the whole system will fall apart. I think it may be that some of the committees need reorganizing; maybe some of them are too big; maybe some of them are too broad in scope--one of the things we intend to look at before the end of the semester. Some committees, because of the nature of their jobs, regularly have things they need to work on like Academic Programs, and Admissions and Standards. Other committees have more general oversight or study responsibilities, and more of the initiative rests with them. I think any one of us who has ever been in the Senate any length of time or in the University any length of time, has served on committees and found that work often very frustrating. Sometimes you make reports and nobody ever does anything with them. Sometimes you make reports and someone tells you someone else made that report a couple of years ago and you are just repeating what someone else has already done, and no one told you about it. I have sometimes felt that the only committees that were any good at all were the ones in departments, because at least they were small enough so that there was some fighting chance that what you recommended would actually be carried out.

So what I think we have to do to make the committee system work is to avoid duplication of committee effort; avoid situations where one committee in the Senate is working on something and another committee elsewhere is working on something and no one knows what the other is doing; coordinate the work of committees. Perhaps we need, for lack of a better term, an "institutional memory", a filing system, a centralized way of keeping track of what has been done in the past by some of these reports so that when a committee sets out to deal with a problem, it has a record of what other groups, or other committees, have thought about such a problem over the last several years. Surely we ought to be able to handle that. And I think we need to make sure that something is done with committee reports when they are made. When reports of committees come to the Senate Council, we will take these reports seriously; we will look at them. We may send them back to committee for additional advice, suggestions, or modifications, but we will not simply swallow them and let them disappear. Then we will bring them to the floor and, if for any reason the Council fails to bring them to the floor, the Senate Committees themselves have the authority, under the Rules of the Senate, to do so after a period of months. In other words



we don't have any veto in the Council over reports of Committees. But it does sometimes make sense to hold these things up a while until it is clear what the problems are, what possible jurisdictional conflicts involving other committees come up, what questions the committees may not have thought of, et cetera. In other words, it sometimes makes sense for a Council to sit on a committee report for a while, to send it back to committee, or to talk to committee members about it, but not to bury it.

I suspect that one of the things the Senate has not been doing as well as it might, and its committees have not been doing as well as they might, is taking some long-term looks at problems facing the University. In fact, the Committee I previously mentioned that I was on that tried to reorganize the Senate structure and the committee structure, felt that there was need from more long-term appraisal and long-term consideration of some of these problems that we don't seem to have time to deal with in the rush of immediate problems. We are still trying to find ways of doing that very effectively. I would like to invite you to send to me, or to send to the Council, letters, suggestions of any kind about problems you think the Senate ought to be dealing with over the next several years, things that are coming down the road at us that we ought to start thinking about. I would like suggestions about ways we ought to focus on this unending problem of trying to come to grips with the needs and priorities and goals of the University. Do you have suggestions about things we ought to be doing along these lines, or the more immediate things that you think the Senate ought to be studying that we don't seem to be paying any attention to. I think we need to have continuing oversight of some of the newer and experimental programs of the University--things like the Developmental Studies Program, The Experiential Education program, the General Studies Program in Arts and Sciences.

One of the things we suggested several years ago that ought to be done is to develop some policy statements--a booklet or a folder of policy statements that the Senate would adopt, to supplement or complement the Senate Rules. We haven't done that yet. But it might help us a little to see what the gaps are in our policy-making, the things we have failed to pay attention to.

We have, in this University, one of the strongest Senates, I suspect in any university in the country. I think in recent years we have matured a lot; we have developed some rules and procedures of operating; we have outgrown confrontation among students and faculty members and administration; we have developed some very close working relationships. We are not in a position where we have to assert the power and authority of the Senate. What we have to do is find ways of using the authority and the intelligence of the Senate as efficiently as possible.

Let me turn to a few remarks about the "No smoking" Resolution adopted in this place two months ago. I do not have any recommendation to bring to you from the Council on implementing this. But I want you to understand we have not ignored it. If you will recall, after this resolution was passed, without any details being put into the resolution on the rationale for it or how it might be enforced, Dr. Cochran asked the Senate to tell the Administration how to go about enforcing it, and this problem was referred to the Senate Council. The Senate Council has spent parts of two meetings wrestling with this problem. I have met with the President and other members of the Administration on it. Dr. Zumwinkle and Dean Burch have studied it; the Advisory Committee on the Student Code has studied it; so it is not that we have been ignoring the problem. We did send a memo from the Council to



every member of the faculty suggesting what steps we thought should be taken to comply with the letter and the spirit of the resolution regarding not smoking in class and making sure that students knew and were reminded of this policy. In the process of drawing up that statement and discussing it, I think we arrived at an agreement in the Council that the justification for the Senate's adopting this policy was that it seemed to create an atmosphere in the classroom conducive to learning and to protect the rights of those students who really were seriously disadvantaged by smoking in the classroom. Some of us on the Council felt that perhaps we could get by without detailed complex rules for enforcement and perhaps the thing would be sort of self-enforcing. Other members of the University community, and I think some of the Administration, felt that probably that would not do; that the problem had come up and we had to have some way of settling it. There have been suggestions around the campus that somebody ought to be enforcing this thing. I think we all agree on the Senate Council that one cannot enforce the policy in any strict sense until mechanisms for doing so have been set up. The problem then is to find some way of putting something in a logical place in the Senate Rules so that the policy can be enforced. Let me just mention three approaches that we have tried, so far unsuccessfully, so that you will see the problem.

The Senate Council suggested to the Administration that it might be possible to attach to the Student Code in Section 1.21 a. of Part I, where there is a ban on interfering with the rights of others on University property, a specific statement that smoking in the classrooms did interfere with the rights of others. The Advisory Committee on Student Code Revision decided that it was inappropriate to attach it to that section, which they felt was designed for other kinds of interference. Furthermore, they felt that the ban on smoking should not go anywhere in the Student Code but in the Academic Code, Part II--the part for which the Senate has responsibility.

The Senate Council considered a plan to define, under the Academic Rights of Students, a right to attend class in an atmosphere conducive to learning, which included no smoking. The idea would be that faculty would enforce this by dropping anyone from a course who persisted in refusing to obey a request not to smoke. The Council rejected that because the Student Rights Section does not have other enforcement procedures; because of a feeling that faculty members should not have the right to throw a student out of a class for smoking probably because they don't have the right to throw them out of class for cheating and plagiarism. So that approach, which seemed for a few hours like it might be the way to do it, failed.

