



2101 Waterview Pkwy. • Richardson, TX 75080 • Phone: 469-941-8300 • Fax: 214-575-9090

**Associate of Applied  
Science – Nursing Degree  
Student Handbook**

**AY 2023-2025**



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*Welcome from the Dean of Nursing*

Dear Future Nurse,

On behalf of the faculty, staff and students, I extend a warm welcome! We are honored that you have chosen our School of Nursing to begin your journey to become a registered nurse. Nursing is a rewarding profession that enables you to be part of a team of expert caregivers that support the best outcomes for patients and their families. As a nurse you have the opportunity to care and advocate for people when they are at their most vulnerable. To be a nurse is to be part of a profession whose principles of patient care as defined by Florence Nightingale remain relevant today. You will be part of a profession respected by the public. On yearly national surveys, the public always votes nurses as the “most trusted professionals.”

We have an outstanding group of faculty with resumes that reflect their outstanding knowledge and experience in both didactic and clinical education. They are dedicated to your success, producing undergraduates who are prepared to meet the healthcare needs of our community.

The entire faculty and staff at the College of Nursing are here to help you but be sure to let me know if I can personally assist you in any way.

Congratulations, you are on your way!

Sincerely,

*Dr. Tonya Sawyer-McGee*

*Dean of Nursing, DNP, MBA, MSN, BSN, RN, ACNP*

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## **Associate Degree Nursing Handbook**

### **COLLEGE OF NURSING Mission Statement**

The mission of the College of Nursing (CON) is to advance the art and science of nursing through academic excellence by integrating the knowledge, skills, values, and attitudes essential for entry-level and practicing nurses.

In accordance with this mission, the school is committed to the following institutional objectives:

- Educate a diverse population of students for professional nursing practice in a variety of settings to meet the needs of the local community and society as a whole.
- Graduate students with an educational foundation that will promote cultural competence, ethical sensitivity, leadership, and lifelong learning.
- Prepare for global improvement of health care through individual and collaborative efforts.
- Provide a mechanism for continuous program assessment, evaluation, and improvement.
- Establish, maintain, and encourage an environment of sound business and ethical standards.

### **Mission of the Associate Degree Nursing (ADN) Program**

TCS CON is dedicated to preparing graduates who function within the health care community as caring, competent registered nurses.

### **Philosophy of Nursing**

TCS CON believes nursing is a dynamic process in which the nurse and the client (individual, family, or community) work together to achieve Health Promotion, Disease Prevention, and Disease Management for the client across the life span. Nursing has a holistic view of the client based on physiologic, psychosocial, and spiritual principles.

Nurses use clinical judgment, communication, and nursing skills to assist a diverse population of clients in meeting their needs and achieving optimal health. The registered nurse practices in four roles: Provider of Patient-Centered Care, Patient Safety Advocate, Member of the Team, and Member of the Profession. The nurse practices within an ethical/legal framework and embraces evidence-based practice.

The faculty of TCS CON believes that nursing is a dynamic profession that encompasses a global view of health for the individual from prevention through tertiary care within his cultural and spiritual beliefs.

### **Philosophy of Nursing Education**

TCS CON is committed to providing excellent nursing education to a diverse student population. Based on the belief that life-long learning is essential to continued competence, TCS CON strives to empower students to function independently and encourages critical thinking. Faculty members serve as facilitators and role models and expect students to function as adult learners.

The faculty of TCS CON embraces current and future technology as a tool to be used appropriately for the enhanced learning experience of the individual student.

