

**Coastal Bend College
Vocational Nursing
Program**

Student Handbook

2012-2013

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Coastal Bend College
Nursing Department Mission Statement

Links: Coastal Bend College Mission
Coastal Bend College Vision
Coastal Bend College Goals 1, 3, 6

Coastal Bend College Nursing Division will:

- Provide a quality nursing education by
 - Providing support and assistance to those who want to become a member of the nursing profession
 - Centering the student in all program processes
 - Incorporating current evidence based practices in delivery of the program
 - Providing current, accurate information to all (includes admission processes, the classroom and clinical)
 - Maintaining a safe learning environment
 - Establishing procedures which lead to development of safe competent practitioners
 - Recognize and value knowledge and abilities the student brings to the program
- Ensure transparency of program policies and procedures
- Ensure consistency of program delivery by:
 - Collaborating and networking both, internally and externally
 - Providing follow through/follow up to customers
 - Adhering to policies and procedures
 - Communicating concerns internally and externally
 - Actively listening to colleagues
 - Allowing no exceptions unless exceptions are previously identified

The nursing faculty will:

- Strive to promote a sense of excitement in and for the nursing education program
- Strive to excite students about learning
- Provide every opportunity for student success within boundaries of program and CBC policies
- Incorporate regulatory and accreditation standards in the program's curriculum
- Model professionalism by exhibiting, appropriate behaviors, dress and attitudes
- Utilize the current standards in nursing education
- Actively engage in professional development
- Establish and maintain consistent standards
- Respect the diverse student population

Goals: Incorporate new technologies
 Build student esteem
 Facilitate restoration of the student's holistic balance
 Strive to produce quality graduates that evolves with the profession

Department of Nursing
PHILOSOPHY

| | |
|--------------------|---|
| Nursing: | Nursing is a unique calling and a dynamic profession incorporating the concepts of caring, thinking, lifelong learning and professionalism in practice. |
| Nurses: | Synthesize knowledge from the arts and sciences into a theoretical base which is used to provide individualized, holistic care for clients and families in a variety of settings. Nurses use a systematic approach to plan, implement and evaluate delivery of care to the client and family. |
| Program: | Responsive to health needs of clients in the local community. The goal of instruction within the program is to produce a safe, accountable, adaptive generalist who collaborates with members of the health care team and the client/family to achieve positive health outcomes. Program competencies will be designed to prepare the graduate to enter the workforce at the entry level. |
| Teaching/Learning: | Process is individualized, collaborative and focused on the ever changing environment. The teaching/learning process occurs in an environment where the student is an active participant in setting goals and evaluating learning experiences and competencies. Andragogy, the art and science of helping adults learn, will be the guiding principle applied to teaching /learning strategies. |
| Student: | The student is accountable for his own learning, is self directed and highly motivated. |
| Graduate: | Will embody the eight core components (professional behaviors, communication, assessment, clinical decision making, caring interventions, teaching and learning, collaboration and managing care) and the competencies attached to the components. The graduate, as the entry level nurse will also embody the roles (member of the profession, coordinator of care, provider of care, and patient safety advocate) of the nurse. |

Program Director Philosophy

| | |
|---------------|--|
| The program: | <ul style="list-style-type: none"> Provides a quality education Supplies a safe, competent, nursing workforce Remains current with developments in nursing education Technologically current Attuned to the needs of the community Provides variety of teaching methods Attuned to learning needs of diverse student population |
| The faculty: | <ul style="list-style-type: none"> Content experts Qualified (Regulatory, accreditation agencies) Confident Creative Remains current through professional development activities Competent (seeking certification, advancing education, developing technology skills and/or developing SREB competencies, NLN competencies, Work experience) Knowledgeable of applicable regulatory requirements Proactive Student friendly Treats students with respect Maintains open communications Functional team members Contributes to the quality of the program |
| The students: | <ul style="list-style-type: none"> Safe competent practitioners of nursing Questioning Respectful of others Accountable for learning and needs to acquire knowledge Pass NCLEX |
| Community: | <ul style="list-style-type: none"> Involved with program activities Partner |

Program Director's Mission Statement

I will be trustworthy in all endeavors

I will align myself with the Coastal Bend College Mission of providing student centered education with integrity, an educational culture that supports creativity, professional development and promotes excellence in all areas.

I will strive to empower faculty and students to achieve the highest potential possible.

I will treat my colleagues and students with respect, without prejudice and with trust.

I will endeavor to incorporate the tenets of stewardship in delegated tasks. Results not process will be the criteria for evaluation.

Coastal Bend College
Vocational Nursing Program
Organization and Administration

CBC Board of Trustees

President-Coastal Bend College
Dr. Beatriz Espinoza

Dean of Instruction
Dr. Bruce Exstrom

Director of Nursing Education
Betty Sims, RN, MSN, FRE

**Alice Campus
Instructor**
Loana Benedit RN

**Beeville Campus
Lead Instructor**
Diane Addison, RN

**Kingsville Campus
Lead Instructor**
Idotha Battle, RN, BSN

**Pleasanton Campus
Lead Instructor**
Irma Trevino, RN, BSN

Instructor
Michelle Lopez, RN

Instructor
Olma Weaver, RN

Instructor
Floyd Green RN

Instructor
Sylvia Jupe, LVN

Professional Tutor
Melanie Reeves, LVN

Professional Tutor
Marisol Garcia, LVN

Professional Tutor
Sheryl Denkler, LVN

Professional Tutor
Debbie Norment, LVN

Secretary
San Juanita Resendez

Secretary
Pauletta Gomez

Secretary
Jamie Bowers

Secretary
Kimber Faver

Accommodations

Special accommodations will be made for students with documented special needs. Documentation of accommodations **must be** presented from the office of the Vice President of Student Services to the instructor at the beginning of **each** course. It is the student's responsibility to seek documentation and to present it to the instructor

You will be required to sign this and other documents indicating receipt of policies on the first day of class.

STUDENT ACKNOWLEDGMENT OF:

A. Policies and Procedures

I have received a copy of the Vocational Nursing Handbook to include policies as follow:

Mission and Philosophy Statement(s)
 Pre-Screening_Requirements
 Code of Professional Conduct
 Readmission / Transfer Policy
 Sexual Harassment
 Student Information and Consent Form
 Policies and Procedures
 Lab Criteria
 Examination and Finals
 Confidentiality Agreement
 Classroom Activities and Demeanor
 Program Complaint Process
 Capstone
 Student Enrollment
 ATI Testing
 Student Declaration
 Drug Testing
 General Statement
 Personal Appearance
 Standard for Background Check(s)
 Clinical / Lab Uniform Policy
 Background Checks (Negative/Positive)
 Attendance Policy
 BON Rules and Regulations
 §213.28, §213.29 and §213.30,
 NPA 301. 252-253, 301.257, 301.452-69
 Absentee Committee
 Clinical Absences

B. Review and Changes

I understand that Coastal Bend College Vocational Nursing Program has the right to review and change any policy/procedure at anytime during the program. Policy and procedures are subject to change if deemed necessary. I will be informed of these changes and have an opportunity for comment. A signed notification that I have received information regarding the change will be placed in my file.

I have read or had read to me the policies of the Vocational Nursing Program.

Pre-Screening Requirements

Pre-Screening Requirements

A drug screening test and criminal background check will be conducted prior to acceptance into the Vocational Nursing program. Results must be in the Directors' office before admittance into the program. Verification of satisfactory results must be received by the participating facilities i.e. hospitals, clinics, child-care centers, etc. If a student is seeking to re-enter into the program, he/she must re-submit a drug screen and criminal background check, if applicable, before readmission. If there is any criminal and/or drug substance abuse history, an individual may be disqualified from consideration in the Vocational Nursing Program.

A. Background Checks

1. All students are referred to the Board of Nursing rules and regulations regarding eligibility for licensure. These include Texas Occupations Code §§301.252, 301.257, and 301.452-.469 and rules 213.27-30. The complete statute and rules are located at: <http://www.BON.state.tx.us/nursinglaw/>. Selected Board of Nursing rules begins on page 39.
2. **Criminal Background Checks**
Currently, all prospective nursing students will undergo a criminal background check conducted by the Board of Nursing. Evidence of a clear background or a completed Declaratory Order from the Board of Nursing must be received in the Nursing Department prior to the start of the semester (the deadline date will be indicated by letter to each prospective student).

STANDARD FOR BACKGROUND CHECKS

A prescreening requirement has been introduced into some of CBC clinical affiliation agreements. This prescreening requirement is the same as that required of hospital employees. The rationale for extending this requirement to clinical students was the concept of due diligence and competency assessment of all individuals whose assignments bring them in contact with patients or employees. Competency extends beyond technical skills to an individual's criminal history. This approach ensures uniform compliance with the Joint Commission (JCAHO) pertaining to human resource management. Moreover, the public is demanding greater diligence in light of the national reports of deaths resulting from medical errors. Successful completion of a background check does not guarantee licensure or employment after graduation.

A. TIMING

All background checks will be conducted prior to acceptance to the CBC Vocational Nursing program with a verification of satisfactory results. The results will be honored by all hospitals for the duration of the student's enrollment in the CBC Vocational Nursing program.

For students re-entering the Vocational Nursing program a second time, refer to Readmission policy.

B. COST

All Students will bear the cost of this requirement and it is non-refundable.

C. PROCESS

Students passing the Admissions Test will undergo the Board of Nursing Criminal

background check. Only those students with clear background or those with a completed Declaratory Order will be considered by the selection committee. The following histories will disqualify an individual from consideration for the clinical rotation.

1. Felony convictions/ deferred adjudications for the sale, possession, distribution, or transfer of narcotics or controlled substances.
2. Misdemeanor convictions or felony deferred adjudications involving crimes against person (physical or sexual abuse).
3. Misdemeanor convictions related to moral turpitude (prostitution, public lewdness/exposure, etc.).
4. Registered sex offenders.

D. VERIFICATION/NOTIFICATION

The Board of Nursing will notify the Vocational Nursing program of all individuals who fail a criminal background check. Notification is accomplished by communication directly from the Board of Nursing to the Department of Nursing Director. Each applicant will also receive notification from the Board of Nursing. A clear background check or evidence that the Declaratory Order Process has been completed must be received in the Nursing Department before selection of new class.

STUDENT SUSPECTS ERROR IN BACKGROUND CHECK

In the event that the student feels that an error has been made in the results of the criminal background check, it is the responsibility of the student to contact the Board of Nursing for a verification check and the student is responsible for any cost associated with this check. Other than error relative **to identity**, there will be no appeal of this policy.

1. It is the student's responsibility to be aware that the disqualifications listed above are used for employment eligibility by most hospitals in Texas.
2. Completion of the Vocational Nursing program will be affected by the student's ability to successfully complete the required clinical rotation.
3. Clinical rotations are completed at sites specified by and contracted with Coastal Bend College. Coastal Bend College will not locate or provide alternative sites for clinical rotations for students ineligible to attend clinical rotations at the specified sites. Therefore, if the student is unable to attend the clinical rotation, the student will be dropped from the Vocational Nursing Program.
4. It is the responsibility of Coastal Bend College to inform the clinical affiliates prior to enrollment in this curriculum. This will give student's prior notice and an opportunity to decline the clinical training before investing their time and money in this class.
5. It is the student's responsibility to notify the nursing program director, if at any time throughout the Vocational Nursing program, a misdemeanor or felony is received.

B. Drug Screening

Each individual student is considered to be a responsible adult and is expected to act accordingly. Competency extends beyond technical skills to an individual's criminal and substance abuse history. This approach ensures uniform compliance with Joint Commission on Accreditation of Health Care Organizations (JCAHO) standards pertaining to human resource management.

1. Any student entering a field that requires background criminal check and/or drug screening by respective employers and/or clinical sites will

follow standards established by Coastal Bend College.

2. A student is considered to be "on the job" for the purposes of this policy wherever he/she is acting on behalf of the college i.e. going to and from clinical sites, the clinical lab or the classroom.

Testing for Drug Use

Drug screening test(s) are conducted as part of the Vocational Nursing Program, prior to acceptance and while enrolled in the program.

1. A student will have drug testing "**for cause**", at the discretion of the college or clinical/lab affiliate. Failure to comply will result in immediate drop from the Vocational Nursing program. **Example:** Nancy Nurse arrives at the clinical site or school impaired and/or acting suspiciously. Only Nancy Nurse will be tested "for cause."
2. **All students** may/will be subject to drug testing at any "random time" at the discretion of the college or clinical/lab affiliate. Failure to comply will result in immediate drop from the Vocational Nursing program. **Example:** all students will have drug testing prior to admission to the Vocational Nursing Program. All students may also have drug testing later that year prior to graduation.

Method of Testing

Drug screening procedures will be conducted by a FDA approved and vendor approved testing laboratory. **Only** CBC Vendor approved sites will be accepted. You may **NOT** use prior drug testing from previous jobs.

Allocation of Cost

Each student must bear the costs of these requirements and it is non-refundable. This is to include any cost associated with the drug screening test to include transportation to and from the testing facility.

Notification

The drug screening vendor will notify the College of all individuals who fail the drug testing. Verification of the compliance with these standards will be sent to the designated representatives. College administration may be notified of positive results of the drug testing. The student's name and social security number will be the only information provided to the college administration.

Confidentiality

Confidentiality will be ensured. In the event that the student feels that an error has been made in the results of the drug testing, it is the responsibility of the student to contact the external vendor for a verification of the drug testing.

Alternate Candidates

Alternate candidates are subject to drug testing prior to being placed on the alternate list. The student is responsible for the cost of the testing and will be responsible for having test done at FDA and CBC vendor approved lab.

DRUG SCREENING RESULTS

Positive Results

1. Students with positive drug screens will not be offered admission to the nursing program.

Negative Dilute-Potential and Current Students

1. Potential students, who are selected by the admissions committee, and current student's, who have a negative dilute

- drug test will be required to have a blood drawn drug screen or a hair sample test. This is at the student's expense.
2. In this instance, it is the student's responsibility to locate a source for the drug order and for the second test.
 3. The nursing department will notify the student of the necessity of this second test verbally or by written statement, and by letter. A copy of the letter and/or written statement will be placed in the student file.
 4. The potential student will have 5 days after receipt of notification to complete the drug screen.
 5. **In order to be admitted into the program, results must be in the department of nursing prior to the first day of class.**
 6. The cost of this drug screen is at the student's expense.
 7. Potential students may be offered contingent admission until the results of the second drug screen is received. Students, whose second tests are positive, will not be allowed to enroll in the program or may be dropped from the program, whichever is applicable.

Positive Drug Testing Results--While Enrolled in the Nursing Program

1. If the student receives a positive drug screen result the student will be immediately dropped from the Vocational Nursing program.
2. If the student receives a positive drug screen result and feels that this is in error, the student may be re-tested at the expense of the student. The student **MUST** be retested within **one week** of being notified of the positive result.
3. The student will be allowed to attend the academic portion of the program; however, the student will not be allowed to go to the clinical site or clinical lab activities until a second test is repeated with a negative result. Clinical absence time will accrue.
4. If the second result is positive the student is immediately dropped from the program.
5. The student will **NOT** be allowed to go to their local doctor's office for retesting. Re-testing **MUST** be done at a FDA and CBC vendor approved site.
6. If the student fails to re-test within **ONE WEEK** of being notified of the positive result, the student will be immediately dropped from the program.
7. **ALL** positive results will be reported to Board of Nursing (BON) per policy.
8. Verification of negative drug screen results will be sent to the clinical affiliate prior to the clinical rotation start date according to established policy. Student confidentiality will be maintained.
9. The student, withdrawn from the program for positive drug screen, may re-apply to the program as in the re-admission policy. Refer to readmission policy section of this book.
10. If a student is accepted to the CBC Vocational Nursing Program after previously being dropped from the program due to a positive drug test, that student may be subject to more frequent drug testing throughout the length of the program. The student must bear the costs of these requirements and it is nonrefundable

Students With Prescription Medications

1. Students must self report prescription medications to the program director or campus lead instructor.

2. Unsafe behavior at the clinical setting may lead to action based on violations of the **Code Of Professional Conduct (page22)**.

At the Clinical Sites

The clinical affiliates reserve the right to remove from the facility, any student regardless of testing or test results.

1. If the student feels that their result has been an error, the student will be responsible for the cost of re-testing, at a CBC vendor approved site.
2. The student will **NOT** be allowed to go to their local doctor's office for retesting.
3. The testing lab that we currently use is a FDA approved lab, and is prepared to support the test results they give, in a court of law, if necessary.

Drug Testing

Drug testing is part of this program and I understand and agree to be tested and re-tested at any time deemed necessary by CBC Vocational Nursing Program. All positive drug-screening results will be reported to the Board of Nursing and I will be immediately dropped from the Vocational Nursing Program. I understand that as a student, I am responsible for all associated cost for drug testing and re-testing if deemed necessary.

Student Signature

Date signed

Print Full Name

C. Review and Changes

I understand that Coastal Bend College Vocational Nursing Program has the right to review and change any policy/procedure at anytime during the program. Policy and procedures are subject to change if deemed necessary.

Student Signature

Date signed

Print Full Name

Attendance Policy **ATTENDANCE POLICY**

Attendance at class and clinical is an expectation for all vocational nursing students. The faculty understands that life events occur which require an occasional absence from either class or clinical, however these must be limited for quality education to occur. Survey of work sites indicates attendance policies, which are in place to assure quality client care. The program has adopted the following policy, which reflects workplace expectations as identified by the advisory committee and by survey. The program policy closely reflects the policies of advisory committee members who are employers of licensed vocational nurses.

- A. Students may miss
- **Fall & Spring** – a total of 24 combined classroom and clinical hours. The student may miss only 16 clinical hours.
 - **Summer** – a total of 16 combined classroom and clinical hours. The student may miss only 12 clinical hours.
 - **Tardy** – class will start at the stated time. Students not present at the stated hour are considered tardy. The minimum amount of time for tardiness is one hour.

Students must report regularly and promptly to class. Failure to do so is cause for being dropped and receiving a grade of "F" or "W".

*See student handbook on "dropping classes" or the "grading system" section of the Coastal Bend College handbook.

Example: The class starts at 8 a.m. The student arrives after 8 a.m. but before 9 a.m. The student is considered one hour absent. One hour of missed time will be recorded. The student is required to sign the absence record on return. The signature indicates the student acknowledges the absence and is aware of the accumulating hours. The Campus Lead Instructor or Director of Nursing Education may send a courtesy letter of caution when at the student has reached a total absence of 12 hours (Fall & Spring semester) or 8 hours (Summer semester). At the 25th (Fall & Spring semesters) or the 17th (Summer semester) hour the student will be dropped from the Vocational Nursing program.