A third possibility is to create a new academic offense--parallel with the cheating and plagiarism offense. It seems to some of us that that is incongruous, that it is not a parallel kind of situation. Whether we could broaden that section and have a clause on behavior in the classroom, that anyone who disrupts the atmosphere of a classroom, or who smokes, would be engaged in an academic offense, I don't know. This is another possibility. But it is difficult because the entire enforcement procedure in that section is built around plagiarism and cheating. You start with giving a student an F on an exam. It doesn't make much sense to give them an F on an exam if they are smoking during that exam. But at least that is another possibility. And it is possible that under academic offenses we can find a way to do it. We are still searching for a method that will make sense; we are still searching for an answer to the



question of whether it is reasonable to expect faculty members to enforce this by dropping students from class; we are still searching for a way of protecting the rights of those students who are bothered by smoking without infringing on the rights of students who engage in that behavior in the classroom. I certainly hope that before this semester is over we can get this solved in a way that will be generally satisfactory to everyone. In the meantime, we hope that the system will work on a voluntary basis. Maybe as time goes by we will learn something about how well it is working or not working.

On behalf of the Graduate Faculty Dr. Wimberly C. Royster, Dean of the Graduate School, presented the proposed candidates for honorary degrees at the May 1976 Commencement. Dr. Royster presented four candidates with the request that the names be withheld until the Board of Trustees has taken action and the nominees have accepted. Following his presentation the Senate voted to accept the four proposed candidates for recommendation to the President and Board of Trustees.

On behalf of the Senate Council, Professor Paul Oberst presented a motion that the proposal of the College of Nursing for a new two-year program (circulated to the faculty under date of January 26, 1976) be approved, as follows:

1. The freshman class admitted in Fall, 1975, shall be the last freshman class accepted into the College of Nursing.
2. At such date as shall permit the freshman class of 1975 to complete the existing curriculum in nursing without detriment or deficit, the present four-year curriculum of the College of Nursing shall be discontinued.
3. The College of Nursing undergraduate program shall become an upper division professional program admitting licensed registered nurses, and leading to a baccalaureate degree in Nursing.
4. Approval in principle of the proposed nursing curriculum, with the understanding that the College of Nursing will submit through normal channels the specific new curriculum with the requisite applications to add and drop courses.

Chairman Jewell called on Dean Marion E. McKenna of the College of Nursing to present the background for this proposal. Dean McKenna's remarks follow:

The College of Nursing, given the consent of this Senate, is preparing to embark upon a curriculum designed to prepare nurses for future roles in the health care delivery system in Kentucky. This is not to suggest that our present program does not have value, but there are current and emerging roles for nurses for which there is no academic program in the Commonwealth. Because of our location in a university medical center, we believe we are in a position to provide leadership in the preparation of nurses for these new roles while other programs may continue to prepare for beginning staff nurse positions.

There have been marked changes since 1960. When the College of Nursing first began its program, there were no associate degree programs in Kentucky; today there are 17, which in November, 1975 had 2,297 students enrolled. There were no primary care practitioners in nursing. Today they are a vital part of the health care delivery system in Kentucky and over the nation.



Given that some form of national health insurance will be forthcoming in the near future, and 215 million citizens will be seeking health care as opposed to acute or "sick" care, it will be essential that health personnel be prepared in sufficient numbers to meet the demands. Experience and research have indicated that nurse personnel will continue to be the largest segment of the delivery system.

For these reasons, the College of Nursing is proposing to provide an upper division program for registered nurses who have graduated from associate degree or diploma (hospital) schools of nursing. We propose to include nursing courses and general education courses designed to meet the area requirements of the University, and to prepare nurses for leadership roles in community nursing, long-term care facilities, and/or acute care institutions. Because we are now obliged, within our upper division program, to prepare the graduates to write a licensing examination, we are deterred from providing the types of educational courses and experiences designed to broaden the scope of practice of the baccalaureate graduate.

The students will transfer 60 semester hours of credit from the associate degree program, and will complete 68 semester hours in the two years of the University upper division.

This program is in accord with the recommendations made by the National Commission for the Study of Nursing and Nursing Education in 1973:

- "1. Increasingly, the two-year institutions will become feeder schools to the baccalaureate programs. Students will enter upper division courses possessed of formidable amounts of knowledge and skill, and already licensed to practice as a registered nurse.
- "2. Four-year institutions must not only reorganize themselves to admit these students, but must cope with the fact that what they have been doing in 'upper division' courses must be sharply altered to provide a true continuation of education with the expanded electives and deepened scientific and clinical content."

In addition, it is in accord with the recommendations made to the Council on Public Higher Education by the ad hoc Study Group on Nursing. "Develop a coordinated system of nursing education in Kentucky's institutions of higher education in which each program contains the entry level content for the next higher level of education, and students are awarded full credit for their previous education."

The College of Nursing faculty believe that we are, by virtue of the competence of our faculty and the resources available to us, in a position to conduct a program of professional education which is academically sound, designed to assist in meeting Kentucky's need for health care personnel, and available to conduct research on nursing education and nursing practice to continue to improve the quality of both areas.



MINUTES OF THE UNIVERSITY SENATE, FEBRUARY 9, 1976 - cont

You have had the written material about the proposed changes and if there are any questions, I will be happy to respond to them.

Following a question and answer period the University Senate voted to approve the proposal of the College of Nursing for the new two-year program in the College of Nursing, as presented.

The Senate adjourned at 4:06 p.m.

Kathryne W. Shelburne  
Recording Secretary



UNIVERSITY SENATE AGENDA

February 9, 1976

- 1) Minutes
- 2) Memorial resolution
- 3) Informational items:
  - a) Introduction of New Council Members
  - b) Chairman's Remarks
  - c) Implementation of No-Smoking Policy
- 4) Action items:
  - a) Candidates for honorary degrees.
  - b) Proposal of the College of Nursing for a new Two-Year Program (circulated under date of January 26, 1976).



UNIVERSITY OF KENTUCKY

DEAN OF ADMISSIONS AND REGISTRAR

February 11, 1976

Mrs. Gene C. Harmon  
109 Shawnee Place  
Lexington, Kentucky 40503

Dear Mrs. Harmon:

At its meeting of this past Monday, February 9, 1976, the University Senate heard the enclosed Resolution read on the death of your father and the Senate directed that the Resolution be spread upon the minutes of that meeting and that you be sent a copy.

We extend our sympathy to you in the loss of your father. He was a valued former member of the University faculty and made many fine contributions to the University of Kentucky.