## **Graduate Outcomes**

The graduates of the CON will be able to:

- Take the National Council Licensure Examination for Registered Nurses (NCLEX-RN). (Member of the Profession)
- Utilize critical thinking to apply a systematic approach using evidenced-based data in the delivery of competent, culturally sensitive, and developmentally appropriate holistic care. (Provider of Patient-Centered Care)
- Use analytical, logical reasoning for clinical judgment and nursing decision-making. (Provider of Patient-Centered Care)
- Assume accountability and responsibility for the quality of nursing care, upholding legal and ethical standards, participating in lifelong learning and professional development, and promoting the nursing profession while participating as a citizen in society. (Member of the Profession, Member of the Team)
- Collaborate effectively with individuals and groups using oral, written, non-verbal, and electronic communication to enhance the therapeutic process and to maintain collegial professional relationships. (Member of the Profession, Member of the Team)
- Coordinate human and material resources in providing comprehensive, efficient, and cost-effective care to persons/ clients. (Provider of Patient-Centered Care, Patient Safety Advocate)

## **Equal Opportunity and Non-Discrimination Policy Statement**

The CON does not discriminate in admission or access to our programs on the basis of age, race, color, religion, sex, disability, sexual orientation, or national origin. If you would like to request academic adjustment or auxiliary aids, please contact the school's Student Services Coordinator. You may request academic adjustments or auxiliary aids at any time. The school's Student Services Coordinator, working with the Corporate Director of Human Resources & Compliance, is responsible for coordinating compliance with Section 504 or the Rehabilitation Act of 1973 and Title III of the Americans with Disabilities Act of 1990.

## **CON's Advisory Board**

The Advisory Board for the CON is made up of health care professionals from the national healthcare community. The committee's purpose is to provide input into the curriculum and information about changing needs of the health care industry. Advisory board meetings are held to discuss school policies, clinical education sites, employment opportunities, and other common points of interest.

## **Orientation**

All students are required to attend a program orientation meeting prior to the beginning of classes. Students will be notified of the date when they are sent their acceptance letter. Students will receive pertinent information on school policies, schedules, class calendar, financial aid etc. At the discretion of the Dean, students re-entering the program after a hiatus may not need to attend the orientation.

## **Conduct Policy**

Students are expected to conduct themselves in a courteous and professional manner and adhere to the school policies. Generally, a student may be asked to leave a classroom if, in the opinion of faculty, the student's dress, manner, appearance or behavior distracts or interferes with the education process. Violation of school policies may result in disciplinary action up to and including dismissal from school. Specific examples of acceptable behavior are below:

1. Students will display respect for fellow students, faculty, and school staff members.
2. Students will not interfere with the learning progress of any other student(s).
3. Students will put forth a reasonable effort to learn and to bring their training to a successful conclusion within the scheduled training period.
4. Students will attend all scheduled classes and arrive 15 minutes prior to any scheduled clinical rotation with a valid reason for any time missed.
5. Students will not engage in conduct that brings unfavorable criticism or disrepute upon the school or fellow students.
6. Students will use all social media sites responsibly, understanding they have an ethical and legal obligation to maintain patient privacy and confidentiality at all times.
7. Students will adhere to the dress code at all times.
8. Students will refrain from abusive, vulgar, or profane language on school premises.
9. Students will not engage in cheating in any form.
10. Students will not bring alcohol, illegal drugs, or weapons of any kind onto school premises, or be under the influence of alcohol or illegal drugs while on school premises.
11. Students will not unlawfully possess, use, sell or distribute drugs or weapons of any kind onto school premises, or be under the influence of alcohol or illegal drugs while on school premises.
12. Students will not engage in gambling, fighting, soliciting, or distribution of literature of any kind on school premises.
13. Students will not remove any supplies, textbooks, equipment, or other school property from the premises without prior written permission from the Dean of Nursing.
14. Students will not misuse, vandalize, or otherwise damage any school property.
15. Students will return any borrowed library item by the due date and in good condition or pay to repair or replace the item.
16. Students will not eat or use tobacco products in classrooms, labs, or other non-designated areas.
17. Students will leave their classrooms and lab areas clean at the end of the class period.