On line courses

Regular attendance and participation in the class is an expectation. Attendance will be monitored by the data maintained in Web Ct. Each instructor will outline the absence policy in the course materials.

Clinical tardy/absence

Failure to arrive at the clinical site at the scheduled time will result in accrual of absence time. Students who are more than one hour late to the clinical site will not be allowed to remain. **Example:** if you are scheduled to arrive at 6:00 am and you arrive at 7:05 you will be sent home and docked the clinical hours for the day.

Absence Committee

Appeals of this **policy** will go to the Vocational Nursing Absentee Committee. The Absentee Committee's ruling will be final and cannot be appealed. Students must follow the established Coastal Bend College **Grade Appeal** policy, located in the college catalog to appeal the grade.

A. Purpose of the Committee

To determine

1. Determine extenuating circumstances, if any, related to student absence.
2. Determine if the student should be allowed to remain in or be dropped from the program.
3. Make recommendations for either remaining in the program or for re-entry to the program.

B. Committee Members

Will consists of:

1. Two student peers – appointed at the beginning of each semester.
2. One representative from Coastal Bend College Administration (or delegate selected to act on the administrators' behalf in his/her absence).
3. One representative from Coastal Bend College Counseling.
4. One nurse or person representing administration from the community.
5. (Must have at least 5 members present).
6. A nursing instructor will be present to give input as requested by the committee, but will have no vote on the committee.

C. Student's Responsibility

Prior to committee meeting:

1. Review and sign attendance record.
2. Attach copies of supporting documentation to attendance record.

Bring to the meeting:

1. Copies of supporting documentation, such as doctor's notes, court documents, etc.
2. Any witnesses to the facts

D. Committee Responsibilities

Members will:

1. Review program absentee policy.
2. Review student's absence record to include:
 - a. Number of classroom hours missed.
 - b. Number of clinical hours missed
 - c. Number of times the student has been before the absentee committee.
3. Review reason(s) given by the student for the absences
4. Review whether student followed policy by calling in prior to absence.

5. Review whether absence and number of hours could have been avoided.
6. Question(s) may be directed to the student, but the conversation should not be allowed to stray from the absences. The chair person will impose a time limit usually ~ 10-15 minutes.
7. Nursing faculty will be present during the committee meeting to provide input as requested by the committee members. However, faculty will have no vote on the committee.
 - a. Questions related to the student's attendance may be directed to faculty. **(Grades or other issues unrelated to the absence are not to be discussed)**. The student may be present and allowed to respond to the instructors' comments.
8. After discussion, the student is dismissed for voting.
 - a. The Committee Chair will indicate voting by ballot or by show of hands.
 - b. Committee Chair will open the floor for discussion on the possible recommendation(s).
9. The Committee Chair will collate the votes and recommendations and review with the committee.
10. The student will return to the committee room. The Committee Chair will inform the student of the Committee decision and recommendations. The Committee Chair, the Director of Nursing Education or the Campus Lead Instructor will provide the student with written notification of the Committee decision. Notification will follow within seven (7) days of the Committee meeting.
11. Students may utilize the Coastal Bend College Grievance Procedure to appeal grade decisions

The student will receive a grade of "W" or "F" if the committee finds the student out of compliance with the Vocational Nursing attendance policy. A "W" or "F" grade constitutes being dropped from all Vocational Nursing classes for the current semester.

E. Notification Process

1. The Director of Nursing Education or the Campus Lead Instructor will notify the student of the Vocational Nursing Absentee committee meeting.
2. The student must bring to the committee any documentation or witnesses relating to the cause of the absence. Examples include, but are not limited to: doctors excuse forms, court documents or persons who witnessed the accident.
3. During the period of time the student is awaiting the committee decision, the student may attend scheduled classes/clinical.
4. The student understands that grades, and other course work accomplished during the time between the violation and Committee decision, is contingent upon the committee's decision.

F. Meeting Minutes

The Committee Chair or designee will provide written outcomes of the meeting. Student and program confidentiality will be maintained

Adherence To Policy

Students Shall:

1. Adhere to Coastal Bend College policy outlined in the **College Student Handbook** and those outlined in this nursing handbook.

2. Obtain required equipment and supplies
3. Accept clinical assignments in coordination with the instructor.
4. Follow policies and procedures at the assigned health care facility.
5. Vocational Nursing students **must** successfully pass Capstone courses
6. Participation in Pinning / Graduation is strongly recommended.

Complaint Procedures for Program

Students with complaints/concerns about issues within the nursing program **must** follow the established organizational chart (Page 5) to present these concerns.

These complaints/concerns must be presented in writing as the student follows the organizational chart.

Capstone Requirements

CAPSTONE

A. Policy Statement

The purpose of Capstone is to ensure that all nursing students who graduate from Coastal Bend College have the knowledge, skills and ability to provide safe, competent nursing care. The priority of the nursing program is to protect the public from harm. To do so, the program will follow the criteria below to identify and remediate those students who are unable to demonstrate safe, competent nursing care. It is expected that the graduate of the Vocational Nursing Program possess both the academic knowledge and the skills competency to perform entry level nursing care in a safe and effective manner.

The Capstone Course is VNSG 2462 in third semester. Students must have a minimum course grade of 75% to pass the course. The Capstone exercises are 50% of the course grade. See below for example of grade determination:

Capstone Activities are integrated into the grade for this course. The following grading rubric will be followed:

| | |
|-------------------------------------|---------------------|
| Clinical Evaluation..... | 50% of course grade |
| Capstone Comprehensive Exam..... | 30% of grade |
| Capstone Math Test | 10% of grade |
| Capstone Skills Pass..... | 10% of grade |

An overall grade of 75% is required to pass VNSG 2462

B. Specific Procedures

Practice Capstone exercises will be held throughout the program. After each practice session, students will be apprised of areas requiring remediation. Faculty will assist students in developing remediation strategies. It is the students' responsibility to make arrangements with faculty for assistance.

CAPS

1. Requirements

Students must prove mastery in all areas of the Capstone to receive a passing grade in the Capstone course and to graduate.

A minimal course grade of 75% is required to master VNSG 2462.

2. The minimum grade requirements for Capstone activities follow:

| Capstone Categories | Required Grade to Pass | |
|----------------------------|--|--|
| Math/Dosage Calculation | 85% | <p>Your score will be multiplied by 10% to determine the valued for grading purposes.</p> <p>Example: Capstone Math Test 10% of grade</p> <p>Your Capstone Math test score=90% 90x .10=9 points for this section of the grading rubric</p> |
| Computer Testing | 66.7 % or above* This score is based on the ATI probability of passing the NCLEX examination at the 89-90% range. It may be adjusted upward or downward depending on the probability measures at the 89-90% range | <p>Your score will be multiplied by 30% to determine the valued for grading purposes.</p> <p>Example: Capstone Comprehensive Exam 30% of grade</p> <p>Your Comprehensive score=66.7 66.7x .30=20 points for this section of the grading rubric</p> |
| Nursing Skills | Must pass all three levels: grade Pass/Fail | <p>Your score will be multiplied by 10% to determine the valued for grading purposes.</p> <p>Example: Your grade on all three skills levels=Pass Pass on first attempt =10 points for this section of the grading rubric</p> |

Pass on second attempt= 8 points
 Pass on third attempt = 5 points
Fail= 0 points

C. Student Failure at Capstone

On the day of Capstone, students will be given one opportunity to successfully repeat those skills in a particular level that were failed. Repeat skills will be evaluated by an instructor who was not involved in the initial attempt.

Students who fail to master the skills on the second attempt will be offered a third attempt within two weeks of Capstone. See the rating scale above.

Students who fail the computerized and math portions of Capstone will be provided one additional opportunity to master those skills. Students will be required to develop an instructor supervised remediation plan prior to repeating the computerized tests.

E. Re-entry after Capstone failure

A nursing student, who has failed CAPSTONE course, may reenter CBC nursing program following the re-entry policy.

Cellular Phones/Beepers/I -Pods, Blackberries Or Other Electronic Communication Device

Electronic communication devices are absolutely **NOT** allowed in the clinical/Lab sites at any time. CELLPHONES and Beepers **MUST** be on silent in the classroom. If either goes off during an examination, points may be deducted from your test at the instructor's discretion.

These devices are to be left in your car while attending the clinical rotation.

Classroom Activities And Demeanor

CLASSROOM ACTIVITIES AND Demeanor

- No food will be allowed in the classroom except on pre-approved events. Drinks are allowed but must be in a closed container. (Depends on individual campus policy)
- Faculty/CBC are not responsible for personal items left in the classroom.
- No sleeping or non class related conversation with other students when class is in session. Infractions will result in the student being asked to leave the classroom and counted absent for the remainder of the class. Sleeping constitutes absence. Absence time will accrue

Clinical

Patients have a **right** to expect safe, competent care. Students will not be allowed to go to the clinical site until the required skill sets for the specified

level are evaluated by the faculty for competency and safe performance. A student, who cannot master the safety and competency standards in the skills lab, will be assigned a failing grade and dropped from the skills or clinical course.

If, after competency check off, in the laboratory, a student cannot perform a skill safely and competently, at the clinical site, the student will be required to leave the clinical site and schedule time in the lab for remediation. Absence time will accrue when the student leaves the clinical site.

The student **must be able to** demonstrate the skill in a satisfactory manner in the lab. The following guidelines will be used:

1. A counseling plan will be devised by the instructor. The counseling plan will include standards to be demonstrated, a time frame for successful demonstration of the skill(s), and disciplinary action which may be imposed for failure to meet the timeline for successful demonstration.
 2. The student may practice the skill(s) at any time the lab is available.
 3. It is the student's responsibility to arrange for supervised practice with the Professional Tutor and/or instructor.
 4. If the student is unable to demonstrate the required skill(s) within the specified timeline, the student will not be allowed to return to the clinical site.
 5. Students unable to return to the clinical site will be given a failing clinical grade and the student will be dropped from the course/program.
 - 6. To assist students to maintain the highest level of competence, faculty can require a student to demonstrate a previously learned skill at any time.**
- Clinical experiences will be rotated through regional healthcare facilities.
 - Clinical assignments are correlated with classroom presentations.
 - Experiences will include the nursing care of persons with acute, chronic, aging illnesses and rehabilitative care.
 - Students will participate in instructor supervised patient teaching.
 - Students will be provided with opportunities to participate in clinical conferences directed by the clinical instructor.
 - Students showing signs and symptoms of infections will be asked to leave the clinical setting. They will not be able to return to clinical until signs and symptoms have cleared.
 - Students, who have been absent due to illness or injury, will be required to have a physician's or healthcare provider's release in order to return to clinical/class.
 - There will be no tolerance for rudeness during classroom / clinical / lab sittings.
 - Additional guidelines are located in each clinical syllabus and in the Preceptor Packet.
 - Skills competence is an expectation. Students who are not able to demonstrate skills competence will be removed from the clinical site and

Uniform Policy

absence time accrues.

- It is the student's responsibility to arrange a time for faculty to assist with review/check off skills. Faculty from other campuses may be utilized for this process to ensure objectivity.
- Students cannot return to the clinical site until competence is verified. Failure to achieve competence will result in being dropped from the program.

CLINICAL / LAB UNIFORM POLICY

All rules of dress and appearance will apply when in full uniform, including rules for hair. Students at clinical sites who do not adhere to the uniform policy will be asked to leave the site until the deficiency is corrected. Please note that this also includes any disparity regarding professional appearance. Absence time will accumulate during the period of time the student is not present.

- Place of purchase for your scrubs, is your choice.
- Your uniform must be of the correct color and style indicated by program policies.
- You must have your completed uniform by the deadline indicated by the campus instructors.

A. Female Student

1. At least two uniforms each – **No** transparent or knit fabrics and wrinkle free.
2. Dress or skirt must be at mid-knee or below the knee in length. Shorts are **not** permitted. Slacks should touch the top of your shoes.
3. Jeans or denim slacks are **not** permitted. Your uniform must fit loosely for ease of movement and comfort.
4. White hose are to be worn with dresses or skirts. Support hose are optional.
5. Underwear will be solid color (white or matching skin tone) and are traditional cut.

B. Male Student

2. At least two uniform tops—color and style will be approved by faculty.
3. At least two white slacks. Slacks should touch the top of your shoes.
4. Jeans or denim slacks are **not** permitted.

A. All Students

Scrubs

Each student will wear the program approved scrubs while practicing and checking off skills in the learning lab. All scrubs will be clean and neatly pressed. Clean white, closed heel and closed toe white shoes will be worn with scrubs.

Tee shirt (white), for male may be worn under uniform top or with scrubs.

Long sleeve (white) body hug type tee shirt for females may be worn for warmth or to cover tattoos(males, females).

Students may wear a lab coat for warmth at the clinical site. The lab coat is used to cover the fresh uniform prior to entering the clinical area

and anytime the student exits the clinical unit (breaks, lunch, or going to other areas of the health care facility.)

A color coordinated warm up jacket may be worn in the clinical lab

All undershirts, tee shirts, etc., must be approved by the faculty.

1. Uniform is fresh, clean, unwrinkled and unstained.
 - a. Only official uniform/scrubs will be worn during clinical sessions.
 - b. Lab coat (one), white, knee length.
 - c. Insignia (patch) to be placed at mid-top of left sleeves on uniforms and lab coats.
 - d. Failure to present at the clinical site with appropriate lab coat or uniform results in grade deduction and/or absence.
2. No cut/split hems on uniform pants.
3. Two sets of scrubs.
4. A watch with a second hand is required.
5. Only white socks (with pants/slacks) and white panty hose should be worn during clinical rotations. Socks may not be worn with panty hose.
 - a. **No** athletic or colored socks are allowed.
 - b. Socks or panty hose should be white, clean and no visible holes.
6. White leather athletic or nursing shoes are clean and polished.
 - a. Shoes may not have colored trim, patches. Logos, or open toes or open heels. **Clogs and Crocks are not allowed.**
 - b. Shoelaces must be clean and not frayed.
7. Nametag is worn on left side whenever in uniform, scrubs, or lab coat/jacket. The School ID will be used as a name tag. The student may purchase the device for suspending the ID from the CBC Bookstore or other source.
8. Nametags must be worn at all times while in clinical setting or while attending conferences. If you do not have your nametag, you must go home to get it and will be counted absent until you return.
9. No jewelry will be worn while in uniform. The exceptions are a watch with a second hand, and a plain wedding band.
10. Hair color should be natural and non-distracting while attending the clinical sites. This includes obvious coloring of bright reds, purples, orange, and/or green, etc. This can include moderate to severe blond highlighting to dark hair.
11. **No** "love bites", "hickeys", "tattoos" may be visible while attending the clinical sites. **These must be covered at all times while at the clinical site.** The student will be sent home until the infraction is corrected and the appropriate time will be docked.
12. **Absolutely no public smoking while engaged in program activities. This rule also applies to ALL college sponsored activities during the year.**

Confidentiality

CONFIDENTIALITY AGREEMENT

Patient information from any source and in any form (such as paper, verbal communication, and electronic sources) is confidential. I shall protect the privacy and confidentiality of patient information. Access to this information is

allowed **only** if I need to know it to perform safe, competent nursing care.

A. As a student

I may see or hear confidential information about:

1. Patients and/or family members (such as patient records, conversations, and financial information)
2. Employees, volunteers, students, contractors, partners (such as salaries, employment records, disciplinary actions)
3. Business information (such as financial records, report memos, contracts)

I agree that:

1. I will only access information I need to perform my duties as a nursing student.
2. I will not in any way, disclose or dispose of any confidential information. If it is part of my role as student to do any of these tasks, I will follow the correct department/school procedure (such as shredding confidential papers before throwing them away to guarantee confidentiality).
3. I will not misuse or be careless with confidential information.
4. I will not share any confidential information even if I am no longer a student of Coastal Bend College.
5. I know that confidential information I have learned, as a student does not belong to me.
6. I will protect the privacy of patients and others.
7. I will not make any unauthorized copies of patient records.
8. I am responsible for my use or misuse of confidential information.
9. I am responsible for my failure to protect the confidential information. I will consult my instructors if I have any doubt about the confidential nature of any information I receive.

Failure to comply with this agreement may result in being dropped from the Vocational Nursing program.

By signing this, I agree that I have read, understand and will comply with this agreement.

Student Signature

Date signed

Print Full Name

Laboratory

A. Student Information

We welcome you as a student to the Vocational Nursing Program at Coastal

Bend College. The laboratory is for teaching purposes. It is important that students understand and demonstrate proficient performance of standard precautions prior to practicing procedures at the actual clinical site, which offer exposure to blood and body fluids. The tenets of standard precautions will be integrated across the curriculum.

B. Supervision

The faculty manages the laboratory as a teaching unit and will supervise skills practice and competency check offs. The faculty includes the course instructors and the Professional Tutor. Supervision at the clinical sites will be performed by Coastal Bend College faculty and clinical site employees who are in the role of preceptor.

C. Consent Form

I verify that I understand the hazards and possible inherent risk of exposure to blood and/or blood containing body fluids, thereby risking exposure to microbial infections, including but not limited to Hepatitis B and human immunodeficiency virus (HIV). I thereby consent to such laboratory practicum and agree to hold Coastal Bend College, its agent, employees and students, free and harmless from any claims, demands or suits for damages from any injury or complications which may result.

In the event of an accidental exposure to blood and body fluids (including needle sticks) it is the responsibility of the student to seek medical care. Upon exposure, the clinical supervisors will notify the Director of Nursing Education. The Director of Nursing Education, or designee, will notify Student Services of the incident.

D. Health Care Insurance

It is the student's responsibility to maintain health insurance while enrolled in the nursing program. Coastal Bend College will not be responsible for costs incurred by the student due to exposure to blood and body fluids, and due to accident or injury while engaged in nursing program activities.

I certify this form has been fully explained to me, and I have read it, or have had it read to me; that the blank spaces have been filled in, and that I understand its contents.

Student Signature

Date signed

Instructor/Witness Signature

Date signed

E. If the student is a minor

I certify and represent to Coastal Bend College that I am the

Parent/guarding of _____, a minor

Age _____ born on _____ 20 _____. I hereby consent to the laboratory practicum

Parent/Guardian Signature _____ Date signed

Instructor/Witness Signature _____ Date signed

**Code Of
Professional
Conduct**

F. The laboratory is a simulated clinical experience. Students will show the same regard and respect for the manikin patient as for a real patient. Disrespect in a learning situation will be reflected in the course evaluation. Students are expected to be careful of the learning manikins and equipment. Breakage due to carelessness may result in a charge to the student for repair.