Cordially yours,

Elbert W. Ockerman  
Secretary, University Senate

Enclosure



UNIVERSITY OF KENTUCKY  
LEXINGTON, KENTUCKY 40506

UNIVERSITY SENATE COUNCIL  
10 ADMINISTRATION BUILDING

January 26, 1976

TO: Members, University Senate

FROM: University Senate Council

RE: AGENDA ITEM: Monday, February 9, 1976  
Proposal of the College of Nursing for a New  
Two-Year Program

The Senate Council has approved the following proposal of the College of Nursing, which had earlier been approved by the Academic Council for the Medical Center and by the Undergraduate Council:

1. The Freshman Class admitted in fall, 1975, shall be the last Freshman Class accepted into the College of Nursing.
2. At such date as shall permit the Freshman Class of 1975 to complete the existing curriculum in nursing without detriment or deficit, the present four-year curriculum of the College of Nursing shall be discontinued.
3. The College of Nursing undergraduate program shall become an upper division professional program admitting licensed registered nurses, and leading to a baccalaureate degree in Nursing.
4. Approval in principle of the proposed nursing curriculum, with the understanding that the College of Nursing will submit through normal channels the specific new curriculum with the requisite applications to add and drop courses.

The Senate Council will circulate materials providing background for this proposal and outlining the proposed curriculum prior to the February 9 meeting.

/cet



UNIVERSITY OF KENTUCKY

LEXINGTON, KENTUCKY 40506

ALBERT B. CHANDLER  
MEDICAL CENTER  
COLLEGE OF NURSING

TELEPHONE:  
(606) 233-5406

February 2, 1976

MEMORANDUM

TO: Deans, Department Chairmen, and Members of the University Senate

FROM: Marion E. McKenna *Marion E. McKenna*  
Dean

SUBJECT: Proposed Changes  
College of Nursing Undergraduate Program

The Faculty of the College of Nursing has approved and submits for your approval the following:

1. The Freshman Class admitted in fall, 1975, shall be the last Freshman Class accepted into the College of Nursing.
2. At such date as shall permit the Freshman Class of 1975 to complete the existing curriculum in nursing without detriment or deficit, the present four-year curriculum of the College of Nursing shall be discontinued.
3. The College of Nursing undergraduate program shall become an upper division professional program admitting licensed registered nurses, and leading to a baccalaureate degree in nursing.
4. Approval in principle of the proposed nursing curriculum, with the understanding that the College of Nursing will submit through normal channels the specific new curriculum with the requisite applications to add and drop courses.

MEM/gb



UNIVERSITY OF KENTUCKY  
COLLEGE OF NURSING

Curriculum Proposal

Background Information:

An individual who wishes to become licensed as a registered nurse may select one of three portals of entry: the hospital-based diploma school, the community college-based associate degree program, or the University-based program leading to the baccalaureate degree. Successful completion of any one of these programs will permit the graduate to write the licensing examination which is prepared by the National League for Nursing, Inc. It is one unique element of nursing education that with the development of each successive type of program the previous program was not eliminated.

In Kentucky, only two diploma schools remain. There are five University programs leading to the baccalaureate degree and a sixth program has accepted students but has not yet graduated any. There are 17 associate degree programs. Almost since the inception of the community college program, nationally, in the early 1950's, there have been pressures exerted upon the universities to arrange for the facilitation of the upward mobility of the graduates of the community college programs so that those individuals might acquire the baccalaureate degree without loss of credit and time. For years before that, graduates of diploma programs had great difficulty understanding why they didn't get credit for their nursing courses when they decided to seek admission to baccalaureate programs. The problem which these nurses shared with physicians, lay persons, and hospital administrators was a lack of understanding of university requirements in general and university nursing programs in particular. The community college nursing program offers approximately half of its two year curriculum in nursing courses and the graduates of these programs and others have argued that the lower division nursing courses were perfectly legitimate ones and should be accepted as such by the universities. The university programs have responded that the upper division courses set on a base of general education and liberal science prerequisites is a different entity from the diploma and associate degree programs. The College of Nursing of the University of Kentucky has addressed this problem through the use of challenge examinations as encouraged by the general University policies. Nonetheless, many graduates of community college programs have felt that the requirement for the challenge examination was an unnecessary barrier to progress.

In examining the role and function of baccalaureate education, the College of Nursing conferred with a number of groups before proceeding in the development of this proposal for new curriculum. One of the groups with whom we conferred were those whom we might call providers of nursing services. These are the people who hire professional nurses to provide nursing services. We asked them what kinds of skills they'd like to see baccalaureate graduates come with. Among the things they wanted were basic middle management skills; the ability to practice in critical care units; and the ability to teach other personnel how to practice in critical care units. At the present time, the graduates of our baccalaureate program are prepared to become professional practitioners. We do not



now expect, nor could we ever expect, to graduate a skilled technician prepared for immediate practice competence from the kind of program which we currently offer. Our present program is predicated upon offering our students the courses and experience which would lead to cognitive ability and beginning skills, and thereafter expecting them to develop both the technical skills and the other competencies which come with practice.

At the present time, the baccalaureate program of the College of Nursing, University of Kentucky, is essentially a "two and two" program. There are two years of prerequisites and area requirements and general studies, and two years of upper division nursing subjects. Two years of nursing does not accomplish what we believe the future of nursing requires, and since the community colleges are already in the business of offering nursing in the lower division, it appears to us that it would be very advantageous to admit students with that lower division nursing and build our upper division on that base. This will enable the College of Nursing to offer junior and senior level work which goes beyond our present offering since the time currently used to teach students the fundamentals of nursing may be put to other uses.

Table II will demonstrate the comparison between the area requirements of the University and the general studies courses currently taken by a majority of associate degree students. With the electives written into the new program, graduates of associate degree programs will be able to complete the area requirements of the University. In addition to this, the community college faculties are already working with us, and it appears likely that students showing interest in and promise for the baccalaureate program, as set forth here, will be advised to use their elective hours within the community college program and to take electives which will fulfill area requirements. Numbers of the prerequisites currently needed by students in our present program also fulfill area requirements and in this same way students in the new program will be able to fulfill area requirements while acquiring essential course work in the upper division.