18. Students will not bring visitors, including children to the school without prior permission from the Dean of Nursing.
19. Students will make all tuition payments as scheduled.
20. Students will inform the Dean in writing on any new offense or offenses committed after enrollment to CON and will attach copies of any warrants, court papers, or other pertinent legal documents to the narrative information provided regarding the occurrence. The student may be required to petition the Board of Nursing for a Declaratory Order and may also be terminated from the program depending upon the nature and severity of the offense.
21. Students will adhere to all school policies, including but not limited to the Policy on Sexual Misconduct.

The following conduct process is used to determine if a student or student organization engaged in behavior that violates the Code of Student Conduct.

### **Student Conduct Committee**

Any student suspected of violating the CON Student Conduct policy will be referred to the Student Affairs Committee (SAC) which is responsible for investigating the allegations. Referrals to the SAC can be made by any member of the CON community, including students, faculty, staff, and administration. A complaint from any member of the CON community relating to discrimination, misconduct, harassment, domestic violence, dating or other related violence, stalking, or retaliation based on gender or sex concerning a faculty, staff, or student(s) must report it in accordance with the [Policy on Sexual Misconduct](#).

A student who believes they have been subject to unlawful discrimination, harassment, or retaliation (other than related to sex/gender and/or sexual misconduct) whether by faculty members, employees, supervisors, visitors, or other students, should raise the matter per the guidance provided in the [Policy on Discrimination, Harassment, or Retaliation](#).

The SAC is the only committee that can refer a student to the Dean of Nursing for dismissal from CON.

Please refer to the academic catalog for specific information regarding the Student Conduct Committee Policies and Procedures.

**Dismissal from the Program *will* occur when:**

1. Student fails any two courses.
2. Student absences exceed ten percent of the course hours for any course.
3. Student does not meet financial responsibilities to the school.
4. Violation of any student conduct program or university academic integrity policies.

**Administrative Withdraw from the Program *may* occur if:**

Student fails to complete and pass the skills lab component, which will result in failure to complete the didactic/clinical component and may result in administrative withdraw from the program.

**Per the Nursing Practice Act of Texas, the following are reasons a student may be dismissed:**

1. Evidence of actual or potential harm to patients, clients, or the public.
2. Criminal behavior whether violent or non-violent directed against persons, property or public order of decency.
3. Intemperate use, abuse of drugs or alcohol, or diagnosis of or treatment for chemical dependency, mental illness or diminished mental capacity.
4. The lack of good professional character as evidenced by a single incident or an integrated pattern of personal, academic and/or occupational behaviors which, in the judgment of the Board, indicates that an individual is unable to consistently conform his or her conduct by the requirements of the Nursing Practice Act.

**Readmission Policy**

Students who did not complete the program but were previously admitted to the CON ADN program may apply for re-admission to the next available class. Please refer to the academic catalog for more information.

**Withdrawal Policy**

Students who wish to terminate their training for any reason are required to follow the procedure below:

1. Schedule a meeting with the Student Liaison and Student Services Coordinator to determine if the problem can be resolved without the student withdrawing.
2. Notify the chair in writing. The written notification should explain the reasons for wishing to terminate. Students will have the opportunity to meet with an appropriate staff member to determine if the problem can be resolved without termination.
3. Schedule a meeting with the Registrar to discuss the impact withdrawing would have on their ability to return and successfully complete the program.
4. Schedule an exit interview with a member of the Financial Aid staff. All student loan borrowers are required to complete an Exit Interview. This interview provides the student with valuable information related to the student's loan balance, repayment information, borrower rights and responsibilities, and lender information.
5. Complete a Status Change Form and submit to the Registrar's Office.
  - a. Students who are obligated for the full tuition at the time of withdrawal will receive a grade of "W" or "WF" based on their last date of attendance. Such a student may re-enter within 365 days following the date of their withdrawal and complete needed courses without a charge of tuition from their original enrollment rates and must meet the graduation requirements of the program revisions. A student who is granted an incomplete course status subsequent to his/her

withdrawal will not, after re-entering, incur a tuition price increase based on program and course availability. Federal Student Aid may not cover all unpaid institutional charges due to the institution if a student withdraws from school. This may result in a balance owed to the institution after the student has withdrawn. Students are encouraged to meet with Financial Aid staff prior to making the decision to leave school.