CODE OF PROFESSIONAL CONDUCT

Coastal Bend College Vocational Nursing Program is committed to excellence in the provision of :

- Education of nursing students and other health professionals
- Safe competent patient care
- Professional development for nursing faculty and staff.

To further the goal of excellence, all nursing students at Coastal Bend College are expected to adhere to the Code of Professional Conduct in their interactions with patients, staff, instructors, students and the public.

The Code of Professional Conduct consists of two sections: Professional Obligations and Professional Ideals.

- "Obligations" refer to necessary professional behaviors that are required by the ethical foundation of nursing practice.
- "Ideals" refer to desirable professional behaviors that professionals at all levels should attempt to acquire because they enhance professional excellence.

Failure to meet the professional obligations represents a violation of the Coastal Bend Code of Professional Conduct. Alleged infractions of the obligations or the failure to meet the professional ideals may be grounds for dismissal from the program.

- A. Professional Obligations
 1. Treat patients, colleagues and other health professionals, (fellow) students and instructors with the same degree of respect you would wish them to show to you.
 - A. Avoid offensive language verbally or in writing (in clinical/lab, classroom settings)
 - B. Do not harass others physically, verbally, psychologically or

sexually **

- C. Do not discriminate on the basis of sex, religion, race, disability, age or sexual orientation **
 - D. Do not knowingly mislead others
 - E. Do not cheat, plagiarize, or otherwise act dishonestly
 - F. Do not abuse special privileges, e.g., looking at pornographic websites on school computers, making unauthorized long-distance telephone calls.
 - G. Do not criticize the nursing or medical decisions of colleagues in the presence of patients
2. Treat patients with (compassion), kindness, gentleness and dignity
 - A. Respect the privacy and modesty of patients
 - B. Respect patient confidentiality
 - C. Avoid patient involvement when you are ill, distraught, or overcome with personal problems
 3. Be aware of your personal limitations and the deficiencies in knowledge and abilities and know when and whom to ask for supervision, assistance or consultation
 4. Report serious breaches of the Code of Professional Conduct to the appropriate person
 5. Indicate disapproval or seek appropriate intervention if you observe less serious breaches
 6. Do not destroy, damage or misuse property of Coastal Bend College or any clinical affiliation
 7. Adhere to local, state and federal laws and regulations

B. Professional Ideals

1. Attempt to cultivate and practice clinical virtues, such as caring, empathy and compassion
2. Notify the responsible instructor if something interferes with your ability to perform clinical tasks effectively
3. Learn from experience and grow from the knowledge gained from errors to avoid repeating them
4. Students should attend scheduled classes and complete assignments in a timely manner
5. Cooperate with other students and members of the health care team in clinical activities
6. Be generous with your time to answer questions from patients, patients family members or staff members

C. Violations of above items will result in:

1. First infraction- student will be counseled and signature of student required on the formal counseling statement that is placed in the student file.
2. Second infraction- student will be dropped from the program.
3. Within one (1) week of being dropped an appeal may be filed and decision must be made by the Dean of Instruction.

(Legal Standards: BON Disciplinary Sanctions, Rule 217.11, 217.12)(Rules and Sanctions are located at www.bon.state.tx.us)

Americans with Disabilities Act

on Collegiate Education for Nursing will guide the decisions about students with disabilities. If a student believes he or she cannot meet one or more of the standards without accommodations, it is the responsibility of the student to inform nursing faculty of the need for reasonable accommodations at the **beginning** of the nursing program. The student must notify the faculty if status changes.

Disruptive Behavior

Students displaying disruptive behavior will be required to leave the Classroom, learning lab or clinical site. Absence time will accrue, and if, in a clinical or learning lab environment, will be reflected on the evaluation.

Dress Code

Dress code for the classroom / lab is casual attire. Revealing clothing is **NOT** allowed.

Dress code for seminars, conferences, clinical site orientation / or information gathering is:

1. Professional attire, which means: dress slacks, dresses, skirt and blouse. Closed toed shoes (**NO** flip/flops, Crocks, etc)
2. No jeans, shorts, tee shirts, or sneakers will be allowed for seminars, conferences, or clinical site orientation or visits.
3. Checking off procedures – the laboratory instructor may require lab coats and/or scrubs during check offs.

Eligibility for licensure

Applicants to the Vocational Nursing program must be eligible for LVN Licensure. Those applicants, accepted into the program, but requiring a Declaratory Order or an eligibility statement, must present these Documents prior to being accepted into the program.

Examinations and Finals

- A. Chapter Tests-All chapter tests will be announced.
- B. Unannounced Tests-Pop quizzes may be given. There will be no make-up for unannounced test.
- C. Missed Test-Any missed test is made up at discretion of instructor. Review your syllabus and course directions to determine each instructors' rule.
- A. Final Exam Policy-Students whose grades, in any Vocational Nursing course are below 75% when all grades are calculated will be dropped from the Vocational Nursing Program.
- E. Grades
Each student is responsible for tracking his/her own grades. This will include all test and final examination grades. The minimum passing grade for all final semester grades 75%.
- F. Challenged grades-If a student wishes to challenge a final grade after receiving grades from Registrar's Office, the last day to change the grade is one week after a new semester begins.
- G. Final Examination Rules
All personal belongings will be left outside of the classroom. Students

may be given random seating assignments. There will be no talking after entering the classroom. No cell phones/beepers or other electronic devices can enter the classroom. Students may not leave the classroom until he/she has completed the examination. Students may not re-enter the classroom after leaving. Any breach of the above will result in the students being asked to leave the room and receive a grade of zero for the final examination.

H. Examination Review Policy- note information in the syllabus for each course

Field Trips/Seminars

Field trips and seminars may be taken throughout the year. (See dress code and transportation above)

Grading

Grading is according to the following percentage scale:

- A 90-100%
- B 80-89%
- C 75-79%
- D 70-74%
- F 69 and Below

75% is the minimum requirement to progress in the Vocational Nursing Program

Immunizations

The Hepatitis B series must be complete before entry into the program. Exemptions must be submitted to the Program Director prior to the beginning of the program.

A negative PPD tuberculin skin test, completed within 6 months of Application, must be submitted with the program application materials.

Students may be required to complete a chest x-ray prior to entry into the program. The cost is the student's responsibility. (This will be dependent upon healthcare facility requirements)

Students with HIV and other infectious diseases

No prospective student will be denied admission based solely on a positive diagnosis of an infectious disease, as long as appropriate treatment, and danger of infection of others has passed. Coastal Bend College will not require additional preadmission screening for infectious diseases as a condition of admission.

NOTE:

Students with current/ pulmonary or laryngeal tuberculosis pose a risk to patients, staff and other students. Therefore, restrictions are necessary. Students with current pulmonary or laryngeal tuberculosis are excluded from the classroom and clinical activities until adequate treatment is

initiated, cough is resolved, and sputum is free of bacilli on three consecutive smears.

Instructor's Office Hours

Instructor's office hours will be posted outside their office doors and in online courses. Instructors will be available for conference during these times. Students are encouraged to set up appointments through the secretary.

Insurance

Professional Liability Insurance:

All students must carry professional liability insurance. The costs for this insurance is included in fees charged at admission and each semester.

Medical Insurance:

Medical insurance is recommended for all students. This insurance is the student's expense.

Notification of Clinical Absence

Students anticipating a clinical/lab absence must call the assigned unit and leave a message for the instructor. It is the student's responsibility to record the name of the person receiving the absent call for purposes of verification. Failure to notify the instructor constitutes **unprofessional behavior**.

1. A student who is absent will have the hours deducted that corresponds to the clinical rotation. This may be 6-12 hours.
2. The student may be placed on clinical probation for failure to call and notify instructors of absence.
3. The student must notify instructor personally. A peer, spouse or significant other report will not be accepted.
4. In addition, the clinical evaluation will reflect the absence and no credit will be received for the day.
5. Clinical time and lab time may be the same(check your schedules), students must notify instructor of any absence(s).
- 6. A second offense of no call, no show, may be grounds for being dropped from the program.**
7. In a precepted clinical, the student **must** notify the preceptor, the nursing unit and the instructor at least two hours before the intended absence.

Note: Clinical hours can occur in the classroom or clinical lab. It is the responsibility of the student to clarify these time frames with faculty.

Patient Abandonment

Patient abandonment constitutes unprofessional behavior. Students who abandon patients (i.e. leaving the unit without reporting to instructor to go to lunch or on break) will receive no credit for the day's activities and disciplinary action will result.

1. The first infraction will result in a counseling statement with probation.
2. The second infraction will result in being dropped from the program with no appeal.

Personal Appearance

Hygiene/Appearance

1. The student must maintain a clean and healthy appearance.
2. The students' breath must be free of offensive odors. Avoid tobacco, alcohol, garlic or onion before coming to the clinical site.
3. The student must keep hands clean and smooth; fingernails clean and should be neatly trimmed.

- a. Nails should not extend past fingertips.
- b. No nail polish or artificial nails.
- c. Hand lotion should be used to prevent chapped, cracked hands and hang nails.
4. Student's make-up must be conservative.
5. Male students must shave daily before clinical.
6. The student must wear a clean, neat professional hairstyle.
 - a. Hair should be neatly arranged in such a manner as to not extend over the shoulder onto the patient or student's face, no loose ponytails or braids.
 - b. Bangs should not contact upper border of protective lenses/eye glasses.
 - c. Hair clips, hair scrunches, and barrettes should be as close to hair color as possible. Students will be dismissed from the clinical site to correct any variance from hair standard. The incident will be documented and an absence will be recorded.
7. Male students must have short, trimmed haircuts.
8. Student should not wear strong scents when working with patients. (I.e. Perfume, body powders, lotions, aftershave, etc.)
9. Smokers or individuals who live with smokers must pay particular attention to personal hygiene. The body, especially hair and clothing should be completely free of tobacco odor. The student must ensure that his/her hands are free of odors such as tobacco, onion and garlic, which are offensive to many patients.
10. Hair color should be natural and non-distracting while attending the clinical sites. This includes obvious coloring of bright reds, purples, orange, greens.... This can include moderate to severe blond highlighting to dark hair.
11. **NO jewelry** with the exception of a working watch with a second hand and a plain wedding band is allowed. Microorganisms can harbor under the ring, and you must take it off each and every time you wash your hands (which is often). You take a chance of losing your wedding ring at your own personal cost. CBC or the clinical affiliation is not responsible for lost property. Jewelry which is not allowed includes, but is not limited to, earrings, eyebrow rings, nose rings, tongue rings, and necklaces.
12. NO "love bites", "hickeys", "tattoos" may be visible while attending the clinical sites. These must be covered at all times while at the clinical site. If not, the student will be sent home until the infraction is corrected and the appropriate time will be docked. (Refer to Clinical)
13. NO gum chewing during clinical / lab time.

Plagiarism

Please be advised that Plagiarism will not be tolerated. Students caught, will receive an F, which will then cause the student to be dropped from the Nursing Program.

Plagiarism

The act of taking the writings of another person and passing them off as one's own. The fraudulence is closely related to forgery and piracy—practices generally in violation of copyright laws.

Plagiarism. Britannica Book of the Year 2003 from the New Frontiers in Cheating article

Plagiarism is the act of claiming to be the author of material that someone else actually wrote. Students have plagiarized book reports, term papers, essays, projects, and graduate-degree theses.

By signing, I agree to the plagiarism terms that have been set forth by Coastal Bend College Nursing Department.

Student Signature

Date signed

Print Full Name

Progression requirements

To progress in the program students must maintain a **"C" or better** in each course in the nursing degree plan. A student must pass all concurrent nursing courses in a single semester to progress to the next semester.

Readmission/ Transfer Policy

Exit Interview

To be considered for readmission, students must have had an exit interview with the Campus Lead Instructor or Director of Nursing Education within **one (1) month** after the next semester begins.

During the exit interview, the Director of Nursing Education and/or the Campus Lead Instructor will develop individualized criteria for readmission. The student must have met all criteria in order to be considered for readmission into nursing program. Call to make an appointment.

Readmission

All readmission and transfer applicants must meet entry requirements for Coastal Bend College and the Vocational Nursing Program physical and academic requirements.

1. All Re entry/transfer students must have clear background checks from the Board of Nursing and clear drug screens from the program approved vendor.
2. Students must re-enter the Vocational Nursing program within one year of last attending the program if they wish to avoid starting the application process at the beginning.
3. Students wishing to re enter at a point longer than one year must take the pre-admission test (currently TEAS) and compete for admission with other applicants. The curriculum at the time of re admission, and the student's previous performance in the program, will drive amount of credit for prior course work.

4. Students re entering the program **must** take all clinical courses in the program curriculum.
5. Only **one** readmission will be allowed.
6. Readmission in the first semester: The student must take the pre-admission test (currently TEAS) and compete for admission with other applicants. The student will repeat all courses with a grade less than a "C" and the clinical course. Retake of the skills course will be highly recommended. Students are accountable for demonstrating competencies expected at the level.
7. Readmission in the second and third semester: This is an alternative for those students who have successfully completed prior semester requirements. Clinical proficiency must be shown under direct observation, taping, or written examination. Testing must occur before the beginning of the semester for which admission is sought. Call and make an appointment.
8. Readmission will be dependent upon space availability, including skills competency evaluation, negative drug screen results and a negative criminal background check. Each student must bear the costs of these requirements.
9. In the event of competition, the earliest application date and completion of readmission requirements will determine acceptability. The preadmission science score will be used as tie-breaker for first semester re admissions.
10. Physical examinations will not be required to be repeated if readmission is within one year and no medical changes have occurred. Students readmitted at a time later than one year will present a physical examination prior to admission.
11. Regardless of re-entry time frame, students must demonstrate completion of requirements noted on Exit Interview.
12. Re-entry students will be required to establish a contract with the Director of Nursing Education that details strategies the student will use to overcome obstacles in previous admissions. Students re entering the program must provide an analysis of their prior efforts in the program and provide an evaluation of the reasons for incompleteness during the prior attempt. This evaluation will include strategies for success on this new admission.
Students may apply for readmission once. Students who have exhausted their re entry options, must enter the program from the first semester. These students are subject to admission procedures required of all students wishing to enter the program. This includes the admissions examination, application, physical examination, background check and drug screen. Transcripts will be evaluated for credit on an individual basis. Exit interview requirements will apply.

Transfers

1. Intra-campus transfers- transfer from one CBC campus to another CBC campus
 - a. must occur at the beginning of a semester
 - b. can only occur if space is available
 - c. can occur only ONCE during the program year.

- 2.. External transfer to CBC-transfer from another nursing program to Coastal Bend College Vocational Nursing Program
 - a. Can only occur if space is available
 - b. Requires approval from the Director of Nursing Education, Dean of Instruction.
 - c. Must meet CBC admission criteria, including acceptable score on admissions test, as applicable
 - d. Must pass skills competency evaluation
 - e. Must have a negative drug screen and a negative criminal background check. Each student must bear the costs of these requirements.
 - f. Must provide a satisfactory physical examination.

Denial of readmission/transfer

Students may be denied re-entry/transfer into the program under any one of the following conditions:

The student fails:

- a. the Nursing Skills examination.
- b. the drug test and/or background check
- c. to complete the exit interview within the specified time frame
- d. has not completed prior semester curricular content, and
- f. the program lacks resources to accept additional students.

A SUMMARY OF RE-ENTRY AND TRANSFER OPTIONS IS LOCATED ON PAGE 69.

Refusal to Provide Patient Care

Students in the Vocational Nursing program are expected to provide care to assigned patients. If refusal to care for a particular patient occurs, faculty will provide a review of the Nursing Code of Ethics and counsel the student. A student who indicates persistent refusal to care for a particular type of patient will receive further counseling regarding the appropriateness of nursing as a career choice and may be dismissed from the Vocational Nursing Program.

School Days

B. School Days

Classroom days will be posted at the beginning of each semester. Clinical hours may vary.

Occasionally vocational nursing students may be required to travel or attend clinical on Saturday to meet the course objectives. Travel to Austin, San Antonio, Corpus Christi and other cities may be a requirement throughout the nursing program. Adequate notice will be given for travel out of the local area.

C. Holidays

Classroom holidays correlate with the Coastal Bend College published holidays. See your College catalog for this information.

Sexual Harassment

A. Definition

Sexual harassment is verbal or physical conduct that denigrates or shows hostility or aversion toward an employee, student, or group of employees

or students because of their gender and that:

1. Has the purpose of, or effect of, creating an intimidating, hostile, or offensive work or academic environment.
2. Has the purpose of, or effect of, unreasonably interfering with an individual's performance of duties or studies; or,
3. Otherwise adversely affects an individual's employment or academic opportunities.
4. Harassing conduct includes:
 - a. Epithets, slurs, negative stereotyping, or threatening, intimidating or hostile acts that relate to gender and
 - b. Written or graphic material that belittles or shows hostility or aversion toward an individual or group because of gender and that is placed on walls, bulletin boards, or elsewhere on District premises or is circulated in the workplace.

B. Complaint Procedure

A student who believes he or she has been or is being subjected to any form of sexual harassment shall bring the matter to the attention of the Vice President of Student Services in accordance with the procedures in the District's complaints policy as outlined below. However, no procedure or step in that policy shall have the effect of requiring the student alleging harassment to present the matter to a person who is the subject of the complaint.

Students who feel they have been sexually harassed under the above definition and wish further information or assistance in filing a complaint should contact the Vice President of Student Services, Coastal Bend College.

The President of Coastal Bend College will be informed of all written complaints and may take any actions necessary at any time. Complaints of sexual harassment at Coastal Bend College will be taken seriously.

The following procedure will be followed as soon as a complaint is filed:

1. An investigation will be initiated immediately upon filing of a report by student(s). The administrator will evaluate the complaint.
2. The administrator will request that the complainant complete a harassment incident form listing the accused, relevant dates, alleged acts, frequency of conduct and their response to the conduct. The administrator will then file a written report on the alleged conduct. The administrator will also advise the complainant that any allegations found to be false will be dealt with severely. Complainant should be apprised of the counseling opportunities available.
3. Witnesses named by the complainant will then be interviewed confidentially and will be reminded that all details should remain confidential.
4. The accused will be interviewed and informed that failure to cooperate in the investigation is grounds for termination. Specific questions based on the complainant's allegations will be asked.
5. Witnesses named by the accused will be questioned.

6. Any documentary evidence will be examined and an investigation report will be written and reviewed by the parties deemed necessary. The report will be made available to the accused, the complainant and the President.