As the curriculum of the College of Nursing now stands, all students in the upper division take four 10-credit courses in nursing. These courses are psychiatric-mental health nursing; maternal-child nursing; medical-surgical nursing; and community nursing. Each of these courses has a supportive course in drugs and drug administration given for us by the College of Pharmacy and, in addition, all students take a 2-credit course in nursing leadership and a 3-credit course in the nursing profession. These, plus some available elective hours, make up the upper division. Over the years, there have been changes in nursing and especially in the last seven years since our last major revision in curriculum. The reader will note a reference to "Abstract in Action" which is the third volume in a series written by a commission on nursing which was established to point the way to the direction of the future. One big portion of that direction for the future is the increased independent practice for professional nurses. An element of that increased independence is the ability of the practitioner to make a physical assessment on patients under the nurse's care and to draw conclusions from the data thus assembled. This capability is written into the first semester of the proposed new curriculum. In addition to the element of independence which has been predicted, there will also be a decreasing use of hospitals for the care of the ill. The care of patients in their own home environments will increase, as will the opportunities for ambulatory care, and the really big increase in prevention



of illness and maintenance of health. These differences can be seen in the curricular change. Structurally, a major difference will be that, rather than students acquiring the area requirements and prerequisites and general studies prior to their nursing education, the nursing courses and their supportive non-nursing courses will be taken simultaneously throughout the four years. The upper division will combine nursing and non-nursing courses very much as the lower division in the community college did.

There may ultimately be some small negative balance in the science courses taken in our current curriculum and those which will be taken in the proposed curriculum. For those sciences which will not be included in the new curriculum, there is no evidence, which was available to us, to demonstrate that those missing science courses are essential to the cognitive or technical skills requisite for the practice of nursing.

The College of Nursing Bachelor's and Master's programs are accredited by the National League for Nursing, the national voluntary accrediting agency for nursing. Our next visit is scheduled for 1979, but we will notify the League of the proposed changes if the Senate approves, and it is anticipated that they will move the visit date to an earlier one. In any event, we will pursue the continuation for national accreditation under the new program.

There has been some concern about whether graduates of our proposed program would be acceptable by graduate programs in nursing. Most accredited master's programs will state that they expect their applicants to be graduates of accredited baccalaureate programs in nursing. And, given that it is the intention of this College of Nursing to maintain an accreditable program, there would be no problem with the acceptance of graduates of this College.



Comparison of UK area requirements and typical community college requirements of nursing students.

Area Requirements	UK Community Col.		Midway	KY State	Morehead	Eastern	Cumberland
	Pattern A	Pattern B					
English	6	6	6	6	6	6	6
I Mathematics and Philosophy			Phil 3		Phil 3		Rel. Phil 3
II Physical Sciences	Chem 4				Nut 3	Chem 4-5 Nut 3	
III Biological Sciences	A&P 4 Micro 4	Int. Bio 8	Ana 4 Pgy 4 Micro 4	Ana & 6 Pgy Micro 3	Ana 3 Pgy 3 Micro 3	Ana 3 Pgy 3 Micro 4	Int. Sci 10
IV Foreign Languages					(Med. Term.)2		
V Humanities							
VI History							
VII Social Sciences	Soc 3	Soc 3	Soc 3	Soc 3	Mental Health3 Psych 3		Soc 3
VIII Behavioral Sciences	Psych 3 G&D 3	Psych 3 G&D 3	Psych 3 G&D 4	Gen. Psych 3 G&D Psych 6			Psych 3 G&D 3
ELECTIVES	6	9	0	6	1	6*	6
NURSING	32	32	35	38	35	34	37
TOTAL HOURS	65	64	66	71	63	64	71

\*Restricted to History or GSS. (Unless GSS or Soc. Sci. sequence taken, students would not meet admission requirements as stated)



CURRENT CURRICULUM

U.K. College of Nursing

Prerequisite Courses for Nursing

The following courses are considered essential to the understanding of the professional nursing courses and therefore must be completed before a student enrolls for the junior year. Some of these requirements coincide with the General Studies requirements, as explained in the preceding section.

ENG 101 and 102 English Composition	6
CHE 105, 106, and 108, 115 Elementary General Chemistry (meets Area II requirement)	10
PSY 104 and 106 Basic Psychology I and II (meets Area VIII requirement)	6
PHY 151 Introduction to Physics	3
SOC 101 Introduction to Sociology	3
NUR 108 Introduction to the Nursing Prof.	1
ANA 206 Elementary Anatomy	3
PGY 810 Principles of Human Physiology	5
MB 200 Principles of Bacteriology	4
BSC 212 Growth and Development	3
BSC Behavioral Factors in Health and Disease(22)	3
NFS 302 Nutrition	3
NFS 311 Nutritional Biochemistry	4
NUR 201 Fundamentals of Health and Nursing	4
	<u>57</u>

The required nursing courses with clinical components are:

NUR 811 Maternal-Child Care Nursing	10
NUR 815 Drugs and Drug Administration: Maternal-Child Health	1
NUR 821 Psychiatric-Mental Health Nursing	10
NUR 827 Drugs and Drug Administration: Psychiatric-Mental Health	1
NUR 831 Medical-Surgical Nursing	10
NUR 833 Drugs and Drug Administration: Medical-Surgical Nursing	1
NUR 836 The Nursing Profession	3
NUR 839 Leadership in Nursing Service	2
NUR 841 Community Health Nursing	10
NUR 847 Drugs and Drug Administration: Community Health Nursing	1
	<u>49</u>
NURSING Electives	8
	<u>57</u>

2 Typical Patterns, Associate Degree Nursing Programs

FIRST SEMESTER

English	3 Credits
Integrated Human Biology	4 Credits
Nursing	8 Credits
	<u>15 Credits</u>

SECOND SEMESTER

Psychology	3 Credits
Integrated Human Biology	4 Credits
Nursing	8 Credits
	<u>15 Credits</u>

THIRD SEMESTER

English	3 Credits
Psychology of the Child	3 Credits
Elective	3 Credits
Nursing	8 Credits
	<u>17 Credits</u>

FOURTH SEMESTER

Introductory Sociology	3 Credits
Electives	6 Credits
Nursing	8 Credits
	<u>17 Credits</u>

FIRST SEMESTER

English	3 Credits
Anatomy and Physiology	4 Credits
Psychology	3 Credits
Nursing I	7 Credits
	<u>17 Credits</u>

SECOND SEMESTER

English	3 Credits
Psychology of the Child	3 Credits
Chemistry	4 Credits
Nursing II	6 Credits
	<u>16 Credits</u>

THIRD SEMESTER

Elementary Medical Microbiology	4 Credits
Introductory Sociology	3 Credits
Nursing III	9 Credits
	<u>16 Credits</u>

FOURTH SEMESTER

Electives	6 Credits
Nursing IV	9 Credits
Nursing V	1 Credit
	<u>16 Credits</u>



Summary  
of  
College of Nursing's Curriculum Proposal

- "1. Increasingly, the two-year institutions will become feeder schools to the baccalaureate programs. Students will enter upper division courses possessed of formidable amounts of knowledge and skill, and already licensed to practice as a registered nurse.
  