### **Articulation**

CON's curriculum is developed from THECB WECM & ACGM field of study suggestions. This allows students articulation opportunities.

### **Mobility Statement**

Career decisions and the selection to the program of study necessary to enter nursing are the responsibility of the individual and are based on career goals, abilities, and resources. The CON supports educational mobility which enables an individual to move from one educational program or institution to another with acknowledgment of acquired competencies and minimal repetition of previous learning. A student's prior learning and experience will be carefully evaluated by the Dean of Nursing should a student wish to transfer from one program to another within the college. Should the college open a branch campus, there will be mobility between the campuses.

### **Student Insurance**

The CON provides group liability insurance to cover students while conducting school activities. The premium is included in the total tuition. The CON requires all students to have their own personal medical insurance or be covered by their families' medical insurance while attending school. The CON does not assume financial responsibility for injuries due to student negligence.

### **Confidentiality**

The privacy rights of students, faculty, and patients are carefully guarded by the school. Students will be required to review (prior to attending clinical) Health Insurance Portability and Accountability Act (HIPAA) policies, which are specific to the various clinical sites. Students will be required to sign a confidentiality statement prior to beginning clinical rotations. See Appendix B "Clinical Confidentiality Agreement".

### **Indemnity Policy**

The CON is not responsible for, and will be held harmless for, damage to or loss of personal property, including clothing, jewelry, and other items that may be damaged by equipment, chemicals, etc. Property loss should be reported immediately to a school staff member, and the school will make every effort to assist the student to recover lost property. Found items should be given to a school staff member so the owner can be contacted.

The CON assumes no responsibility for missing supplies, equipment, book bags or computers belonging to students. The basic equipment and supplies specified by the school are the only ones required for training. Students are advised that the school carries no insurance to cover any personal items belonging to students.

### **Chain of Command Policy**

Issues are divided into academic and non-academic. The chain of command for an academic issue is:

- Student and Faculty meet. Documentation from both parties about the issue is required.
- If not resolved, the two parties will meet with the Student Liaison and Program Chair.
- If not resolved at this level, all parties will meet with the Dean or their representative whose decision is final.

For a non-academic issue:

- Discuss with the Student Services Coordinator/Director.
- Discuss with the Student Liaison/ Program Chair.
- If not resolved, discuss with the Dean of Nursing or their representative.
- The Dean of Nursing's decision is final.

### **Parking on Campus**

ADN students are required to park in designated student parking lot.

### **Attendance Policy**

The CON strongly discourages absence and tardiness for any reason. Student success is the primary goal of the CON. To be successful, it is necessary for students to be present. Therefore:

- Number of hours absent allowed for any reason will not exceed ten percent of the contact hours for each course. Any student exceeding ten percent will be dismissed from the program. A student has the right to appeal in writing to the Dean of Nursing.
- Doctor's appointments should be scheduled for early morning or late afternoon so as not to miss the entire class day. Routine doctor's appointments (annual physicals, checkups, etc.) should be set for scheduled school holidays.
- Personal business should not be scheduled during school hours. This should be taken care of during scheduled time off from school.
- Class notes, assignments, etc., missed during absence/tardiness is the student's responsibility and must be obtained from fellow classmates.
- It is the responsibility of the student to schedule make up time with the Faculty for any missed audiovisual and computer assignments. All course objectives, including missed tests, written assignments etc., must be completed in a timely manner in order to progress to the next semester. See the course syllabus for specific course policy.
- Missed tests must be made up during the week following the absence. Absence on a test day will result in the lowering of the test grade by ten points. It is the student's responsibility to contact faculty to schedule a time to take the missed test. If the test is not made up within 5 calendar days, the grade will be entered as a 0. Quizzes are not eligible for make-up.
- Skills lab procedures missed due to absence must be learned and satisfactorily demonstrated to lab faculty prior to performing those skills in the clinical setting. Lab faculty will provide documentation that authorizes the student to perform the skill in the clinical setting.