C. Levels of Discipline

Investigations will result in one of three findings: substantiated, not substantiated or inconclusive.

1. A substantiated complaint means the preponderance of evidence indicates that the sexual harassment policy has been violated. A penalty will be assigned by the President and if there is a finding of harassment, the accused will be able to appeal the finding or penalty assigned to the Board of Trustees
2. If the complaint is not substantiated, the complainant will have the opportunity to contest the finding. If a finding of not substantiated is issued, evidence did not substantiate another finding and perhaps there was a misunderstanding or miscommunication.
3. In an inconclusive case, both parties may be counseled. Written factual directives may be issued to the accused in any case.

Follow-up interviews will be conducted with the respective parties if deemed necessary.

D. Appeal Process

1. Administrator will continue process.
2. If the accused student is dropped from the program, the student will have the right to appeal. However, during the appeal the student will be allowed to attend class, but no clinical rotation(s).
3. If the student wins the appeal, they must attend absence committee meeting if applicable. They will then adhere to the ruling of that committee, with no appeal.
4. If the student does not win the appeal, they must go thru the exit interview within one (1) week, in order to able to re-apply to the program.

****Items marked with an asterisk indicate behaviors that also may violate federal or state laws**

Student Declaration Physical And Technical Competencies For Health Occupations Programs

An applicant or a student enrolled in health occupations programs at Coastal Bend College will be able to perform the following competencies:

- A. **Functionally use the sense of vision, hearing, smell, and touch with or without technical (mechanical) compensation.**

Rationale:

The student must be able to observe a patient accurately at a distance and close at hand to determine patient status. Observation necessitates the functional use of the sense of vision and somatic sensation. It is enhanced by the functional use of the sense of smell.

B. Execute functional psychomotor movements to provide general patient care and emergency treatments.

Rationale:

Provision of patient care and administration of emergency treatments require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision. Because the educational experience involves real patient care situations and the potential for emergency interventions, laboratory situations would not adequately compensate.

C. Hear, observe and speak to patients in order to elicit information, describe changes in mood, activity and posture and perceive nonverbal communications.

Rationale:

The student must be able to communicate with patients, staff and others effectively and with sensitivity. Communication includes not only speech but also reading and writing. The applicant must be able to communicate effectively in oral and written form with all members of the health care team.

D. Utilize intellectual abilities, exercise good judgment, complete tasks and comprehend spatial relationships. Comprehend three-dimensional relationships and understand the proportional relationships of structures.

Rationale:

The student must respond to newly emerging variable with varying levels of supervision. Poor judgment places patient and other staff at needless risk. Understanding of spatial relationships is necessary for accurate measurements and participation in various procedures.

E. Demonstrate the intellectual and emotional capabilities required to exercise good judgment.

Rationale:

The student must be able to promptly complete all responsibilities attendant to the care of patients and develop mature, sensitive and effective relationships with them.

F. Tolerate physically taxing workloads and function effectively under stress.

Rationale:

The student must be able to adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, and interest and motivation are all personal qualities that are essential for success in professional practice.

GENERAL STATEMENT

If at any time throughout the academic year, a student is unable to meet clinical requirements without limitations, that student will not be allowed to participate in the clinical area, therefore, time missed will accrue and the student will be dismissed from the Vocational Nursing Program per the attendance policy. If applicable, a student who is dismissed due

to failure to meet physical or technical competencies will follow the handbook guideline for re-admission.

Examples:

- A student becomes pregnant and requires bed rest.
- A student is involved in a car accident and has broken bones requiring assistive devices for ambulation, such as wheelchair, walker, crutches, or cane.
- A student requires surgery and does not receive a full medical release within the allotted time schedule and exceeding the time missed allowed per policy.

THERE IS NO LIGHT DUTY IN THE NURSING PROGRAM!!!!

Our main priority is to the safety of the public. Students have a limited opportunity to learn the skills required to function as a safe entry-level nurse; therefore, these guidelines will be strictly followed and enforced.

Acceptance to the Vocational Nursing Program is contingent on this standard:

If a reasonable accommodation cannot be achieved, the letter of acceptance will be withdrawn and academic assessment and counseling may be offered to help the student find an alternative field of study.

**THE AMERICANS WITH DISABILITIES ACT:
IMPLICATIONS FOR NURSING EDUCATION**

(Reapproved 2004)Foreword

In the early 1990s, the SREB Council on Collegiate Education for Nursing Board of Directors formed a task force to develop guidelines for nursing education programs to use in complying with the 1990 Americans with Disabilities Act (ADA). The members of the task force were:

- Linda Davis (chairwoman), University of Alabama at Birmingham;
- Linda Bowlin, University of Arkansas for Medical Sciences;
- Katherine J. Futch, Grady Memorial Hospital (Atlanta); and
- Mary Hazzard, Western Kentucky University.

Even today, nursing programs request these recommendations. Based on this continued interest in the task force's work, the CCEN is pleased to provide these recommendations here on the Southern Regional Education Board Web site.

These recommendations should not be viewed as legal advice or opinions on specific matters. The board assumes no responsibility for the implementation of the proposed guidelines, which are intended to serve as a framework for individually developed procedures.

This report is not a judicial interpretation of the ADA provisions. The task force urges nursing education programs to have the institution's attorney review ADA compliance procedures. Because private institutions are covered by Title III of the act, compliance requirements may vary.

Background and definitions

The U.S. Congress passed the 1990 Americans with Disabilities Act (ADA) to prohibit discrimination against qualified people with disabilities. The act defines a disabled person as someone a) who has a physical or mental impairment that substantially limits one or more of his or her major life activities; b) who has a record of such impairment; or c) who is regarded as having such an impairment.

For the purposes of nursing programs' compliance, a "qualified individual with a disability" is one who, with or without reasonable accommodations or modifications, meets the essential eligibility requirements for participation in the program. Thus, each institution may want to begin by defining the essential eligibility requirements for participation in its nursing program.

In developing the core performance standards, the CCEN task force used the definition of nursing as a practice discipline with cognitive, sensory, affective and psychomotor performance requirements. Each standard is accompanied by an example of an activity that a student would be required to perform in the typical collegiate nursing-education program. Each standard, if adopted, must be reflected in the course objectives.

Nursing programs must not base admission or continued enrollment on the standards but instead should use them to assist each student in determining whether accommodations or modifications are necessary. A student and his or her adviser should use the standards as an objective measure in deciding whether the student is "qualified" to meet requirements. Every applicant and student should have a copy of the standards.

If a student believes that he or she cannot meet one or more of the standards without accommodations or modifications, the nursing program must determine, on an individual basis, whether the necessary accommodations or modifications can be made reasonably. Reasonable accommodation is defined by the act to include:

- making existing facilities ... readily accessible to and usable by individuals with disabilities;
- job restructuring;
- part-time or modified work schedules;
- acquisition or modification of equipment or devices;
- appropriate adjustments to or modifications of examinations, training materials or policies; and
- the provision of qualified readers or interpreters.

The school shall develop procedures for students to receive appropriate assistance and guidance if they identify potential difficulties with meeting the core performance standards.

Recommendations for nursing education programs

- Institutional resources should be made available to advise and counsel applicants and students who qualify under the ADA.
- The institution should provide appropriate admissions staff, faculty and administration with training on the ADA and ADA guidelines.
- The core performance standards should be made available to:
- all potential applicants (for example, in catalogs, application materials and materials that describe the program);
- nursing faculty, staff and students;
- the state board of nursing and other accrediting groups for nursing; and
- agencies where educational experiences in clinical nursing occur.
- The nursing program should cooperate with other institutional units to identify auxiliary aids and services, such as building accessibility and hearing devices that may be needed for "reasonable accommodation."
- There should be procedures to provide students with appropriate guidance and assistance regarding the ADA and the core performance standards.

Core performance standards for admission and progression

| Issue | Standard | Examples of necessary activities (not all-inclusive) |
|-------------------|--|---|
| Critical thinking | Critical-thinking ability sufficient for clinical judgment | Identify cause/effect relationships in clinical situations, develop nursing plans of care. |
| Interpersonal | Interpersonal abilities sufficient for interaction with individuals, families and groups from various social, emotional, cultural and intellectual backgrounds | Establish rapport with patients/clients and colleagues |
| Communication | Communication abilities sufficient for verbal and written interaction with others | Explain treatment procedures, initiate health teaching, and document and interpret nursing actions and patient/client responses |
| Mobility | Physical abilities sufficient for movement | Move around in patient's room, work spaces and |

| | | |
|--------------|--|---|
| | from room to room and in small spaces | treatment areas; administer cardiopulmonary procedures |
| Motor skills | Gross and fine motor abilities sufficient for providing safe, effective nursing care | Calibrate and use equipment; position patients/clients |
| Hearing | Auditory ability sufficient for monitoring and assessing health needs | Hear monitor alarm, emergency signals, auscultatory sounds and cries for help |
| Visual | Visual ability sufficient for observation and assessment necessary in nursing care | Observe patient/client responses |
| Tactile | Tactile ability sufficient for physical assessment | Perform palpation, functions of physical examination and/or those related to therapeutic intervention (such as insertion of a catheter) |

Examples of disabilities likely covered by the ADA
Physical impairments

- Orthopedic, visual, speech and hearing impairments
- Cerebral palsy
- Epilepsy
- Muscular dystrophy
- Multiple sclerosis
- Cancer
- Heart disease
- Diabetes
- HIV (symptomatic or asymptomatic)
- Tuberculosis
- Addictions

Mental impairments

- Retardation
- Organic brain syndrome
- Psychiatric disorders
- Learning disabilities

Examples of "a record of such impairment"

History of the following:

- Psychiatric illness
- Addiction to drugs or alcohol
- Physical illness
- Erroneous diagnosis with a condition

Examples of "regarded" as having a disability

- Deformity not affecting function (such as facial or trunk deformity)
- Mild diabetes mellitus controlled by medication

References

Cicolino, J., G. Long and C. Spindler. "The Americans with Disabilities Act: Compliance and Complaints." *Public Sector*, 14(3). 1992.

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Kingsley, W.E. "The Americans with Disabilities Act of 1990." *Arnall Golden & Gregory Bulletin*.

Marx, G.S. "The Impact of the Americans with Disabilities Act on Colleges of Nursing." A paper presented in Washington, D.C., at the 1992 meeting of the American Association of Colleges of Nursing.

National Council of State Boards of Nursing Inc. "Implications of the ADA for Boards of Nursing." *Nursing Issues*. 1992.

Watson, J.W. *Americans with Disabilities Act: Final Rules and Information Sources*. Washington, D.C.: Congressional Research Service, 1992.

**Student
Declaration
Physical And
Technical
Competencies For
Health
Occupations
Programs-
Signature Page**

STUDENT DECLARATION
PHYSICAL AND TECHNICAL COMPETENCIES FOR HEALTH OCCUPATIONS
PROGRAMS

STUDENT DECLARATION
I am able to meet all of the above stated physical/technical competencies
without any special accommodations.

I am able to meet all of the above stated physical/technical competencies
without special accommodation. EXCEPT the following: (describe
limitation and accommodations needed).

At any time throughout the Vocational Nursing Program it is my
responsibility to inform the Director of Nursing Education of any change
of status.

Student Name (Print): _____
Date

Student Signature:

TO BE COMPLETED BY NURSING STAFF

Actions Recommended:

No action required
 Accommodation plan needed
 Other

Signature

FORWARD FOR REVIEW

Actions Recommended:

No action required
 Accommodation plan needed
 Other

Reviewed by:

COPY TO STUDENT FILE

Actions Recommended:

No action required
 Accommodation plan needed
 Other

PLEASE RETURN COPY TO DIRECTOR OF WORKFORCE/ DIRECTOR OF
 NURSING EDUCATION

**Student
 Representatives**

All students will have the opportunity throughout the nursing program to participate and contribute to decisions and changes involving the nursing program. Periodically a topic will be listed in an open forum through Web CT which will allow all students to contribute their thoughts and ideas in order to enhance or improve the nursing program content or delivery. Students thoughts and concerns will be discussed and considered in the decision making process at the next faculty staff meeting. Student representation is an integral part of the Attendance Committee.

Tape Recorders

Tape recorders are only allowed by individual instructors' permission.

Testing Guidelines

Course grade distribution is noted in each course syllabus.

Major exams shall consist **primarily** of four-option multiple choice questions. The numbers of questions and the time allowed for completion of the examination may vary. Tenets of test construction will be utilized for each exam.

1. Item analysis will be performed on all exams.

2. Test review will be arranged and conducted by each faculty member.
3. Make-up exams will be administered at the discretion of each faculty member. See syllabus for specific details.
4. The final examination is a comprehensive examination.
5. Students wishing to challenge test questions, must do so in writing. The written challenge must be submitted to the faculty administering the exam within one week of viewing the answer key. Successful challenges will result in revision of the test grade. The challenge must include the question, the correct answer and the source of the answer (page number in textbook, lecture notes, etc.). Each instructor will provide specific directions in each course syllabus.
6. The number and format of test questions may vary by faculty preference.
7. The dates of the exams are noted in advance on course calendars.
8. Make up tests may be administered by the course faculty member. Specific directions will be included in each course syllabus.
9. The make-up exam must be taken before the next scheduled exam.

Test Review

1. Tests will be reviewed within a reasonable time period. The faculty member will select the manner of test review.

Transportation

Transportation to clinical sites and seminars is the responsibility of each student

Tutoring

Tutoring is encouraged for those students who score 78% or less on a chapter test. The Professional Tutor is assigned as primary tutor; other approved tutors may be available.

Working While in the Vocational Nursing Program

It is the Vocational Nursing Program's recommendation that Students' do not work while in the program. However, for those students who must work, employment should be kept to minimum hours so that the objectives of the program can be met.

BON Process

During the last semester of the nursing program the student will be responsible for implementing and following the procedure to take the NCLEX exam. This consist of the following:

1. Apply for application through the BON website <http://www.bon.state.tx.us> at least 120 days prior to graduation.
2. Application for the Nursing Jurisprudence Examination, if not completed in the Professional Development Course. Available from <http://www.bon.state.tx.us>
3. Completing the process of scheduling for eligibility to take the NCLEX through the testing center at least 30 days prior to graduation @ WWW.VUE.COM/NCLEX

4. Paying all fees associated with this process.
5. Completing and submitting fingerprint cards if applicable.
6. Any and all steps concerning the BON and NCLEX testing procedure is the student's responsibility.

**Selected Board of
Nursing Rules**

Selected Rules from the
Board of Nursing

RULE §213.27

Good Professional Character

((a) Good professional character is the integrated pattern of personal, academic and occupational behaviors which, in the judgment of the Board, indicates that an individual is able to consistently conform his or her conduct to the requirements of the Nursing Practice Act, the Board's rules and regulations, and generally accepted standards of nursing practice including, but not limited to, behaviors indicating honesty, accountability, trustworthiness, reliability, and integrity.

(b) Factors to be used in evaluating good professional character in eligibility and disciplinary matters are:

(1) Good professional character is determined through the evaluation of behaviors demonstrated by an individual in his or her personal, academic and occupational history. An individual's age, education, and experience necessarily affect the nature and extent of behavioral history and, therefore, shall be considered in each evaluation.

(2) A person who seeks to obtain or retain a license to practice professional or vocational nursing shall provide evidence of good professional character which, in the judgment of the Board, is sufficient to insure that the individual can consistently act in the best interest of patients/clients and the public in any practice setting. Such evidence shall establish that the person:

(A) is able to distinguish right from wrong;

(B) is able to think and act rationally;

(C) is able to keep promises and honor obligations;

(D) is accountable for his or her own behavior;

(E) is able to practice nursing in an autonomous role with patients/clients, their families, significant others, and members of the public who are or who may become physically, emotionally, or financially vulnerable;

(F) is able to recognize and honor the interpersonal boundaries appropriate to any therapeutic relationship or health care setting; and

(G) is able to promptly and fully self-disclose facts, circumstances, events, errors, and omissions when such disclosure could enhance the health status of patients/clients or the public or could protect patients/clients or the public from unnecessary risk of harm.

(3) Any conviction for a felony or for a misdemeanor involving moral turpitude or order of probation with or without an adjudication of guilt for an offense that would be a felony or misdemeanor involving moral turpitude if guilt were adjudicated.

(4) Any revocation, suspension, or denial of, or any other adverse action relating to, the person's license or privilege to practice nursing in another jurisdiction.

(c) The following provisions shall govern the determination of present good professional character and fitness of a Petitioner, Applicant, or Licensee who has been convicted of a felony in Texas or placed on probation for a felony with or without an adjudication of guilt in Texas, or who has been convicted or placed on probation with or without an adjudication of guilt in another jurisdiction for a crime which would be a felony in Texas. A Petitioner, Applicant, or Licensee may be found lacking in present good professional character and fitness under this rule based on the underlying facts of a felony conviction or deferred adjudication, as well as based on the conviction or probation through deferred adjudication itself.

(1) The record of conviction or order of deferred adjudication is conclusive evidence of guilt.

(2) In addition to the disciplinary remedies available to the Board pursuant to Tex. Occ. Code Ann. §301.452(b)(3) and (4), Texas Occupations Code chapter 53, and §213.28, a licensee guilty of a felony under this rule is conclusively deemed to have violated Tex. Occ. Code Ann. §301.452(b)(10) and is subject to appropriate discipline, up to and including revocation.

(d) The following provisions shall govern the determination of present good professional character and fitness of a Petitioner, Applicant, or Licensee who has been licensed to practice nursing in any jurisdiction and has been disciplined, or allowed to voluntarily surrender in lieu of discipline, in that jurisdiction.

(1) A certified copy of the order, judgment of discipline, or order of adverse licensure action from the jurisdiction is prima facie evidence of the matters contained in such order, judgment, or adverse action and is conclusive evidence that the individual in question has committed professional misconduct as alleged in such order of judgment.

(2) An individual disciplined for professional misconduct in the course of practicing nursing in any jurisdiction or an or an individual who resigned in lieu of disciplinary action (disciplined individual) is deemed not to have present good professional character and fitness and is, therefore, ineligible to file an Application for Endorsement to the Texas Board of Nursing during the period of such discipline imposed by such jurisdiction, and in the case of revocation or surrender in lieu of disciplinary action, until the disciplined individual has filed an application for reinstatement in the disciplining jurisdiction and obtained a final determination on that application.

(3) The only defenses available to a Petitioner, Applicant, or Licensee under section (d) are outlined below and must be proved by clear and convincing evidence:

(A) The procedure followed in the disciplining jurisdiction was so lacking in notice or opportunity to be heard as to constitute a deprivation of due process.