2. Four-year institutions must not only reorganize themselves to admit these students, but must cope with the fact that what they have been doing in 'upper division' courses must be sharply altered to provide a true continuation of education with the expanded electives and deepened scientific and clinical content."<sup>1</sup>

<sup>1</sup> National Commission for the Study of Nursing and Nursing Education, From Abstract into Action, Jerome Lysaught, Director, McGraw-Hill Book Company, New York, 1973, p. 159.



The College of Nursing of the University of Kentucky has been the leader in innovation in nursing education in Kentucky since its inception in 1960. After the development of the first baccalaureate program in nursing in the state, the Dean and faculty of the College involved themselves in the development of Community College nursing programs in Kentucky. Then, in 1970, the Master's program in nursing accepted its first class. The undergraduate curriculum was unique, and served the Commonwealth well. With changing needs for health services and nursing services, the curriculum of the undergraduate program has undergone appropriate change, the University Senate recommending.

Until 1969, the College of Nursing program began in the student's sophomore year. In 1969 the College was made to conform to an upper division design, as the University moved to that design. At that time also began the influx of students into the College of Nursing. This was in response to the dual press of an increase of college-age and college-bound students, and the economic recession which made health careers with their assurance of job opportunities increasingly attractive. The above circumstances placed the faculty of the College of Nursing in the position of producing in two years of professional study a graduate capable of becoming licensed and of performing in leadership roles in nursing. As we moved from 40 graduates in 1970, to 142 in 1975, there was not concomitant increase in faculty numbers, nor of teaching facilities nor clinical facilities.

A changing consciousness of health care as a basic human right is permeating Kentucky and the nation. Already recognized as a basic American privilege is the educational opportunity which would permit every individual upward mobility to the height of individual potentiality. Into this set of circumstances came the move of the Federal legislature toward a National Health Insurance plan. These and other happenings need to be woven into the fabric of nursing that has as a profession, preached and practiced prevention of illness, and maintenance of health for many years.

For some twenty years, efforts have been made in one school and another, in one State and another, to develop systems of nursing education which have become known as the "career ladder," such that a student could move from the original gateway to nursing through the educational hierarchy - if the student possessed the ability and motivation to do so - without taking a step back for every two steps forward.

Now the College of Nursing is determined to continue to offer the leadership in nursing education which has been its role since the beginning. Plus ça change, plus c'est la même chose. After studying the nursing needs of the people of the Commonwealth, and with the consultation of purveyors of nursing services, faculties of associate degree nursing programs, and faculties of baccalaureate degree nursing programs, we have concluded that our best contribution can be made through the acceptance of that portion of the collegiate graduates of non-baccalaureate degree granting nursing programs who qualify and who wish to continue their preparation. The new upper division program will be so constructed as to prepare these graduates at the first professional level (B.S.N.) in ways which are responsive to the changing health and nursing needs of the people of Kentucky and the nation. Such needs include those for family nurse practitioners, nurse mid-wives, pediatric nurse practitioners, critical care nurses, and nurses competent in middle management in hospitals and other health care agencies.



Given the probable resources of the next decade, the faculty of the College of Nursing have concluded that we cannot maintain the four-year generic program in nursing while developing a new upper division program as discussed. We seek to establish an articulated, compatible system of nursing education between the two-year and the four-year which will accommodate the career mobility of licensed, practicing nurses.

There are any number of variations on the theme of educating a professional nurse. Two of the popular four year patterns are illustrated below:

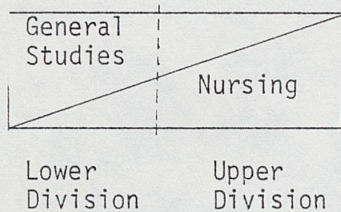


Figure 1

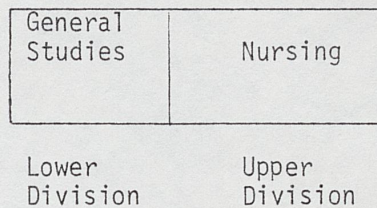


Figure 2

Figure 3 illustrates the proposed curriculum design:

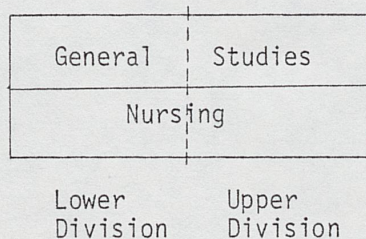


Figure 3

There are eighteen community college nursing programs in Kentucky. Students are prepared in two years to take the licensing examination in nursing and to perform the basic practice of nursing. In 1974, these programs graduated 719 people and in 1975, 763. This is a total of 1482 plus 368 graduates in the same two years from the hospital-based diploma programs, (1850).

There are five baccalaureate nursing programs in the Commonwealth including this College of Nursing. These programs accept high school graduates into freshman classes. In 1974 and 1975 the graduates number 244 and 301 respectively, totaling 545.

If this College of Nursing is permitted to become the first college in Kentucky to facilitate the educational mobility of the registered nurse as we attempt to meet the changing health needs of the Commonwealth, high school graduates determined to attend generic baccalaureate programs in nursing may still do so through the other baccalaureate programs in the state. The large pool of associate degree graduates in Kentucky and in the nation, is sure to provide more applicants for our new program than can be accommodated. This has been the experience of the similar programs developed within the last few years in California, Indiana, Colorado, Nebraska, and Georgia.



## CHARACTERISTICS OF GRADUATES

Graduates of this program will be able to:

1. Use a scientific methodology--i.e., the nursing process--in assessing, planning, implementing, and evaluating nursing care.
2. Demonstrate skill in nursing assessment.
3. Demonstrate nursing competency with patients/clients having diverse health problems.
4. Demonstrate nursing competency in more than one health care setting.
5. Incorporate current research findings into nursing practice.
6. Accept accountability and responsibility for all professional nursing decisions made.
7. Assume the role of patient/client advocate.
8. Utilize principles of teaching and learning in nursing practice.
9. Utilize principles of leadership in the management of patient care and in coordinating the efforts of health care workers.
10. Evaluate the influence of other systems on the development and practice of nursing.
11. Take an active role in promoting health and in planning for health services in a changing society.
12. Take an active role in professional nursing organizations.
13. Articulate a personal philosophy of nursing.
14. Take responsibility for acquiring knowledge and skills to improve nursing practice.
15. Function collaboratively with other members of the health care system.
16. Provide for continuity of care through planning, referral and follow-up.