## **Vacations and Holidays**

Student should refer to TCSPP's academic calendar website for approved university holidays and breaks: <https://www.thechicagoschool.edu/wp-content/uploads/2021/03/DAL-XULA-Academic-Calendar-2020-2025.pdf>

## **Grading Policy**

The CON has adopted the following grading system and progression policy for undergraduate Nursing Students:

### **1. Classroom grade**

**A** = 93-100; **B** = 83-92; **C**=75-82; **F** = Below 75

Grades will be based on exams. Final grades after an exam may be available within 5-7 business days after faculty review or all students enrolled in the course have tested. In order to sit for an exam, students must present school ID badge. Exams are weighted equally. In order to pass a course successfully, the exam grade average must be at 75.0% at the end of the course. All grades will be disclosed in confidence between the student and Faculty or Program Chair. For the protection of student privacy grades will not be posted or given out over the telephone. Standardized testing will be used at intervals to aid both faculty and students in determining proficiency in identified areas. The CON has many learning resources to aid the student in improving his /her knowledge base in any specified area.

All ADN and ADN – LVN to RN Transition students must pass all courses in the program to be eligible for graduation. If unsuccessful in passing any course, students must repeat the entire course, if eligible according to course re-take or re-entry policies.

Failure of any clinical/didactic/skills lab component will result in a withdrawal status for the related didactic/clinical/skills lab component. The student will be required to retake that didactic component at the same time that they retake the related clinical/skills lab course even if a passing grade had been otherwise accomplished in the didactic.

Students with learning or physical disabilities must obtain a physician's statement confirming the disability and have it in their file before any accommodations can be made, such as extra time for test taking.

## **Make-Up Work**

Work eligible for make-up or late submission is limited to major tests, midterm or final exams, major projects, and skills checkoffs. Quizzes and other homework may not be made up. During the term, the student is responsible for initiating a request for make-up work due to absence. This must occur on the day the student returns from absence. All make-up work must be completed and submitted to the instructor within five business days of the granting of the make-up work request. All make-up work will be reduced one letter grade from the earned grade. At the end of the term, a student may be assigned an Incomplete as a temporary grade and be required to complete make-up work to earn a final grade. If make-up work is not completed within five business days, the student will earn a zero on the make-up work, and the course grade will be recalculated. In some circumstances, a student may be permitted to make up hours upon approval by the Dean of Nursing. No more than 5% of the total course time hours for program shall be made up.

*Make-up work shall:* · Be supervised by an instructor approved for the class being made up; · Require the student to demonstrate substantially the same level of knowledge or competence expected of a student who

attended the scheduled class session; · Be completed within 5 business days after returning from an absence; · Be documented by the School as being completed, recording the date, time, duration of the make-up session, and the name of the supervising instructor; and · Be signed and dated by the student to acknowledge the make-up session.

### **Reviewing Tests with Students**

1. Students must submit a request to their faculty to review the exam within 5 business days from the test date.
2. It is at the faculty's discretion if a group review is conducted. If so, the students will not be allowed to take any notes; are not to have any materials on their desk including papers, writing utensils, cell phones, laptops, recording devices or any other items to be determined by faculty; they can only read the exam, utilize their textbooks, and discuss questions with other students or the faculty.
3. Students receiving below a 75% on an exam are encouraged to review test individually with faculty.