(B) There was such an infirmity of proof establishing the misconduct in the other jurisdiction as to give rise to the clear conviction that the Board, consistent with its duty, should not accept as final the conclusion on the evidence reached in the disciplining jurisdiction.

(C) The deeming of lack of present good professional character and fitness by the Board during the period required under the provisions of section (d) would result in grave injustice.

(D) The misconduct for which the individual was disciplined does not constitute professional misconduct in Texas.

(4) If the Board determines that one or more of the foregoing defenses has been established, it shall render such orders as it deems necessary and appropriate.

(e) An individual who applies for initial licensure, reinstatement, renewal, or endorsement to practice professional or vocational nursing in Texas after the expiration of the three-year period in subsection (f) of this section, or after the completion of the disciplinary period assessed or ineligibility period imposed by any jurisdiction under subsection (d) of this section shall be required to prove, by a preponderance of the evidence:

(1) that the best interest of the public and the profession, as well as the ends of justice, would be served by his or her admission to practice nursing; and

(2) that (s)he is of present good professional character and fitness.

(f) An individual who applies for initial licensure, reinstatement, renewal, or endorsement to practice professional or vocational nursing in Texas after a negative determination based on a felony conviction, felony probation with or without an adjudication of guilt, or professional misconduct, or voluntary surrender in lieu of disciplinary action and whose application or petition is denied and not appealed is not eligible to file another petition or application for licensure until after the expiration of three years from the date of the Board's order denying the preceding petition for licensure.

(g) The following disciplinary and eligibility sanction policies and guidelines shall be used

by the Executive Director, the State Office of Administrative Hearings (SOAH), or the Board in evaluating good professional character in eligibility and disciplinary matters:

(1) Disciplinary Sanctions for Fraud, Theft and Deception approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1646) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(2) Disciplinary Sanctions for Lying and Falsification approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1647) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(3) Disciplinary Sanctions for Sexual Misconduct approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1649) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(4) Eligibility and Disciplinary Sanctions for Nurses with Substance Abuse, Misuse, Substance Dependency, or other Substance Use Disorder and published on February 22, 2008 in the *Texas Register* (33 TexReg 1651) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(5) Disciplinary Guidelines for Criminal Conduct approved by the Board and published on March 9, 2007 in the *Texas Register* (32 TexReg 1409) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/discp-guide.html>.

§213.28. Licensure of Persons with Criminal Convictions.

(a) This section sets out the considerations and criteria in determining the effect of criminal offenses on the eligibility of a person to obtain a license and the consequences that criminal offenses may have on a person's ability to retain or renew a license as a registered nurse or licensed vocational nurse. The Board may refuse to approve persons to take the licensure examination, may refuse to issue or renew a license or certificate of registration, or may refuse to issue a temporary permit to any individual that has been convicted of or received a deferred disposition for a felony, a misdemeanor involving moral turpitude, or engaged in conduct resulting in the revocation of probation.

(b) The practice of nursing involves clients, their families, significant others and the public in diverse settings. The registered and vocational nurse practices in an autonomous role with individuals who are physically, emotionally and financially vulnerable. The nurse has access to personal information about all aspects of a person's life, resources and relationships. Therefore, criminal behavior whether violent or non-violent, directed against persons, property or public order and decency is considered by the Board as highly relevant to an individual's fitness to practice nursing. The Board considers the following categories of criminal conduct to relate to and affect the practice of nursing:

(1) offenses against the person similar to those outlined in Title 5 of the Texas Penal Code.

(A) These offenses include, but are not limited to, the following crimes, as well as any crime that contains substantially similar or equivalent elements under another state or federal law:

- (i) Abandonment/Endangerment of a Child {TPC §22.041}
- (ii) Agree to Abduct Child for Remuneration: Younger than Eighteen {TPC §25.031}
- (iii) Aiding Suicide: Serious Bodily Injury/Death {TPC §22.08}
- (iv) Assault, Aggravated {TPC §22.02}
- (v) Capital Murder {TPC §19.03}
- (vi) Child Pornography, Possession or Promotion {TPC §43.26(a), (e) (Texas Rules of Criminal Procedure Ch. 62)}
- (vii) Indecency with a Child {TPC §21.11 (TRCP Ch. 62)}
- (viii) Indecent exposure (2 or more counts and/or required to register as sex offender) {TPC §21.08 (TRCP Ch. 62)}
- (ix) Injury to Child, Elderly, Disabled {TPC §22.04}

- (x) Kidnapping {TPC §20.03, §20.04 (TRCP Ch. 62)}
 - (xi) Manslaughter {TPC §19.04}
 - (xii) Murder {TPC §19.02}
 - (xiii) Online Solicitation of a Minor {TPC §33.021(b), (c), (f); (TRCP Ch. 62)}
 - (xiv) Prostitution, Compelling {TPC §43.05 (TRCP Ch. 62)}
 - (xv) Protective Order, Violation {TPC §25.07, §25.071}
 - (xvi) Sale or Purchase of a Child {TPC §25.08}
 - (xvii) Sexual Assault {TPC §22.011 (TRCP Ch. 62)}
 - (xviii) Sexual Conduct, Prohibited {TPC §25.02 (TRCP Ch. 62)}
 - (xix) Sexual Assault, Aggravated {TPC §22.021 (TRCP Ch. 62)}
 - (xx) Sexual Performance by Child {TPC §43.24 (d), §43.25(b) (TRCP Ch. 62)}
 - (xxi) Unlawful Restraint {TPC §0.02}
 - (xxii) Assault {TPC §22.01(a)(1), (b), (c)}
 - (xxiii) Criminally negligent homicide {TPC §19.05}
 - (xxiv) Improper Relationship between Educator and Student {TPC §21.12}
 - (xxv) Improper photography {TPC §21.15}
 - (xxvi) Obscenity, Wholesale promotion {TPC §43.23(a), (h)}
 - (xxvii) Prostitution (3 or more counts) or Aggravated Promotion {TPC §43.02, §43.04}
 - (xxviii) Resisting Arrest, Use of Deadly Weapon {TPC §38.03(d)}
 - (xxix) Stalking {TPC §42.072(b)}
 - (xxx) Harassment {TPC §42.07}
 - (xxxi) Prostitution or Promotion of {TPC §43.02}
 - (xxxii) Protective Order, Violation {TPC §25.07, §38.112}
 - (xxxiii) Resisting Arrest {TPC §38.03(a)}
 - (xxxiv) Deadly conduct {TPC §22.05(a)}
 - (xxxv) Obscenity, Participates {TPC §43.23(c), (h)}
 - (xxxvi) Terroristic Threat {TPC §22.07}
 - (xxxvii) Criminal Attempt or Conspiracy {TPC §15.01, §15.02}
- (B) These types of crimes relate to the practice of nursing because:
- (i) nurses have access to persons who are vulnerable by virtue of illness or injury and are frequently in a position to be exploited;
 - (ii) nurses have access to persons who are especially vulnerable including the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized and may be subject to harm by similar criminal behavior;
 - (iii) nurses are frequently in situations where they provide intimate care to patients or have contact with partially clothed or fully undressed patients who are vulnerable to exploitation both physically and emotionally;
 - (iv) nurses are in the position to have access to privileged information and opportunity to exploit patient vulnerability; and
 - (v) nurses who commit these crimes outside the workplace raise concern about the nurse's propensity to repeat that same misconduct in the workplace and raises concerns regarding the individual's ability to provide safe, competent care to patients.
- (2) offenses against property, e.g., robbery, burglary and theft, etc.
- (A) These offenses include, but are not limited to, the following crimes, as well as any crime that contains substantially similar or equivalent elements under another state or federal law:
- (i) Burglary (if punishable under Penal Code §30.02(d)) {TRCP Ch. 62 (§62.001(5)(D))}
 - (ii) Robbery {TPC §29.02}
 - (iii) Robbery, Aggravated {TPC §29.03}
 - (iv) Arson {TPC §28.02(d)}
 - (v) Burglary {TPC §30.02}
 - (vi) Criminal Mischief {TPC §28.03}

- (vii) Money Laundering \geq \$1500 {TPC §34.02(e)(1) - (4)}
- (viii) Theft \geq \$1500 {TPC §31.03(e)(4) - (7)}
- (ix) Theft $<$ 9 {TPC §31.03(e)(1) - (3)}
- (x) Vehicle, Unauthorized Use {TPC §31.07}
- (xi) Criminal Trespass {TPC §30.05(a),(d)}
- (xii) Cruelty to Animals {TPC §42.091}
- (xiii) Criminal Attempt or Conspiracy {TPC §15.01, §15.02}

(B) These types of crimes relate to the practice of nursing because:

- (i) nurses have access to persons who are vulnerable by virtue of illness or injury and are frequently in a position to be exploited;
- (ii) nurses have access to persons who are especially vulnerable including the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized and may provide easy opportunity to be victimized;
- (iii) nurses have access to persons who frequently bring valuables (medications, money, jewelry, items of sentimental value, checkbook, or credit cards) with them to a health care facility with no security to prevent theft or exploitation;
- (iv) nurses frequently provide care in private homes and home-like settings where all of the patient's property and valuables are accessible to the nurse;
- (v) nurses frequently provide care autonomously without direct supervision and may have access to and opportunity to misappropriate property; and
- (vi) nurses who commit these crimes outside the workplace raise concern about the nurse's propensity to repeat that same misconduct in the workplace and, therefore, place patients' property at risk.
- (vii) certain crimes involving property, such as cruelty to animals and criminal trespass, may also concern the safety of persons and, as such, raise concerns about the propensity of the nurse to repeat similar conduct in the workplace, placing patients at risk.

(3) offenses involving fraud or deception.

(A) These offenses include, but are not limited to, the following crimes, as well as any crime that contains substantially similar or equivalent elements under another state or federal law:

- (i) Attempt, Conspiracy, or Solicitation of Ch. 62 offense {TRCP Ch. 62}
- (ii) Tampering with a Government Record {TPC §37.10}
- (iii) Insurance Fraud: Intent to Defraud {TPC §35.02(a-1), (d)}
- (iv) Insurance Fraud: Claim $>$ \$500 {TPC §35.02(c)}
- (v) Insurance Fraud: Claim $<$ 0 {TPC §35.02 (c)(1) - (3)}
- (vi) Medicaid Fraud $>$ \$1500 {TPC §35A.02(b)(4) - (7)}
- (vii) Medicaid Fraud $<$ \$1500 {TPC §35A.02(b)(2) - (3)}
- (viii) Criminal Attempt or Conspiracy {TPC §15.01, §15.02}

(B) These types of crime relate to the practice of nursing because:

- (i) nurses have access to persons who are vulnerable by virtue of illness or injury and are frequently in a position to be exploited;
- (ii) nurses have access to persons who are especially vulnerable including the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized;
- (iii) nurses are in the position to have access to privileged information and opportunity to exploit patient vulnerability;
- (iv) nurses are frequently in situations where they must report patient condition, record objective/subjective information, provide patients with information, and report errors in the nurse's own practice or conduct;
- (v) the nurse-patient relationship is of a dependent nature; and
- (vi) nurses who commit these crimes outside the workplace raise concern about the nurse's propensity to repeat that same misconduct in the workplace and, therefore, place patients at risk.

(4) offenses involving lying and falsification.

(A) These offenses include, but are not limited to, the following crimes, as well as any crime that contains substantially similar or equivalent elements under another state or federal law:

- (i) False Report or Statement {TPC §32.32, §42.06}
- (ii) Forgery {TPC §32.21(c), (d), (e)}
- (iii) Tampering with a Governmental Record {TPC §37.10}

(B) These crimes are related to nursing because:

- (i) nurses have access to persons who are vulnerable by virtue of illness or injury;
- (ii) nurses have access to persons who are especially vulnerable including the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized;
- (iii) nurses are frequently in situations where they must report patient condition, record objective/subjective information, provide patients with information, and report errors in the nurse's own practice or conduct;

(iv) honesty, accuracy and integrity are personal traits valued by the nursing profession, and considered imperative for the provision of safe and effective nursing care;

(v) falsification of documents regarding patient care, incomplete or inaccurate documentation of patient care, failure to provide the care documented, or other acts of deception raise serious concerns whether the nurse will continue such behavior and jeopardize the effectiveness of patient care in the future;

(vi) falsification of employment applications and failing to answer specific questions that would have affected the decision to employ, certify, or otherwise utilize a nurse raises concerns about a nurse's propensity to lie and whether the nurse possesses the qualities of honesty and integrity;

(vii) falsification of documents or deception/lying outside of the workplace, including falsification of an application for licensure to the Board, raises concerns about the person's propensity to lie, and the likelihood that such conduct will continue in the practice of nursing; and

(viii) a crime of lying or falsification raises concerns about the nurse's propensity to engage in similar conduct while practicing nursing and place patients at risk.

(5) offenses involving the delivery, possession, manufacture, or use of, or dispensing or prescribing a controlled substance, dangerous drug, or mood-altering substance.

(A) These offenses include, but are not limited to, the following crimes, as well as any crime that contains substantially similar or equivalent elements under another state or federal law:

- (i) Drug Violations under Health and Safety Code Chs. 481, 482, 483; or
- (ii) Driving While Intoxicated (2 or more counts) {TPC §49.09}

(B) These crimes relate to the practice of nursing because:

- (i) nurses have access to persons who are vulnerable by virtue of illness or injury;
- (ii) nurses have access to persons who are especially vulnerable including the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized;
- (iii) nurses provide care to critical care, geriatric, and pediatric patients who are particularly vulnerable given the level of vigilance demanded under the circumstances of their health condition;

(iv) nurses are able to provide care in private homes and home-like setting without supervision;

(v) nurses who are chemically dependent or who abuse drugs or alcohol may have impaired judgment while caring for patients and are at risk for harming patients; and

(vi) an offense regarding delivery, possession, manufacture, or use of, or dispensing , or prescribing a controlled substance, dangerous drug or mood altering drug raises concern about the nurse's propensity to repeat that same misconduct in the workplace.

(vii) DWI offenses involve the use and/or abuse of mood altering drugs while

performing a state licensed activity affecting public safety; repeated violations suggest a willingness to continue in reckless and dangerous conduct, or an unwillingness to take appropriate corrective measures, despite previous disciplinary action by the state.

(c) In considering whether a criminal offense renders the individual ineligible for licensure or renewal of licensure as a registered or vocational nurse, the Board shall consider:

(1) the knowing or intentional practice of nursing without a license issued under the NPA;

(2) any felony or misdemeanor involving moral turpitude;

(3) the nature and seriousness of the crime;

(4) the relationship of the crime to the purposes for requiring a license to engage in nursing practice;

(5) the extent to which a license might offer an opportunity to engage in further criminal activity of the same type as that in which the person previously had been involved; and

(6) the relationship of the crime to the ability, capacity, or fitness required to perform the duties and discharge the responsibilities of nursing practice;

(7) whether imprisonment followed a felony conviction, felony community supervision revocation, revocation of parole or revocation of mandatory supervision; and

(8) conduct that results in the revocation of probation imposed because of conviction for a felony or for a misdemeanor involving moral turpitude.

(d) Crimes listed under subsections (b)(1)(A)(i) - (xxi), (b)(2)(A)(i) - (iii), and (b)(3)(A)(i) of this section are offenses identified under §301.4535 of the NPA. As such, these offenses require the board to suspend a nurse's license, revoke a license, or deny issuing a license to an applicant upon proof of initial conviction.

(e) In addition to the factors that may be considered under subsection (c) of this section, the Board, in determining the present fitness of a person who has been convicted of or received a deferred order for a crime, shall consider:

(1) the extent and nature of the person's past criminal activity;

(2) the age of the person when the crime was committed;

(3) the amount of time that has elapsed since the person's last criminal activity;

(4) the conduct and work activity of the person before and after the criminal activity;

(5) evidence of the person's rehabilitation or rehabilitative effort while incarcerated or after release; and

(6) other evidence of the person's present fitness, including letters of recommendation from: prosecutors and law enforcement and correctional officers who prosecuted, arrested, or had custodial responsibility for the person; the sheriff or chief of police in the community where the person resides; and any other persons in contact with the convicted person.

(f) It shall be the responsibility of the applicant, to the extent possible, to obtain and provide to the Board the recommendations of the prosecution, law enforcement, and correctional authorities as required under this Act. The applicant shall also furnish proof in such form as may be required by the Board that he or she has maintained a record of steady employment and has supported his or her dependents and has otherwise maintained a record of good conduct and has paid all outstanding court costs, supervision fees, fines, and restitution as may have been ordered in all criminal cases in which he or she has been convicted or received a deferred order.

(g) If requested by staff, it shall be the responsibility of the individual seeking licensure to ensure that staff is provided with legible, certified copies of all court and law enforcement documentation from all jurisdictions where the individual has resided or practiced as a licensed health care professional. Failure to provide complete, legible and accurate documentation will result in delays prior to licensure or renewal of licensure and possible grounds for ineligibility.

(h) The fact that a person has been arrested will not be used as grounds for disciplinary action. If, however, evidence ascertained through the Board's own investigation from

information contained in the arrest record regarding the underlying conduct suggests actions violating the Nursing Practice Act or rules of the Board, the board may consider such evidence as a factor in its deliberations regarding any decision to grant a license, restrict a license, or impose licensure discipline.

(i) Behavior that would otherwise bar or impede licensure may be deemed a "Youthful Indiscretion" as determined by an analysis of the behavior using the factors set out in §213.27 of this title (relating to Good Professional Character), subsections (a) - (f) of this section and at least the following criteria:

- (1) age of 22 years or less at the time of the behavior;
 - (2) absence of criminal plan or premeditation;
 - (3) presence of peer pressure or other contributing influences;
 - (4) absence of adult supervision or guidance;
 - (5) evidence of immature thought process/judgment at the time of the activity;
 - (6) evidence of remorse;
 - (7) evidence of restitution to both victim and community;
 - (8) evidence of current maturity and personal accountability;
 - (9) absence of subsequent undesirable conduct;
 - (10) evidence of having learned from past mistakes;
 - (11) evidence of current support structures that will prevent future criminal activity;
- and

(12) evidence of current ability to practice nursing in accordance with the Nursing Practice Act, Board rules and generally accepted standards of nursing.

(j) With respect to a request to obtain a license from a person who has a criminal history, the executive director is authorized to close an eligibility file when the applicant has failed to respond to a request for information or to a proposal for denial of eligibility within 60 days thereof.