## CONCEPTUAL FRAMEWORK

The curriculum developed by the faculty of the College of Nursing is based upon a framework embodying the interrelated concepts of general systems, change, stress-adaptation, and crisis intervention.

Systems theory provides a framework by which we take a holistic view of clients, whether they are individuals, families, or communities. Within the context of systems theory, a person is seen as an open system in constant interaction with the environment, receiving input from it, and releasing output into it. One adapts on the basis of internal and external feedback received in order to maintain a dynamic equilibrium within his/her system.

Each nurse is also an individual system as well as a sub-system within the overall health care system. Nursing is concerned with assessing and altering, if necessary, the interactional patterns of individuals, their sub-systems and other systems significant to them. This would include using the nursing process to assist clients to maintain or restore adaptation as well as assuming a role as a change agent within the health care system.

The dynamic process of adaptation results from a person's attempts to cope with the stresses in the internal and external environment. Adaptation enables one to respond to changes in his/her systems by means of coping mechanisms. These coping mechanisms may be classified as innate or acquired; biological, psychological, or social in nature; and adaptive or maladaptive. Each individual has a range of capacity to adapt, but if this range is exceeded, crisis may result.



The basic nursing responsibilities are to support and promote adaptation in such a way that the client can maintain the highest level of health possible. The nursing process, which consists of assessing, planning, intervening, and evaluating, is used in order to assist the client whenever appropriate. Assessment involves recognition of the components of the individual suprasystem, system, and sub-system, consideration of the stress or stresses acting upon these systems, and determination of the effectiveness of his/her coping mechanisms. Nursing intervention involves modifying the individual's environment and/or assisting the individual in the utilization of adaptive capacities so that a positive response is possible.

In the process of exchanging matter and energy with the environment, a person is unalterably involved in a process of growth with its inherent potential for maturational and situational crises. Crisis theory postulates that "when man experiences excessive stress, and for a time, is unable to (1) utilize former coping measures, (2) call on support systems, (3) and perceive the event and his reaction without distortion, he is in crisis."<sup>1</sup> In this maladaptive state the person may need help to achieve effective resolution.

If the crisis is not satisfactorily resolved, the outcome tends to lead the individual into progressive maladaptation and ineffective patterns of coping. When positive change and reintegration at a higher level of mastery are the outcomes, the individual's subsequent coping abilities will be strengthened.

Through the use of the nursing process, the nurse determines appropriate actions to promote or support the client's adaptive or coping mechanisms or to supply the client with alternative choices in a planned effort to resolve the crisis and return the individual to at least his/her pre-existing level of functioning.

A person as a system is in constant interaction with a changing world and confronts continuous physical, psychological, and social changes. If the client's capacity to adapt to these changes is exceeded, the nurse can act as a change agent to implement preventive, therapeutic, and rehabilitative interventions in order to assist in maintaining equilibrium. The nurse also institutes change by being aware of and incorporating current research findings into nursing practice and, thereby, functions as a leader/role model for others.

Within the health care system, ". . . through both participation and collaboration, (nurses) must respond to the vast number of variables with constructive, deliberate changes in the ways and means of coping with health problems."<sup>2</sup> The concern of nursing is not only those variables which have a direct relationship to health and health problems, but also with every aspect of the phenomenological field in which the nurse and the client exist.

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<sup>1</sup>Barrell, Lorna Mill. "Crisis Intervention: Partnership in Problem Solving." Nursing Clinics of North America, Vol. 9, No. \_\_\_ (March, 1974), p. 15.

<sup>2</sup>Bevis, Em Olivia. Curriculum Building in Nursing: A Process. St. Louis: C.V. Mosby Co., 1973, p. 79.



## LEVEL OBJECTIVES

The student will be prepared to:

	LEVEL I - End of Junior Year	LEVEL II - End of Senior Year
Research	Use selected research findings in practice.	Delineate areas for further nursing research.
Systems	Analyze various health care delivery systems in primary and secondary health care settings.  Utilize the tools of community assessment.	Collaborate with other members of the health care system in identifying and solving the health problems of individual/family/community.
Change	Identify the need for change and the process involved in creating change.	Initiate and participate in the process of change in relation to matters affecting the health care system and the quality of nursing care.
Leadership/ Management	Function as a member of the health care system in a variety of settings using leadership/management principles.  Evaluate functions of members of the health care system.	Employ leadership/management concepts & skills in working with groups of patients, clients, or personnel.  Collaborate with other members of the health care system and coordinates those activities affecting nursing practice.
Professional Role	Perform, with supervision, physical, psychosocial and community health assessments.  Interpret the role of nursing to other members of the health care system.  Accept responsibility for own acts.	Perfect skills of physical, psychosocial, and community assessment with consultation as indicated.  Assist in restructuring the role within the health care system and society.  Be accountable for nursing care rendered to individuals and groups under her management.



	LEVEL I - End of Junior Year	LEVEL II - End of Senior Year
Nursing Process	Utilize the nursing process in a variety of settings with all age groups.	Provide nursing care for individuals or groups with complex health problems.
Teaching/Learning	Utilize selected teaching/learning concepts in providing nursing care for individuals, families, and communities.	Employ a variety of teaching/learning methods and strategies in nursing practice.
Stress/Adaptation	Assess, promote and support healthy patterns of adaptation of individuals and groups.	Collaborate with individuals or groups to develop and initiate more effective patterns of adaptation when lifestyles have (or may be) altered by stress or illness.
Crisis Intervention	Intervene upon recognition of behavioral cues which indicate maturational or situational crisis whether real or potential.	Assist individuals or groups to anticipate a crisis and to act to prevent it.

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CURRICULUM EXAMPLE

JUNIOR YEAR

Semester I

Biology of Disease	4
Nursing Assessment	5
Introduction to Philosophy & Concepts	2
Concepts & Principles of Teaching/ Learning	2
Cultural Diversity & Implications	1
Elective/General Studies	3
	<hr/>
	17 credits

Semester II

Behavioral Science	3
Community Nursing	6
Introduction to Research	3
Concepts & Principles of Leadership/ Management	2
Elective/General Studies	3
	<hr/>
	17 credits

SENIOR YEAR

Semester I

Distributive Care I or Episodic Care I	8
Drugs & Implications	3
Electives/General Studies	6
	<hr/>
	17 credits

Semester II

Distributive Care II or Episodic Care II	8
Issues in Nursing	3
Electives/General Studies	6
	<hr/>
	17 credits

With this curriculum design, a student would have a minimum of 50 credits in upper division courses. Assuming students have earned 60 credits in lower division and completed two and a half of the area requirements, the upper division curriculum provides opportunity for the student to complete area requirements and earn 68 credits which is a total of 128 credits upon graduation.