## **2. Skills Lab**

Knowledge accrued in a nursing curriculum is circular. Each component of the curriculum is linked to the next, i.e. Classroom to Skills Labs to Virtual Hospital to Simulation lab to experience in the hospital clinical. Absence from any of these components threatens the student's ability to integrate the large body of knowledge needed to be successful in the program. Students will demonstrate proficiency in skills learned in the labs and be certified by Skills Lab Faculty as competent to perform the skill in the clinical setting. Failure to complete and pass the skills lab component will result in failure to complete the didactic/clinical component and will result in withdrawn from the program. The student is responsible for maintaining his/her skills checks documentation and must communicate with faculty whether or not she/he is prepared to perform the skill in the clinical setting. Skills lab attendance counts as clinical attendance.

## **3. Clinical Evaluation**

To satisfactorily complete each clinical rotation, students must meet each objective identified in the clinical evaluation tool. A grading scale will be provided to the student at the beginning of each semester. Grading criteria for written assignments in the course will be provided to the student at the beginning of each semester. Students must turn their BLS (Healthcare Provider) certification card to the [clinicalrecords@thechicagoschool.edu](mailto:clinicalrecords@thechicagoschool.edu) email address or designee per the Dean of Nursing's directive from the American Heart Association/Red Cross before starting clinicals. Day or evening shift (varies by facility) some weekend clinicals may be required. Clinical practice sessions for evening program students may be twelve-hour shifts during the weekend or evenings during the week. Break and Lunch schedules vary according to facility and faculty. All immunizations/vaccinations/CPR must be current to attend clinical or students will not be allowed to attend and receive a grade of zero for their grade and attendance, and no makeup is allowed.

## **4. Clinical Regulations**

All students will adhere to the following rules and regulations in the clinical setting. Individual facilities may have specific policies that will be discussed with the students during the facility orientation. Scheduled clinical sites may neither be changed nor exchanged with another student. General clinical experience guidelines are as follows:

1. No form of disrespect, sarcasm, arguing, explicit language, and loud and boisterous conduct with faculty or facility staff will be tolerated.
2. Students may not administer medications independently: to do so would be a violation of patient safety as dictated by regulations of the Board of Nursing and the Nurse Practice Act and will result in dismissal from the program.
3. Students must report *on* and *off* assigned area. Students may bring food or buy lunch on site.
4. Breaks will be given when activity on the unit permits and at the discretion of Faculty.
5. Facility orientation is a clinical day; therefore, students will wear the school uniform to all sessions with the school name embroidered on it and wear the CON identification tag.
6. Must stay in assigned area.
7. Students must contact faculty for further directions or re-assignment if the student has problems in assigned areas.
8. Students must contact faculty immediately if any issues occur at the facility.
9. Student's physical/immunizations/TB tests and CPR card must be current in order to attend any clinical rotation. Failure to do so can result in removal from the clinical rotation.
10. No gum chewing.

11. A student who is late from one to fifteen to the clinical site may only earn a maximum grade of 75% for that day. Late arrivals 0-15 minutes late will automatically receive a grade no higher than 75% for the day. Students more than 15 minutes late to clinical will be sent home for the day, marked as absent and will receive a zero for the day.

### **Student Immunizations**

The following is a listing of the screenings and immunizations required of ADN students during orientation and before entering the program, included but not limited to: Health screen; drug screen; TB skin test or QFT-Gold blood titer; HEB B vaccination (3) or titer; MMR vaccination (2) or titer; Varicella titer only (if student does not have immunity to chicken pox, they must obtain their own vaccination); and Tdap. Students should send updated clinical records to the following email address: [clinicalrecords@thechicagoschool.edu](mailto:clinicalrecords@thechicagoschool.edu) Students should allow approximately 7-21 business days for record updates to be done. It is also the student's responsibility to ensure that any needed updates are done and received by the deadline provided.

### **Infectious Disease Exposure Policy**

All students will receive instruction on safety and infection control before going into clinical areas. In addition, as a part of their course work:

All students will receive instruction in:

1. Infection control methods according to the hospital and OSHA standards.
2. The correct procedure for administering injections and performing other invasive procedures.
3. The appropriate use of personal protective equipment (PPE).