(k) The board shall revoke a license or authorization to practice as an advanced practice nurse upon the imprisonment of the licensee following a felony conviction or deferred adjudication, or revocation of felony community supervision, parole, or mandatory supervision.

(l) The board shall revoke or deny a license or authorization to practice as an advanced practice nurse for the crimes listed in Texas Occupations Code §301.4535.

(m) The following disciplinary and eligibility sanction policies and guidelines shall be used by the Executive Director, the State Office of Administrative Hearings (SOAH), or the Board in evaluating the impact of criminal conduct on nurse licensure in eligibility and disciplinary matters:

(1) Disciplinary Sanctions for Fraud, Theft and Deception approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1646) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(2) Disciplinary Sanctions for Lying and Falsification approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1647) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(3) Disciplinary Sanctions for Sexual Misconduct approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1649) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(4) Eligibility and Disciplinary Sanctions for Nurses with Substance Abuse, Misuse, Substance Dependency, or other Substance Use Disorder and published on February 22, 2008 in the *Texas Register* (33 TexReg 1651) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(5) Disciplinary Guidelines for Criminal Conduct approved by the Board and published on March 9, 2007 in the *Texas Register* (32 TexReg 1409) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/discp-guide.html>.

§213.29. Criteria and Procedure Regarding Intemperate Use and Lack of

Fitness in Eligibility and Disciplinary Matters.

- (a) A person desiring to obtain or retain a license to practice professional or vocational nursing shall provide evidence of current sobriety and fitness consistent with this rule.
- (b) Such person shall provide a sworn certificate to the Board stating that he/she has read and understands the requirements for licensure as a registered or vocational nurse and that he/she has not:
- (1) within the past five years, become addicted to or treated for the use of alcohol or any other drug; or
 - (2) within the past five years, been diagnosed with, treated or hospitalized for schizophrenia and/or other psychotic disorders, bi-polar disorder, paranoid personality disorder, antisocial personality disorder or borderline personality disorder.
- (c) If a registered or vocational nurse is reported to the Board for intemperate use, abuse of drugs or alcohol, or diagnosis of or treatment for chemical dependency; or if a person is unable to sign the certification in subsection (b) of this section, the following restrictions and requirements apply:
- (1) Any matter before the Board that involves an allegation of chemical dependency, or misuse or abuse of drugs or alcohol, will require at a minimum that such person obtain for Board review an evaluation that meets the criteria of §213.33 of this chapter (relating to Factors Considered for Imposition of Penalties/Sanctions and/or Fines);
 - (2) Those persons who have become addicted to or treated for alcohol or chemical dependency will not be eligible to obtain or retain a license to practice as a nurse unless such person can demonstrate sobriety and abstinence for the preceding twelve consecutive months through verifiable and reliable evidence, or can establish eligibility to participate in a peer assistance program created pursuant to Chapter 467 of the Health and Safety Code;
 - (3) Those persons who have become addicted to or treated for alcohol or chemical dependency will not be eligible to obtain or retain an unencumbered license to practice nursing until the individual has attained a five-year term of sobriety and abstinence or until such person has successfully completed participation in a board-approved peer assistance program created pursuant to Chapter 467 of the Health and Safety Code.
 - (4) Those persons who have been diagnosed with, treated, or hospitalized for the disorders mentioned in subsection (b) of this section shall execute an authorization for release of medical, psychiatric, and treatment records.
- (d) It shall be the responsibility of those persons subject to this rule to submit to and pay for an evaluation that meets the criteria of §213.33 of this chapter.
- (e) Prior intemperate use, mental illness, or diminished mental capacity is relevant only so far as it may indicate current intemperate use or lack of fitness.
- (f) With respect to chemical dependency in eligibility and disciplinary matters, the executive director is authorized to:
- (1) review submissions from a movant, materials and information gathered or prepared by staff, and identify any deficiencies in file information necessary to determine the movant's request;
 - (2) close any eligibility file in which the movant has failed to respond to a request for information or to a proposal for denial of eligibility within 60 days thereof;
 - (3) approve eligibility, enter eligibility orders and approve renewals, without Board ratification, when the evidence is clearly insufficient to prove a ground for denial of licensure; and
 - (4) propose conditional orders in eligibility, disciplinary and renewal matters for individuals who have experienced chemical/alcohol dependency within the past five years provided:
 - (A) the individual presents reliable and verifiable evidence of having functioned in a sober/abstinent manner for the previous twelve consecutive months; and
 - (B) licensure limitations/stipulations and/or peer assistance program participation can be implemented which will ensure that patients and the public are protected until the individual has attained a five-year term of sobriety/abstinence.

(g) With respect to mental illness or diminished mental capacity in eligibility, disciplinary, and renewal matters, the executive director is authorized to propose conditional orders for individuals who have experienced mental illness or diminished mental capacity within the past five years provided:

- (1) the individual presents reliable and verifiable evidence of having functioned in a manner consistent with the behaviors required of nurses under the Nursing Practice Act and Board rules for at least the previous twelve consecutive months; and
 - (2) licensure limitations/stipulations and/or peer assistance program participation can be implemented which will ensure that patients and the public are protected until the individual has attained a five-year term of controlled behavior and consistent compliance with the requirements of the Nursing Practice Act and Board rules.
- (h) In renewal matters involving chemical dependency use, mental illness, or diminished mental capacity, the executive director shall consider the following information from the preceding renewal period:
- (1) evidence of the licensee's safe practice;
 - (2) compliance with the NPA and Board rules; and
 - (3) written verification of compliance with any treatment.
- (i) Upon receipt of items (h)(1) - (3) of this section, the executive director may renew the license.
- (j) The following disciplinary and eligibility sanction policies and guidelines shall be used by the Executive Director, the State Office of Administrative Hearings (SOAH), or the Board in evaluating the appropriate licensure determination or sanction in eligibility and disciplinary matters:
- (1) Eligibility and Disciplinary Sanctions for Nurses with Substance Abuse, Misuse, Substance Dependency, or other Substance Use Disorder and published on February 22, 2008 in the *Texas Register* (33 TexReg 1651) and available on the Board's web site at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.
 - (2) Disciplinary Guidelines for Criminal Conduct approved by the Board and published on March 9, 2007 in the *Texas Register* (32 TexReg 1409) and available on the Board's website <http://www.bon.state.tx.us/disciplinaryaction/discp-guide.html>.

§213.30. Declaratory Order of Eligibility for Licensure.

- (a) For purposes of this section only, "petitioner" means an individual who:
- (1) is enrolled or planning to enroll in an educational nursing program that prepares individuals for initial licensure as a registered or vocational nurse;
 - (2) seeks licensure by endorsement pursuant to §217.5 of this title (relating to Temporary License and Endorsement); or
 - (3) seeks licensure by examination pursuant to §217.2 (relating to Licensure by Examination for Graduates of Nursing Education Programs Within the United States, its Territories, or Possessions) or §217.4 (relating to Requirements for Initial Licensure by Examination for Nurses Who Graduate From Nursing Education Programs Outside of United States' Jurisdiction) of this title.
- (b) An individual who has reason to believe that he or she may be ineligible for initial licensure or licensure by endorsement may petition the Board for a declaratory order as to his or her eligibility.
- (c) A petitioner must submit a petition on forms provided by the Board, which includes:
- (1) a statement by the petitioner indicating the reason(s) and basis of potential ineligibility;
 - (2) if the potential ineligibility is due to criminal conduct and/or conviction, any court documents including, but not limited to: indictments, orders of deferred adjudication, judgments, probation records, and evidence of completion of probation, if applicable;
 - (3) if the potential ineligibility is due to mental illness, evidence of an evaluation that meets the criteria of §213.33 of this chapter (relating to Factors Considered for Imposition of Penalties/Sanctions) and evidence of treatment;
 - (4) if the potential ineligibility is due to chemical dependency, including alcohol,

evidence of an evaluation that meets the criteria of §213.33 of this chapter and treatment, after care, and support group attendance; and

- (5) the required fee, which is not refundable.
- (d) Once the Board has received all necessary information, including the information required by subsection (c) of this section, an investigation of the petition and the petitioner's eligibility shall be conducted.
- (e) The petitioner or the Board may amend the petition to include additional grounds for potential ineligibility at any time before a final determination is made.
- (f) If an individual seeking licensure by endorsement pursuant to §217.5 of this title has been licensed to practice professional or vocational nursing in any jurisdiction and has been disciplined in that jurisdiction or allowed to surrender in lieu of discipline in that jurisdiction, the following provisions shall govern the eligibility of the petitioner with regard to §213.27 of this title (relating to Good Professional Character).
- (1) A certified copy of the order or judgment of discipline from the jurisdiction is prima facie evidence of the matters contained in such order or judgment, and a final adjudication in the jurisdiction that the individual has committed professional misconduct is conclusive of the professional misconduct alleged in such order or judgment.
- (2) An individual who is disciplined for professional misconduct in the course of nursing in any jurisdiction or who resigned in lieu of disciplinary action is deemed to not have present good professional character under §213.27 of this title, and is therefore ineligible to seek licensure by endorsement under §217.5 of this title during the period of discipline imposed by such jurisdiction, and in the case of revocation or surrender in lieu of disciplinary action, until the individual has filed a petition for reinstatement in the disciplining jurisdiction and obtained a final determination on that petition.
- (g) If a petitioner's potential ineligibility is due to criminal conduct and/or conviction, including deferred adjudication, the following provisions shall govern the eligibility of the petitioner with regard to §213.28 of this title (relating to Licensure of Persons with Criminal Convictions).
- (1) The record of conviction, guilty plea, or order of deferred adjudication is conclusive evidence of guilt.
- (2) Upon proof that a felony conviction or felony order of probation, with or without adjudication of guilt, has been set aside or reversed, the petitioner shall be entitled to a new hearing before the Board for the purpose of determining whether, absent the record of conclusive evidence of guilt, the petitioner possesses present good professional character and fitness.
- (h) If the Executive Director proposes to find the petitioner ineligible for licensure, the petitioner may obtain a hearing before the State Office of Administrative Hearings (SOAH). The Executive Director shall have discretion to set a hearing and give notice of the hearing to the petitioner. The hearing shall be conducted in accordance with §213.22 of this chapter (relating to Formal Proceedings) and the rules of SOAH. When in conflict, SOAH's rules of procedure will prevail. The decision of the Board shall be rendered in accordance with §213.23 of this chapter (relating to Decision of the Board).
- (i) A final Board order is issued after an appeal results in a Proposal for Decision from SOAH. The Board's final order must set out each basis for potential ineligibility and the Board's determination as to eligibility. In the absence of new evidence not disclosed by the petitioner or not reasonably available to the Board at the time the order is issued, the Board's ruling determines the petitioner's eligibility with respect to the grounds for potential ineligibility as set out in the order. An individual whose petition is denied by final order of the Board may not file another petition or seek licensure by endorsement or examination until after the expiration of three years from the date of the Board's order denying the petition. If the petitioner does not appeal or request a formal hearing at SOAH after a letter proposal to deny eligibility made by the Eligibility and Disciplinary Committee of the Board or the Executive Director, the petitioner may re-petition or seek licensure by endorsement or examination after the expiration of one year from the date of the proposal to deny eligibility, in accordance with this section and the Occupations

Code §301.257.

(j) The Disciplinary Matrix and factors set forth in §213.33(b) and (c) of this chapter and the following disciplinary and eligibility sanction policies and guidelines shall be used by the Executive Director and SOAH when recommending a declaratory order of eligibility, and the Board in determining the appropriate declaratory order in eligibility matters:

(1) Disciplinary Sanctions for Fraud, Theft and Deception approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1646) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(2) Disciplinary Sanctions for Lying and Falsification approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1647) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(3) Disciplinary Sanctions for Sexual Misconduct approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1649) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(4) Eligibility and Disciplinary Sanctions for Nurses with Substance Abuse, Misuse, Substance Dependency, or other Substance Use Disorder and published on February 22, 2008 in the *Texas Register* (33 TexReg 1651) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(5) Disciplinary Guidelines for Criminal Conduct approved by the Board and published on March 9, 2007 in the *Texas Register* at (32 TexReg 1409) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/discp-guide.html>.

(k) If an individual seeking licensure by endorsement under §217.5 of this title or licensure by examination under §217.2 or §217.4 of this title should have had an eligibility issue settled pursuant to the Occupations Code §301.257, the filed application will be treated and processed as a petition for declaratory order under this section, and the individual will be treated as a petitioner under this section and will be required to pay the non-refundable fee required by this section.

section implements the requirements of the Occupations Code Chapter 53 Subchapter D and the Occupations Code §301.257.

The following questions will be answered upon application for licensure:

For any criminal offense, including those pending appeal, have you:

- A. been convicted of a misdemeanor?
- B. been convicted of a felony?
- C. pled nolo contendere, no contest, or guilty?
- D. received deferred adjudication?
- E. been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?
- F. been sentenced to serve jail or prison time? court-ordered confinement?
- G. been granted pre-trial diversion?
- H. been arrested or any pending criminal charges?
- I. been cited or charged with any violation of the law?
- J. been subject of a court-martial; Article 15 violation; or received any form of military judgment/punishment/action?

(You may only exclude Class C misdemeanor traffic violations.)

NOTE: Expunged and Sealed Offenses: While expunged or sealed offenses, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, ticket or citation has, in fact, been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in question to our office with your application. Failure to reveal an offense, arrest, ticket, or citation that is not in fact expunged or sealed, will at a minimum, subject your license to a disciplinary fine.

Nondisclosure of relevant offenses raises questions related to truthfulness and character.

NOTE: Orders of Non-Disclosure: Pursuant to Tex. Gov't Code § 552.142(b), if you have criminal matters that are the subject of an order of non-disclosure you are not required to reveal those criminal matters on this form. However, a criminal matter that is the subject of an order of non-disclosure may become a character and fitness issue. Pursuant to other sections of the Gov't Code chapter 411, the Texas Nursing Board is entitled to access criminal history record information that is the subject of an order of non-disclosure. If the Board discovers a criminal matter that is the subject of an order of non-disclosure, even if you properly did not reveal that matter, the Board may require you to provide information about that criminal matter.

2) No Yes Are you currently the target or subject of a grand jury or governmental agency investigation?

3) No Yes Has any licensing authority refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a professional license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?

4) No Yes Within the past five (5) years have you been addicted to and/or treated for the use of alcohol or any other drug?*

5) No Yes Within the past five (5) years have you been diagnosed with, treated, or hospitalized for schizophrenia and/or psychotic disorder, bipolar disorder, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder?

If "YES" indicate the condition: schizophrenia and/or psychotic disorders, bipolar disorder,

paranoid personality disorder, antisocial personality disorder, borderline personality disorder

If you answered "YES" to any of the questions listed above, attach a letter of explanation that is dated and signed indicating the circumstance(s) you are reporting to the Board.

* If you are licensed as an LVN in the State of Texas and are currently participating in the Texas Peer Assistance Program for Nurses you may answer "NO" to questions #4 and #5.

Rule 217.11

The Texas Board of Nursing is responsible for regulating the practice of nursing within the State of Texas for Vocational Nurses, Registered Nurses, and Registered Nurses with advanced practice authorization. The standards of practice establish a minimum acceptable level of nursing practice in any setting for each level of nursing licensure or advanced practice authorization. Failure to meet these standards may result in action against the nurse's license even if no actual patient injury resulted.

- (1) Standards Applicable to All Nurses. All vocational nurses, registered nurses and registered nurses with advanced practice authorization shall:
 - (A) Know and conform to the Texas Nursing Practice Act and the board's rules and regulations as well as all federal, state, or local laws, rules or regulations affecting the nurse's current area of nursing practice;
 - (B) Implement measures to promote a safe environment for clients and others;
 - (C) Know the rationale for and the effects of medications and treatments and shall correctly administer the same;
 - (D) Accurately and completely report and document:
 - (i) the client's status including signs and symptoms;

- (ii) nursing care rendered;
 - (iii) physician, dentist or podiatrist orders;
 - (iv) administration of medications and treatments;
 - (v) client response(s); and
 - (vi) contacts with other health care team members concerning significant events regarding client's status;
- (E) Respect the client's right to privacy by protecting confidential information unless required or allowed by law to disclose the information;
 - (F) Promote and participate in education and counseling to a client(s) and, where applicable, the family/significant other(s) based on health needs;
 - (G) Obtain instruction and supervision as necessary when implementing nursing procedures or practices;
 - (H) Make a reasonable effort to obtain orientation/training for competency when encountering new equipment and technology or unfamiliar care situations;
 - (I) Notify the appropriate supervisor when leaving a nursing assignment;
 - (J) Know, recognize, and maintain professional boundaries of the nurse-client relationship;
 - (K) Comply with mandatory reporting requirements of Texas Occupations Code Chapter 301 (Nursing Practice Act), Subchapter I, which include reporting a nurse:
 - (i) who violates the Nursing Practice Act or a board rule and contributed to the death or serious injury of a patient;
 - (ii) whose conduct causes a person to suspect that the nurse's practice is impaired by chemical dependency or drug or alcohol abuse;
 - (iii) whose actions constitute abuse, exploitation, fraud, or a violation of professional boundaries; or
 - (iv) whose actions indicate that the nurse lacks knowledge, skill, judgment, or conscientiousness to such an extent that the nurse's continued practice of nursing could reasonably be expected to pose a risk of harm to a patient or another person, regardless of whether the conduct consists of a single incident or a pattern of behavior.
 - (v) except for minor incidents (Texas Occupations Code §§301.401(2), 301.419, 22 TAC §217.16), peer review (Texas Occupations Code §§301.403, 303.007, 22 TAC §217.19), or peer assistance if no practice violation (Texas Occupations Code §301.410) as stated in the Nursing Practice Act and Board rules (22 TAC Chapter 217).
 - (L) Provide, without discrimination, nursing services regardless of the age, disability, economic status, gender, national origin, race, religion, health problems, or sexual orientation of the client served;
 - (M) Institute appropriate nursing interventions that might be required to stabilize a client's condition and/or prevent complications;
 - (N) Clarify any order or treatment regimen that the nurse has reason to believe is inaccurate, non-efficacious or contraindicated by consulting with the appropriate licensed practitioner and notifying the ordering practitioner when the nurse makes the decision not to administer the medication or treatment;
 - (O) Implement measures to prevent exposure to infectious pathogens and communicable conditions;
 - (P) Collaborate with the client, members of the health care team and, when appropriate, the client's significant other(s) in the interest of the client's health care;
 - (Q) Consult with, utilize, and make referrals to appropriate community agencies and health care resources to provide continuity of care;
 - (R) Be responsible for one's own continuing competence in nursing practice and individual professional growth;
 - (S) Make assignments to others that take into consideration client safety and that are