## PROPOSED ADMISSION REQUIREMENTS

Application for admission to the upper division program leading to a Bachelor of Science in Nursing degree, may be submitted by registered nurses who meet the following prerequisites:

1. Registered nurse licensed to practice in Kentucky.
2. Graduate of a regionally accredited community college with an Associate Degree in Nursing. (see #7 in this section for an exception.)
3. Transferable college or university credits in:
  - a. English or acceptable equivalent 6 semester credits
  - b. Natural Science 10 semester credits
    - e.g. Anatomy
    - Physiology
    - Microbiology
    - Chemistry
    - Nutrition
    - Physics
  - c. Behavioral Science 6 semester credits
    - e.g. Psychology
    - Sociology
    - Growth & Development
  - d. Nursing 30 semester credits
  - e. Electives 8 semester credits

Transfer credits will be accommodated according to the University policy.

4. A grade point average of 2.0 or better in each of the following areas:
  - a. English
  - b. Natural Sciences
  - c. Behavioral Sciences
  - d. Nursing
5. Sound physical and mental health.
  - a. Physical examination within past year.
  - b. Tuberculin test within past year.
  - c. Up-to-date immunizations - e.g. tetanus, typhoid---
6. Any required course taken in an accredited college more than 5 years prior to admission request will be evaluated in this College to determine if in fact it will meet the program requirement, before the applicant is accepted.
7. The registered nurse who is a graduate of a diploma program will be considered for admission after earning college credits which meet the above requirements, by taking the courses or by examination (challenge) where those courses are offered.
8. Individuals whose credentials do not meet the regular requirements for admission, may submit their applications for review by a College of Nursing admissions committee.



#### PART-TIME STUDY

Registered nurses who plan to work toward the completion of the BSN degree on a part-time basis must seek advice from the College of Nursing with regard to planning a program of study.

Candidates for the degree who do not complete all requirements within a five-year period will have their records re-evaluated and may be required to repeat or take selected courses.

#### RECOMMENDATIONS

If there are more applicants than there are spaces in a given class, preference may be given to those who have

1. graduated from a National League for Nursing accredited program;
2. one year or more of experience in nursing prior to planned date of enrollment;
3. a grade point average of 2.5 or better;
4. clearly stated career goals congruent with the philosophy and objectives of this College.



Some questions which might be raised and the responses are as follows:

1. What, briefly, is the historical development of the current program?

The current program, begun in 1960, had 128 semester hours; 13 in nursing were offered in the Freshman and Sophomore years. In 1968, the University Administration requested that professional undergraduate programs be confined to the last two years. At that time the College of Nursing requested a five-year program but the request was denied by the Medical Center Academic Council and the Administration. In 1971, the program was 134 semester hours with a summer session between the Junior and Senior years. Because all faculty had 10-month appointments and were not available for summer teaching, and because the University administration requested colleges with requirements greater than 120 hours to review their programs and revise them, the College of Nursing eliminated the summer term and 14 semester hours.

The need to prepare the student to write the licensing examination limits markedly the type of educational program and experiences we can provide in two years. The Junior student in nursing, while cognizant of knowledge basic to nursing, i.e. anatomy, biology, etc., will have no knowledge of nursing and therefore must be taught basic nursing in the upper division.

2. What is unique about the new program in this state?

In the last five years, the health care delivery system has changed markedly and new roles for nurses have emerged in primary care particularly. In addition, new technologies have developed which require preparation of nurse personnel, such as surgical intensive care, cardiac intensive care, long-term care, etc. Currently, no academic program in Kentucky is providing this type of preparation, and it is being offered by service agencies in terms of on-the-job training. This severely limits the preparation and fosters a multiplicity of unapproved programs.

3. What are the advantages of the proposed curriculum in terms of upward mobility for registered nurses?

When the College of Nursing began, there were no associate degree programs in Kentucky. Today there are 17 of them, and in September, 1975 there were 2,297 students enrolled in them. These programs prepare the student to write the licensing exam to become a registered nurse, and to practice at the beginning staff duty level. Our conferences with the associate degree faculty revealed that a large percentage of their students wish to continue their preparation. Because the College of Nursing program is two years (of nursing) and prepares the student for the licensing exam, there is relatively little difference between the upper division program and the A.D. program as far as the nursing is concerned. Yet students wishing a B.S.N. degree take the lower division



prerequisites and the courses in the upper division they have not previously taken, i.e. community health nursing, and challenge the rest. This takes, however, some three years. The new program will enable a student to earn the B.S. degree in four years if, when she enters the A.D. program, she (or he) knows she wishes to continue her education. In any event, it would mean five academic semesters at the maximum.

4. What are the advantages of having this program at U.K.?

The faculty of the College of Nursing are highly skilled specialists in professional nursing. They can offer much more to nursing education than basic nursing skills. Given students who already have these skills, the faculty can expand upon this knowledge in those areas of student interest and societal need, i.e. primary care, long-term care, geriatrics, acute and tertiary care.

The resources of the Medical Center, University and the College of Nursing are such that we are in a unique position to provide leadership in the preparation of nurses for new roles through an academically sound program of education and to conduct the necessary research in nursing education and nursing practice.

5. Why do we not have Freshmen or Sophomores?

The College of Nursing could propose a lower division program designed to prepare nurses for the licensing examination, and thereby develop a feeder system for the upper division and allow students to enroll in the University as Freshmen. The program would be the same as that provided in a junior college, but it would be more expensive to operate since per capita university costs are greater than in community colleges in the nursing programs. In addition, Lexington and Fayette County are already inundated with basic students in nursing. Approximately 1400 nursing students use the clinical resources in this county--i.e. Lexington.