- commensurate with the educational preparation, experience, knowledge, and physical and emotional ability of the person to whom the assignments are made;
- (T) Accept only those nursing assignments that take into consideration client safety and that are commensurate with the nurse's educational preparation, experience, knowledge, and physical and emotional ability;
 - (U) Supervise nursing care provided by others for whom the nurse is professionally responsible; and
 - (V) Ensure the verification of current Texas licensure or other Compact State licensure privilege and credentials of personnel for whom the nurse is administratively responsible, when acting in the role of nurse administrator.
- (2) Standards Specific to Vocational Nurses. The licensed vocational nurse practice is a directed scope of nursing practice under the supervision of a registered nurse, advanced practice registered nurse, physician's assistant, physician, podiatrist, or dentist. Supervision is the process of directing, guiding, and influencing the outcome of an individual's performance of an activity. The licensed vocational nurse shall assist in the determination of predictable healthcare needs of clients within healthcare settings and:
- (A) Shall utilize a systematic approach to provide individualized, goal-directed nursing care by:
 - (i) collecting data and performing focused nursing assessments;
 - (ii) participating in the planning of nursing care needs for clients;
 - (iii) participating in the development and modification of the comprehensive nursing care plan for assigned clients;
 - (iv) implementing appropriate aspects of care within the LVN's scope of practice; and
 - (v) assisting in the evaluation of the client's responses to nursing interventions and the identification of client needs;
 - (B) Shall assign specific tasks, activities and functions to unlicensed personnel commensurate with the educational preparation, experience, knowledge, and physical and emotional ability of the person to whom the assignments are made and shall maintain appropriate supervision of unlicensed personnel.
 - (C) May perform other acts that require education and training as prescribed by board rules and policies, commensurate with the licensed vocational nurses experience, continuing education, and demonstrated licensed vocational nurse competencies.
- (3) Standards Specific to Registered Nurses. The registered nurse shall assist in the determination of healthcare needs of clients and shall:
- (A) Utilize a systematic approach to provide individualized, goal-directed, nursing care by:
 - (i) performing comprehensive nursing assessments regarding the health status of the client;
 - (ii) making nursing diagnoses that serve as the basis for the strategy of care;
 - (iii) developing a plan of care based on the assessment and nursing diagnosis;
 - (iv) implementing nursing care; and
 - (v) evaluating the client's responses to nursing interventions;
 - (B) Delegate tasks to unlicensed personnel in compliance with Chapter 224 of this title, relating to clients with acute conditions or in acute care environments, and Chapter 225 of this title, relating to independent living environments for clients with stable and predictable conditions.
- (4) Standards Specific to Registered Nurses with Advanced Practice Authorization. Standards for a specific role and specialty of advanced practice nurse supersede standards for registered nurses where conflict between the standards, if any, exist. In addition to paragraphs (1) and (3) of this subsection, a registered nurse who holds authorization to practice as an advanced practice nurse (APN) shall:
- (A) Practice in an advanced nursing practice role and specialty in accordance with authorization granted under Board Rule Chapter 221 of this title (relating to

practicing in an APN role; 22 TAC Chapter 221) and standards set out in that chapter.

- (B) Prescribe medications in accordance with prescriptive authority granted under Board Rule Chapter 222 of this title (relating to APNs prescribing; 22 TAC Chapter 222) and standards set out in that chapter and in compliance with state and federal laws and regulations relating to prescription of dangerous drugs and controlled substances.

217.12

The unprofessional conduct rules are intended to protect clients and the public from incompetent, unethical, or illegal conduct of licensees. The purpose of these rules is to identify unprofessional or dishonorable behaviors of a nurse which the board believes are likely to deceive, defraud, or injure clients or the public. Actual injury to a client need not be established. These behaviors include but are not limited to: (1)

Unsafe Practice--actions or conduct including, but not limited to:

- (A) Carelessly failing, repeatedly failing, or exhibiting an inability to perform vocational, registered, or advanced practice nursing in conformity with the standards of minimum acceptable level of nursing practice set out in Rule 217.11.
- (B) Carelessly or repeatedly failing to conform to generally accepted nursing standards in applicable practice settings;
- (C) Improper management of client records;
- (D) Delegating or assigning nursing functions or a prescribed health function when the delegation or assignment could reasonably be expected to result in unsafe or ineffective client care;
- (E) Accepting the assignment of nursing functions or a prescribed health function when the acceptance of the assignment could be reasonably expected to result in unsafe or ineffective client care;
- (F) Failing to supervise the performance of tasks by any individual working pursuant to the nurse's delegation or assignment; or
- (G) Failure of a clinical nursing instructor to adequately supervise or to assure adequate supervision of student experiences.
- (2) Failure of a chief administrative nurse to follow appropriate and recognized standards and guidelines in providing oversight of the nursing organization and nursing services for which the nurse is administratively responsible.
- (3) Failure to practice within a modified scope of practice or with the required accommodations, as specified by the board in granting a coded license or any stipulated agreement with the board.
- (4) Careless or repetitive conduct that may endanger a client's life, health, or safety. Actual injury to a client need not be established.
- (5) Inability to Practice Safely--demonstration of actual or potential inability to practice nursing with reasonable skill and safety to clients by reason of illness, use of alcohol, drugs, chemicals, or any other mood-altering substances, or as a result of any mental or physical condition.
- (6) Misconduct--actions or conduct that include, but are not limited to:
- (A) Falsifying reports, client documentation, agency records or other documents;
- (B) Failing to cooperate with a lawful investigation conducted by the board;
- (C) Causing or permitting physical, emotional or verbal abuse or injury or neglect to the client or the public, or failing to report same to the employer, appropriate legal authority and/or licensing board;
- (D) Violating professional boundaries of the nurse/client relationship including but not limited to physical, sexual, emotional or financial exploitation of the client or the client's significant other(s);
- (E) Engaging in sexual conduct with a client, touching a client in a sexual manner, requesting or offering sexual favors, or language or behavior suggestive of the same;

- (F) Threatening or violent behavior in the workplace;
- (G) Misappropriating, in connection with the practice of nursing, anything of value or benefit, including but not limited to, any property, real or personal of the client, employer, or any other person or entity, or failing to take precautions to prevent such misappropriation;
- (H) Providing information which was false, deceptive, or misleading in connection with the practice of nursing;
- (I) Failing to answer specific questions or providing false or misleading answers that would have affected the decision to license, employ, certify or otherwise utilize a nurse; or
- (J) Offering, giving, soliciting, or receiving or agreeing to receive, directly or indirectly, any fee or other consideration to or from a third party for the referral of a client in connection with the performance of professional services.
- (7) Failure to repay a guaranteed student loan, as provided in the Texas Education Code §57.491, or pay child support payments as required by the Texas Family Code §232.001, et seq.
- (8) Drug Diversion--diversion or attempts to divert drugs or controlled substances.
- (9) Dismissal from a board-approved peer assistance program for noncompliance and referral by that program to the BON.
- (10) Other Drug Related--actions or conduct that include, but are not limited to:
 - (A) Use of any controlled substance or any drug, prescribed or unprescribed, or device or alcoholic beverages while on duty or on call and to the extent that such use may impair the nurse's ability to safely conduct to the public the practice authorized by the nurse's license;
 - (B) Falsification of or making incorrect, inconsistent, or unintelligible entries in any agency, client, or other record pertaining to drugs or controlled substances;
 - (C) Failing to follow the policy and procedure in place for the wastage of medications at the facility where the nurse was employed or working at the time of the incident(s);
 - (D) A positive drug screen for which there is no lawful prescription; or
 - (E) Obtaining or attempting to obtain or deliver medication(s) through means of misrepresentation, fraud, forgery, deception and/or subterfuge.
- (11) Unlawful Practice--actions or conduct that include, but are not limited to:
 - (A) Knowingly aiding, assisting, advising, or allowing an unlicensed person to engage in the unlawful practice of vocational, registered or advanced practice nursing;
 - (B) Violating an order of the board, or carelessly or repetitively violating a state or federal law relating to the practice of vocational, registered or advanced practice nursing, or violating a state or federal narcotics or controlled substance law;
 - (C) Knowingly aiding, assisting, advising, or allowing a nurse under Board Order to violate the conditions set forth in the Order; or
 - (D) Failing to report violations of the Nursing Practice Act and/or the Board's rules and regulations.
- (12) Leaving a nursing assignment, including a supervisory assignment, without notifying the appropriate personnel.
- (13) Criminal Conduct--including, but not limited to, conviction or probation, with or without an adjudication of guilt, or receipt of a judicial order involving a crime or criminal behavior or conduct that could affect the practice of nursing.

Nursing Practice Act

Sec. 301.252. License Application.

- (a) Each applicant for a registered nurse license or a vocational nurse license must submit to the board a sworn application that demonstrates the applicant's qualifications under this chapter, accompanied by evidence that the applicant:
 - (1) has good professional character;
 - (2) has successfully completed a program of professional or vocational nursing education approved under Section 301.157(d); and
 - (3) has passed the jurisprudence examination approved by the board as provided by

Subsection (a-1).

(a-1) The jurisprudence examination shall be conducted on the licensing requirements under this chapter and board rules and other laws, rules, or regulations applicable to the nursing profession in this state. The board shall adopt rules for the jurisprudence examination under Subsection (a)(3) regarding:

- (1) the development of the examination;
 - (2) applicable fees;
 - (3) administration of the examination;
 - (4) reexamination procedures;
 - (5) grading procedures; and
 - (6) notice of results.
- (b) The board may waive the requirement of Subsection (a)(2) for a vocational nurse applicant if the applicant provides satisfactory sworn evidence that the applicant has completed an acceptable level of education in:
- (1) a professional nursing school approved under Section 301.157(d); or
 - (2) a school of professional nurse education located in another state or a foreign country.
- (c) The board by rule shall determine acceptable levels of education under Subsection (b).

[Amended by Acts 2007 (H.B. 2426), 80th Leg., eff. Sept. 1, 2007. The requirement to pass a jurisprudence examination, as amended by this Act, applies only to an individual who applies for a license as a nurse on or after September 1, 2008.]

Sec. 301.253. Examination.

- (a) Except as provided by Section 301.452, an applicant is entitled to take the examination prescribed by the Board if:
- (1) the Board determines that the applicant meets the qualifications required by Section 301.252; and
 - (2) the applicant pays the fees required by the Board.
- (b) Each examination administered under this section must be prepared by a national testing service or the board. The board shall ensure that the examination is administered in various cities throughout the state.
- (c) The examination shall be designed to determine the fitness of the applicant to practice professional nursing or vocational nursing.
- (c-1) The board shall:
- (1) adopt policies and guidelines detailing the procedures for the testing process, including test admission, test administration, and national examination requirements; and
 - (2) post on the board's Internet website the policies that reference the testing procedures by the national organization selected by the board to administer an examination.
- (d) The Board shall determine the criteria that determine a passing score on the examination. The criteria may not exceed those required by the majority of the states.
- (e) A written examination prepared, approved, or offered by the Board, including a standardized national examination, must be validated by an independent testing professional.
- (f) The board shall develop a written refund policy regarding examination fees that:
- (1) defines the reasonable notification period and the emergencies that would qualify for a refund; and
 - (2) does not conflict with any examination fee or refund policy of the testing service involved in administering the examination.
- (g) The board may recommend to a national testing service selected by the board to offer examinations under this section the board's written policy for refunding an examination fee for an applicant who:
- (1) provides advance notice of the applicant's inability to take the examination; or

(2) is unable to take the examination because of an emergency.
 [Amended by Acts 2007 (H.B. 2426), 80th Leg., eff. Sept. 1, 2007]

Sec. 301.257. Declaratory Order of License Eligibility.

- (a) A person may petition the board for a declaratory order as to the person's eligibility for a license under this chapter if the person:
- (1) is enrolled or planning to enroll in an educational program that prepares a person for an initial license as a registered nurse or vocational nurse; and
 - (2) has reason to believe that the person is ineligible for the license.
- (b) The petition must state the basis for the person's potential ineligibility.
- (c) The Board has the same powers to investigate the petition and the person's eligibility that it has to investigate a person applying for a license.
- (d) The petitioner or the Board may amend the petition to include additional grounds for potential ineligibility at any time before a final determination is made.
- (e) If the Board determines that a ground for ineligibility does not exist, instead of issuing an order, the Board shall notify the petitioner in writing of the Board's determination on each ground of potential ineligibility. If the Board proposes to find that the petitioner is ineligible for a license, the petitioner is entitled to a hearing before the State Office of Administrative Hearings.
- (f) The Board's order must set out each basis for potential ineligibility and the Board's determination as to eligibility. In the absence of new evidence known to but not disclosed by the petitioner or not reasonably available to the Board at the time the order is issued, the Board's ruling on the petition determines the person's eligibility with respect to the grounds for potential ineligibility set out in the written notice or order.
- (g) The Board may require an individual accepted for enrollment or enrolled in an educational program preparing a student for initial licensure as a registered nurse or vocational nurse to submit information to the Board to permit the Board to determine whether the person is aware of the conditions that may disqualify the person from licensure as a registered nurse or vocational nurse on graduation and of the person's right to petition the Board for a declaratory order under this section. Instead of requiring the person to submit the information, the Board may require the educational program to collect and submit the information on each person accepted for enrollment or enrolled in the program.
- (h) The information required under Subsection (g) must be submitted in a form approved by the Board.
- (i) If, as a result of information provided under Subsection (g), the Board determines that a person may not be eligible for a license on graduation, the Board shall notify the educational program of its determination.

Sec. 301.452. Grounds for Disciplinary Action.

- (a) In this section, "intemperate use" includes practicing nursing or being on duty or on call while under the influence of alcohol or drugs.
- (b) A person is subject to denial of a license or to disciplinary action under this subchapter for:
- (1) a violation of this chapter, a rule or regulation not inconsistent with this chapter, or an order issued under this chapter;
 - (2) fraud or deceit in procuring or attempting to procure a license to practice professional nursing or vocational nursing;
 - (3) a conviction for, or placement on deferred adjudication community supervision or deferred disposition for, a felony or for a misdemeanor involving moral turpitude;
 - (4) conduct that results in the revocation of probation imposed because of conviction for a felony or for a misdemeanor involving moral turpitude;
 - (5) use of a nursing license, diploma, or permit, or the transcript of such a document,

that has been fraudulently purchased, issued, counterfeited, or materially altered;

- (6) impersonating or acting as a proxy for another person in the licensing examination required under Section 301.253 or 301.255;
 - (7) directly or indirectly aiding or abetting an unlicensed person in connection with the unauthorized practice of nursing;
 - (8) revocation, suspension, or denial of, or any other action relating to, the person's license or privilege to practice nursing in another jurisdiction;
 - (9) intemperate use of alcohol or drugs that the Board determines endangers or could endanger a patient;
 - (10) unprofessional or dishonorable conduct that, in the board's opinion, is likely to deceive, defraud, or injure a patient or the public;
 - (11) adjudication of mental incompetency;
 - (12) lack of fitness to practice because of a mental or physical health condition that could result in injury to a patient or the public; or
 - (13) failure to care adequately for a patient or to conform to the minimum standards of acceptable nursing practice in a manner that, in the Board's opinion, exposes a patient or other person unnecessarily to risk of harm.
- (c) The Board may refuse to admit a person to a licensing examination for a ground described under Subsection (b).
- (d) The board by rule shall establish guidelines to ensure that any arrest information, in particular information on arrests in which criminal action was not proven or charges were not filed or adjudicated, that is received by the board under this section is used consistently, fairly, and only to the extent the underlying conduct relates to the practice of nursing.

[Amended by Acts 2007 (H.B. 2426), 80th Leg., eff. Sept. 1, 2007]

Sec. 301.453. Disciplinary Authority of Board; Methods of Discipline.

- (a) If the Board determines that a person has committed an act listed in Section 301.452(b), the Board shall enter an order imposing one or more of the following:
- (1) denial of the person's application for a license, license renewal, or temporary permit;
 - (2) issuance of a written warning;
 - (3) administration of a public reprimand;
 - (4) limitation or restriction of the person's license, including:
 - (A) limiting to or excluding from the person's practice one or more specified activities of nursing; or
 - (B) stipulating periodic board review;
 - (5) suspension of the person's license for a period not to exceed five years;
 - (6) revocation of the person's license; or
 - (7) assessment of a fine.
- (b) In addition to or instead of an action under Subsection (a), the Board, by order, may require the person to:
- (1) submit to care, counseling, or treatment by a health provider designated by the Board as a condition for the issuance or renewal of a license;
 - (2) participate in a program of education or counseling prescribed by the Board;
 - (3) practice for a specified period under the direction of a registered nurse or vocational nurse designated by the Board; or
 - (4) perform public service the Board considers appropriate.
- (c) The Board may probate any penalty imposed on a nurse and may accept the voluntary surrender of a license. The Board may not reinstate a surrendered license unless it determines that the person is competent to resume practice.
- (d) If the Board suspends, revokes, or accepts surrender of a license, the Board may impose conditions for reinstatement that the person must satisfy before the Board may issue an unrestricted license.

Sec. 301.4531. Schedule of Sanctions.

- (a) The board by rule shall adopt a schedule of the disciplinary sanctions that the board may impose under this chapter. In adopting the schedule of sanctions, the board shall ensure that the severity of the sanction imposed is appropriate to the type of violation or conduct that is the basis for disciplinary action.
- (b) In determining the appropriate disciplinary action, including the amount of any administrative penalty to assess, the board shall consider:
 - (1) whether the person:
 - (A) is being disciplined for multiple violations of either this chapter or a rule or order adopted under this chapter; or
 - (B) has previously been the subject of disciplinary action by the board and has previously complied with board rules and this chapter;
 - (2) the seriousness of the violation;
 - (3) the threat to public safety; and
 - (4) any mitigating factors.
- (c) In the case of a person described by:
 - (1) Subsection (b)(1)(A), the board shall consider taking a more severe disciplinary action, including revocation of the person's license, than the disciplinary action that would be taken for a single violation; and
 - (2) Subsection (b)(1)(B), the board shall consider taking a more severe disciplinary action, including revocation of the person's license, than the disciplinary action that would be taken for a person who has not previously been the subject of disciplinary action by the board.

[Added by Acts 2007 (H.B. 2426), 80th Leg., eff. Sept. 1, 2007]

Sec. 301.4535. Required Suspension, Revocation, or Refusal of License for Certain Offenses.

- (a) The board shall suspend a nurse's license or refuse to issue a license to an applicant on proof that the nurse or applicant has been initially convicted of:
 - (1) murder under Section 19.02, Penal Code, capital murder under Section 19.03, Penal Code, or manslaughter under Section 19.04, Penal Code;
 - (2) kidnapping or unlawful restraint under Chapter 20, Penal Code, and the offense was punished as a felony or state jail felony;
 - (3) sexual assault under Section 22.011, Penal Code;
 - (4) aggravated sexual assault under Section 22.021, Penal Code;
 - (5) continuous sexual abuse of young child or children under Section 21.02, Penal Code, or indecency with a child under Section 21.11, Penal Code;
 - (6) aggravated assault under Section 22.02, Penal Code;
 - (7) intentionally, knowingly, or recklessly injuring a child, elderly individual, or disabled individual under Section 22.04, Penal Code;
 - (8) intentionally, knowingly, or recklessly abandoning or endangering a child under Section 22.041, Penal Code;
 - (9) aiding suicide under Section 22.08, Penal Code, and the offense was punished as a state jail felony;
 - (10) an offense under Section 25.07, Penal Code, punished as a felony;
 - (11) an offense under Section 25.071, Penal Code, punished as a felony;
 - (12) an agreement to abduct a child from custody under Section 25.031, Penal Code;
 - (13) the sale or purchase of a child under Section 25.08, Penal Code;
 - (14) robbery under Section 29.02, Penal Code;
 - (15) aggravated robbery under Section 29.03, Penal Code;
 - (16) an offense for which a defendant is required to register as a sex offender under Chapter 62, Code of Criminal Procedure; or
 - (17) an offense under the law of another state, federal law, or the Uniform Code of Military Justice that contains elements that are substantially similar to the elements of an offense listed in this subsection.
- (b) On final conviction or a plea of guilty or nolo contendere for an offense listed in Subsection (a), the board, as appropriate, may not issue a license to an

applicant, shall refuse to renew a license, or shall revoke a license if the applicant or license holder did not previously disclose the conviction or plea and the fifth anniversary of the date the person successfully completed community supervision or parole has not occurred.

- (c) A person is not eligible for an initial license or for reinstatement or endorsement of a license to practice nursing in this state before the fifth anniversary of the date the person successfully completed and was dismissed from community supervision or parole for an offense described by Subsection (a).

[NOTE: Section 301.4535, Occupations Code, applies only to a person who is initially convicted of an offense or placed on deferred adjudication after a plea of guilty or nolo contendere for an offense on or after September 1, 2005. A person initially convicted of an offense or placed on deferred adjudication before that date is governed by the law in effect on the date the conviction or plea occurred, and the former law is continued in effect for that purpose. Section (a)(5) amended by Acts 2007 (H.B. 8), 80th Leg., eff. Sept. 1, 2007]

Sec. 301.454. Notice and Hearing.

- (a) Except in the case of a temporary suspension authorized under Section 301.455 or an action taken in accordance with an agreement between the board and a license holder, the Board may not initiate a disciplinary action relating to a license unless:
- (1) the Board has served notice to the license holder of the facts or conduct alleged to warrant the intended action; and
 - (2) the license holder has been given an opportunity, in writing or through an informal meeting, to show compliance with all requirements of law for the retention of the license.
- (b) If an informal meeting is held, a board member, staff member, or board representative who attends the meeting is considered to have participated in the hearing of the case for the purposes of ex parte communications under Section 2001.061, Government Code.
- (c) A person is entitled to a hearing conducted by the State Office of Administrative Hearings if the Board proposes to:
- (1) refuse to admit the person to examination;
 - (2) refuse to issue a license or temporary permit;
 - (3) refuse to renew a license; or
 - (4) suspend or revoke the person's license or permit.
- (d) The State Office of Administrative Hearings shall use the schedule of sanctions adopted by the Board for any sanction imposed as the result of a hearing conducted by that office.
- (e) Notwithstanding Subsection (a), a person is not entitled to a hearing on a refusal to renew a license if the person:
- (1) fails to submit a renewal application; or
 - (2) submits an application that:
 - (A) is incomplete;
 - (B) shows on its face that the person does not meet the renewal requirements; or
 - (C) is not accompanied by the correct fee.

Sec. 301.455. Temporary License Suspension or Restriction.

- (a) The license of a nurse shall be temporarily suspended or restricted on a determination by a majority of the Board or a three-member committee of board members designated by the board that, from the evidence or information presented, the continued practice of the nurse would constitute a continuing and imminent threat to the public welfare.
- (b) A license may be temporarily suspended or restricted under this section without notice or hearing on the complaint if:
- (1) institution of proceedings for a hearing before the State Office of Administrative Hearings is initiated simultaneously with the temporary suspension or

- determination to restrict; and
- (2) a hearing is held as soon as possible under this chapter and Chapter 2001, Government Code.
 - (c) The State Office of Administrative Hearings shall hold a preliminary hearing not later than the 14th day after the date of the temporary suspension or restriction to determine whether probable cause exists that a continuing and imminent threat to the public welfare exists. The probable cause hearing shall be conducted as a de novo hearing.
 - (d) A final hearing on the matter shall be held not later than the 61st day after the date of the temporary suspension or restriction.

Sec. 301.456. Evidence.

A certified copy of the order of the denial, suspension, or revocation or other action under Section 301.452(b)(8) is conclusive evidence of that action.

Sec. 301.457. Complaint and Investigation.

- (a) The Board or any person may initiate a proceeding under this subchapter by filing with the Board a complaint against a nurse. The complaint must be in writing and signed by the complainant.
- (b) Except as otherwise provided by this section, the Board or a person authorized by the board shall conduct each investigation. Each complaint against a nurse that requires a determination of nursing competency shall be reviewed by a board member, consultant, or employee with a nursing background the Board considers sufficient.
- (c) On the filing of a complaint, the board:
 - (1) may conduct a preliminary investigation into the identity of the nurse named or described in the complaint;
 - (2) shall make a timely and appropriate preliminary investigation of the complaint; and
 - (3) may issue a warning or reprimand to the nurse.
- (d) After any preliminary investigation to determine the identity of the subject of the complaint, unless it would jeopardize an investigation, the Board shall notify the nurse that a complaint has been filed and the nature of the complaint. If the investigation reveals probable cause to take further disciplinary action, the Board shall either attempt an informal disposition of the complaint or file a formal charge against the nurse stating the provision of this chapter or board rule that is alleged to have been violated and a brief description of each act or omission that constitutes the violation.
- (e) The Board shall conduct an investigation of the complaint to determine:
 - (1) whether the nurse's continued practice of nursing poses a risk of harm to clients or other persons; and
 - (2) whether probable cause exists that a nurse committed an act listed in Section 301.452(b) or that violates other law.
- (f) In making a determination under Subsection (e), the board shall review the evidence to determine the extent to which a deficiency in care by the registered nurse was the result of deficiencies in the registered nurse's judgment, knowledge, training, or skill rather than other factors beyond the nurse's control. A determination that a deficiency in care is attributable to a registered nurse must be based on the extent to which the registered nurse's conduct was the result of a deficiency in the registered nurse's judgment, knowledge, training, or skill.
- (g) If the board determines after investigating a complaint under Subsection (e) that there is reason to believe that a nurse's deficiency in care was the result of a factor beyond the nurse's control, the board shall report that determination to the patient safety committee at the facility where the nurse's deficiency in care occurred, or if the facility does not have a patient safety committee, to the chief nursing officer.

[Subsection (g) added by Acts 2007 (S.B. 993), 80th Leg., eff. Sept. 1, 2007]

Sec. 301.458. Initiation of Formal Charges; Discovery.

- (a) Unless there is an agreed disposition of the complaint under Section 301.463, and if probable cause is found under Section 301.457(e)(2), the Board or the Board's Authorized Representative shall initiate proceedings by filing formal charges against the nurse.
- (b) A formal charge must:
 - (1) be written;
 - (2) be specific enough to enable a person of common understanding to know what is meant by the formal charge; and
 - (3) contain a degree of certainty that gives the person who is the subject of the formal charge notice of each particular act alleged to violate a specific statute, board rule, or board order.
- (c) A copy of the formal charge shall be served on the nurse or the nurse's counsel of record.
- (d) The Board shall adopt reasonable rules to promote discovery by each party to a contested case.

Sec. 301.459. Formal Hearing.

- (a) The Board by rule shall adopt procedures under Chapter 2001, Government Code, governing formal disposition of a contested case. The State Office of Administrative Hearings shall conduct a formal hearing.
- (b) In any hearing under this section, a nurse is entitled to appear in person or by counsel.

Sec. 301.460. Access to Information.

- (a) Except for good cause shown for delay and subject to any other privilege or restriction set forth by statute, rule, or legal precedent, the Board shall, not later than the 30th day after the date the board receives a written request from a license holder who is the subject of a formal charge filed under Section 301.458 or from the license holder's counsel of record, provide the license holder with access to:
 - (1) all known exculpatory information in the Board's possession; and
 - (2) information in the Board's possession that the board intends to offer into evidence in presenting its case in chief at the contested hearing on the complaint.
- (b) The Board is not required to provide:
 - (1) Board investigative reports or investigative memoranda;
 - (2) the identity of non-testifying complainants;
 - (3) attorney-client communications;
 - (4) attorney work product; or
 - (5) other materials covered by a privilege as recognized by the Texas Rules of Civil Procedure or the Texas Rules of Evidence.
- (c) The provision of information under Subsection (a) does not constitute a waiver of privilege or confidentiality under this chapter or other applicable law.

Sec. 301.461. Assessment of Costs.

The Board may assess a person who is found to have violated this chapter the administrative costs of conducting a hearing to determine the violation.

Sec. 301.462. Voluntary Surrender of License.

The Board may revoke a nurse's license without formal charges, notice, or opportunity of hearing if the nurse voluntarily surrenders the nurse's license to the Board and executes a sworn statement that the nurse does not desire to be licensed.

Sec. 301.463. Agreed Disposition.

- (a) Unless precluded by this chapter or other law, the Board may dispose of a complaint by:
 - (1) stipulation;

- (2) agreed settlement;
- (3) agreed order; or
- (4) dismissal.
- (b) An agreed disposition of a complaint is considered to be a disciplinary order for purposes of reporting under this chapter and an administrative hearing and proceeding by a state or federal regulatory agency regarding the practice of nursing.
- (c) An agreed order is a public record.
- (d) In civil or criminal litigation an agreed disposition is a settlement agreement under Rule 408, Texas Rules of Evidence.

Sec. 301.464. Informal Proceedings.

- (a) The Board by rule shall adopt procedures governing:
 - (1) informal disposition of a contested case under Section 2001.056, Government Code; and
 - (2) an informal proceeding held in compliance with Section 2001.054, Government Code.
- (b) Rules adopted under this section must:
 - (1) provide the complainant and the license holder an opportunity to be heard; and
 - (2) require the presence of a representative of the Board's legal staff or of the Attorney General to advise the Board or the Board's employees.

Sec. 301.465. Subpoenas; Request for Information.

- (a) The Board may request issuance of a subpoena to be served in any manner authorized by law, including personal service by a board investigator and service by certified mail.
- (b) Each person shall respond promptly and fully to a request for information by the board or to a subpoena issued by the Board. A request or subpoena may not be refused, denied, or resisted unless the request or subpoena calls for information within the attorney-client privilege. No other privilege applies to a board proceeding.
- (c) The Board may pay a reasonable fee for photocopies subpoenaed at the Board's request. The amount paid may not exceed the amount the Board charges for copies of its records.
- (d) The Board shall protect, to the extent possible, the identity of each patient named in information received by the Board.

Sec. 301.466. Confidentiality.

- (a) A complaint and investigation concerning a nurse under this subchapter and all information and material compiled by the board in connection with the complaint and investigation are:
 - (1) confidential and not subject to disclosure under Chapter 552, Government Code; and
 - (2) not subject to disclosure, discovery, subpoena, or other means of legal compulsion for release to anyone other than the Board or a board employee or agent involved in license holder discipline.
- (b) Notwithstanding Subsection (a), information regarding a complaint and an investigation may be disclosed to:
 - (1) a person involved with the Board in a disciplinary action against the nurse;
 - (2) a nursing licensing or disciplinary board in another jurisdiction;
 - (3) a peer assistance program approved by the Board under Chapter 467, Health and Safety Code;
 - (4) a law enforcement agency; or
 - (5) a person engaged in bona fide research, if all information identifying a specific individual has been deleted.
- (c) The filing of formal charges against a nurse by the Board, the nature of those charges, disciplinary proceedings of the board, and final disciplinary actions, including warnings and reprimands, by the Board are not confidential and are

subject to disclosure in accordance with Chapter 552, Government Code.

Sec. 301.467. Reinstatement.

- (a) On application, the Board may reinstate a license to practice nursing to a person whose license has been revoked, suspended, or surrendered.
- (b) An application to reinstate a revoked license:
 - (1) may not be made before the first anniversary of the date of the revocation; and
 - (2) must be made in the manner and form the Board requires.
- (c) If the Board denies an application for reinstatement, it may set a reasonable waiting period before the applicant may reapply for reinstatement.

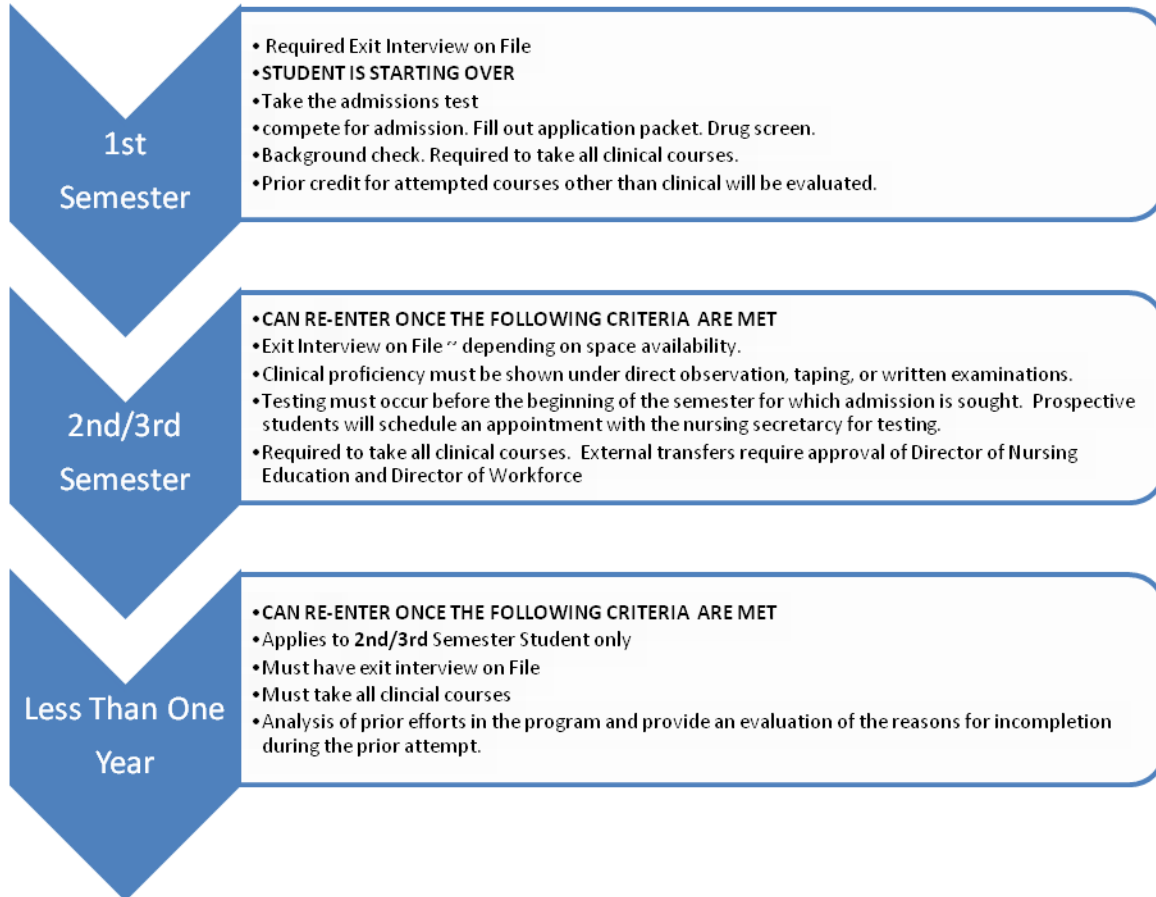
Sec. 301.468. Probation.

- (a) The Board may determine that an order denying a license application or suspending a license be probated. A person subject to a probation order shall conform to each condition the Board sets as the terms of probation, including a condition:
 - (1) limiting the practice of the person to, or excluding, one or more specified activities of professional nursing or vocational nursing; or
 - (2) requiring the person to submit to supervision, care, counseling, or treatment by a practitioner designated by the Board.
- (b) At the time the probation is granted, the Board shall establish the term of the probationary period.
- (c) At any time while the person remains subject to the probation order, the Board may hold a hearing and rescind the probation and enforce the Board's original action in denying or suspending the license. The hearing shall be called by the presiding officer of the Board, who shall issue a notice to be served on the person or the person's counsel not later than the 20th day before the date scheduled for the hearing that:
 - (1) sets the time and place for the hearing; and
 - (2) contains the charges or complaints against the probationer.
- (d) Notice under Subsection (c) is sufficient if sent by registered or certified mail to the affected person at the person's most recent address as shown in the Board's records.

Sec. 301.469. Notice of Final Action.

If the Board takes a final disciplinary action, including a warning or reprimand, against a nurse under this subchapter, the Board shall immediately send a copy of the Board's final order to the nurse and to the last known employer of the nurse.

SUMMARY OF RE- ENTRY TRANSFER OPTIONS



- **All re entries/** and transfers are contingent upon space availability, skills competency, clear background checks, negative drug screens.
- Only **ONE** re-admission in to the program will be allowed
- Failure in the First Semester- **STUDENT MUST START OVER**
- Less than one year since withdraw applies to **2nd/3rd** Semester Students **ONLY**
- All transfer students must meet approval from DON and Director of Workforce
- **EXIT INTERVIEW MUST BE ON FILE**
- All clinical courses must be repeated.
- The curriculum at the time of re entry/transfer will apply. The amount of credit for prior courses will be determined by the current curriculum.
- Students who have exhausted their re entry options, must enter the program from the first semester. These students are subject to admission procedures required of all students wishing to enter the program. This includes the admissions examination, application and fee, physical examination, background check and drug screen. Transcripts will be evaluated for credit on an individual basis.