SENATE ABSENCES  
February 9, 1976

C. Dwight Auvenshine\*

John G. Banwell\*

Harry Barnard\*  
Charles E. Barnhart

Betsy Barnum  
Jerry M. Baskin\*  
Robert P. Belin\*  
Joanne Bell\*

Jack C. Blanton

Joan Blythe

Garnett L. Bradford

Joseph T. Burch

Hugh Burkett\*

H. Stuart H. Burness\*

Carl Cabe  
Donald B. Clapp

Necia Coker\*  
Ronda S. Connaway\*  
Foy Cox

Alfred L. Crabb

Rhonda Crowds

Vincent Davis\*

John A. Deacon\*

Robert J. DeAngelis

Patrick P. DeLuca\*

George W. Denmark\*

William H. Dennen\*

Ronald Dillehay

Mary Duffy

Anthony Eardley

Fred Edmonds\*

~~Calvin B. Ernst~~ *delegable*  
Robert O. Evans\*

Diane Eveland\*

Art Gallaher\*

Claudine Gartner\*

Dennis George\*

James Gibson

Ward O. Griffen\*

Joseph Hamburg

George W. Hardy

James Harralson

Virgil W. Hays\*

Andrew J. Hiatt

Sara L. Holroyd\*

Raymond R. Hornback

David Howard\*

Raymon D. Johnson\*

William F. Kenkel\*

James Knoblett\*

Theodore A. Kotchen\*

A. Virginia Lane\*

Thomas Lawrence

Samuel Lippincott\*

Charles Masters

William L. Matthews

Susan A. McEvoy\*

Randolph McGee\*

James Metry\*

Stacie Meyer

James T. Moore\*

Jacqueline A. Noonan\*

Elbert W. Ockerman\*

Janet Patterson\*  
Margie Peak

David Peck

Steven Petrey

Jeanne Rachford\*

John A. Rea\*

Thurlow R. Robe\*

JoAnn Rogers\*

John S. Scarborough

Rudolph Schriels\*

Otis A. Singletary\*

John T. Smith

Don M. Soule\*

M. Lynn Spruill

J. Truman Stevens

Sharon Stevens\*

William C. Templeton\*

Earl Vastbinder

M. Stanley Wall

Richard Warren

Julie Watkins\*

Paul A. Willis

William G. Winter

Fred Zechman\*

Joanna



ATTENDANCE SHEET  
February 9, 1976

Will up

43  
+?

- ✓ Marv E. McLean
- ✓ Kathryn L. Sallee
- ✓ Ruth A. Assell
- ✓ Patricia Horridge
- ✓ John Strickland
- ✓ Beth Hicks
- ✓ Jim Criswell
- ✓ Kurt C. Nae
- ✓ Lew Schmitt
- ✓ Elizabeth R. Clotfelter
- ✓ Anne C. Patterson
- ✓ Herman L. Vasey
- ✓ Al Frank ✓
- ✓ Howard H. Ruge
- ✓ KBRantz not severe member
- ✓ R. S. Benton
- ✓ Marc J. Wallace, Jr.
- ✓ Vincent P. Dimevich
- ✓ Brian J. Deadle
- ✓ W. R. R. R. R.
- ✓ J. J. Gruber
- ✓ John L. Ham
- ✓ Merl Hackbart

- ✓ Ron R. Kirkendall
- ✓ John L. Sallee
- ✓ Brad Austin
- ✓ John L. Bussell
- ✓ Laurel Tempus Kao
- ✓ Lyle Baek
- ✓ Lewis W. Corra
- ✓ Peter Skelland
- ✓ Suro I. Burgess
- ✓ Bottanch
- ✓ Mayorie Stewart
- ✓ Mitch Holland
- ✓ M. Jones
- ✓ Margaret E. W. Jones
- ✓ Bradley C. Canon
- ✓ Allan Jacob
- ✓ David Haeth
- ✓ Mayorie Crandall
- ✓ J. H. Field
- ✓ A. Whitwak
- ✓ ? Snor

Dr. Ernst  
illegible



ATTENDANCE SHEET  
February 9, 1976

43

- 1. Tom Brehm
- 2. Paul W. Payne
- 3. Patricia Cannon
- 4. G. G. Atterst
- 5. Jane M. Emanuel
- 6. Frank V. Cotton
- 7. General E. Adair
- 8. Sydney Almed
- 9. Anne Stone
- 10. P. Bosomworth
- 11. John Greening
- 12. Malcolm P. Jewell
- 13. S. Diachun
- 14. M. C. Lawson
- 15. Robert Ruhl
- 16. J. D. Buckholtz
- 17. Gerald D. Ashdown
- 18. R. M. Laggan
- 19. M. Wardlaw
- 20. P. A. Leese
- 21. C. Wilson
- 22. Lorne Cullers

- 1. Paul Fraud
- 2. Raymond H. Co
- 3. Donald E. Sands
- 4. Jesus Harris Jr
- 5. Philip Berger
- 6. Ralph L. Wiseman
- 7. Donald R. March
- 8. Arthur Kelly
- 9. Paul D. Sears
- 10. Gwen Mead
- 11. Kenneth Wellons
- 12. Thomas R. Ford
- 13. William A. Moody
- 14. Ernest G. Gletke
- 15. Bernard V. Fagan
- 16. Charles Byers
- 17. W. W. Eason
- 18. W. J. Hester
- 19. R. M. Marsden
- 20. John W. Sutherland
- 21. James Kemp

Serkland



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February 9, 1976

- ✓ P. S. Sabharwal.
- ✓ David F Ross
- ✓ Z. Govindarajulu
- ✓ J. Saffridge
- ✓ H H Bailey
- ✓ Frank Buck
- ✓ Robert Zimmirli
- ✓ W. P. Lyons
- ✓ B. C. Kass
- ✓ S. Ganti
- ✓ D. S. Levine
- ✓ Merle Carter
- ✓ Paul Pomon
- ✓ J. B. Collins
- ✓ R. T. Zorkow
- ✓ Clayton P. Orwig

- ✓ Ken Herbst
- ✓ John B. Stephenson
- ✓ O. Neal Weeks
- ✓ Mary Holland
- ✓ Matthew H. Welch
- ✓ Donald P. Cross



ATTENDANCE SHEET  
February 9, 1976

- ↓ Carolyn M. Umney
- ↓ Frank J. Pizzo
- ↓ Day Clawa
- ↓ Don Deidrich
- ↓ Roger Eichhorn
- ↓ Sam N. Leech
- ↓ Mary Evelyn Minter
- ↓ Willis A. Sutton Jr
- ↓ Louis Swift
- ↓ Jess Merrill
- ↓ Michael McLeod
- ↓ Judy Worell
- ↓ Mary Wilma Hargreaves
- ↓ Jean G. Swil

- ↓ Harold R. Binkley
- ↓ KB Valentini
- ↓ Anna K. Reed
- ↓ Joseph V. Swintarsky
- ↓ Donald L. Madden
- ↓ Kenneth Wright
- ↓ Merrill W. Packer
- ↓ Roland C. Quill
- ↓ J. N. Walker
- ↓ Harold Traurig
- ↓ L V Packer
- ↓ J W Gadden



VISITORS SHEET  
February 9, 1976

James O. Crawford  
Margaret Morgan  
J SODT