In the event of exposure to body fluids, including but not limited to needle sticks, a baseline HIV test and preventive medication will be paid for by the school. The student will be responsible for follow-up care that may include:

4. Taking the Hepatitis B vaccine (if the student has not already had the series).
5. Contacting the facility where the exposure occurred to obtain the source of exposure.
6. Obtaining a prescription for preventive medication if the source is HIV positive.
7. Obtaining HIBG if the source is positive for HBV antigen.
8. Obtaining Tetanus vaccine if not current.

For an exposure to an airborne disease such as TB or meningitis, the school will pay for the initial TB skin test and preventive medication. The student is responsible and must obtain the following services:

1. TB skin test six weeks following exposure to TB.
2. Follow-up care

For any other non-clinical incidents an incident report form will be completed within 24 hours of any incidents (i.e. injuries/needlesticks) that occur on campus or at assigned clinical sites.

### **Latex Allergies**

If a student has a known allergy to latex or develops an allergy to latex, the school will provide

non-latex gloves upon receipt of verification of positive latex allergy testing.

### **Communicable Diseases**

To provide the best possible care for the patient, as well as assure appropriate health safety for the students, the school must maintain an awareness of the student's health status. Any student who suspects that she/he may be infected with a contagious disease or may have a compromised immune system **MUST** immediately report this information to the school. Do not attend class if any of the following are present: temperature 100.4 or above within the last 24 hours, productive cough, drainage from open lesions, evidence of conjunctivitis, any diagnosed communicable disease, or persistent vomiting, or diarrhea. Students arriving at the clinical site with symptoms of an infection will be sent home. Any student who suspects that she/he may be infected with a contagious disease or may have a compromised immune system **MUST** immediately report this information to faculty. Students should not attend clinical if they suspect or know they carry infectious condition. A student may be asked to leave if illness is suspected, at the discretion of faculty and may be written up on a disciplinary warning. Testing for any of such diseases for verification for re-entry to school premises or clinicals will only be accepted by reputable lab companies/clinics. No over the counter results will be accepted for clinical re-scheduling purposes, etc. Time lost as a result of the previous paragraph will be deducted from the student's cumulative hours available for absences during the relevant quarter. If a student does not complete a clinical day, time lost and grade scoring will be affected based on length of participation.

### **Pregnancy or Other Health Related Conditions**

A student who is pregnant must submit a letter to the Clinical Coordinator or Dean/Dean designee from a qualified health care provider (i.e. nurse practitioner, primary care doctor, physician assistant treating the issue) permitting her to function in the clinical setting. Reasonable accommodations will be made for a pregnant student; however, she must meet all objectives of the program prior to graduation. Students with other health related conditions(s) that may cause a safety risk on campus when training need to provide a clearance letter prior to return to campus (if out for medical reasons) or to be allowed in didactic or clinical training on or off campus. Reasonable accommodations will be made on campus, but the CON can't guarantee accommodations at facilities not owned or managed by the university. Students who fail to provide medical release or restrictions will not be allowed to participate in clinical or other related training.

### **Alcohol and Drug Use**

The CON is committed to providing all students with a safe learning environment. Therefore, alcohol and/or drug use or influence is prohibited anywhere on the school campus or clinical premises. The use, possession, distribution, or sale of illegal or unauthorized drugs or inhalants on clinical/school property by students is prohibited, as is the use or possession of alcoholic beverages. Such activities will not be tolerated and offenses are subject to dismissal. If a student is known to be involved in substance abuse, he/she will be dismissed from the program. Random drug tests may be done at any time. Failure to pass the drug screening will result in immediate dismissal from the program. Students who are taking prescribed scheduled drugs can continue in the program with proof of a prescription and physician statement that student is fit to function as a licensed nurse.

A student, who tests positive for drugs, must do the following to be considered for re-enrollment in the ADN Program:

1. Show proof of three consecutive negative drug screens.

2. Each drug test spaced at 25 - 35 day intervals. Any screening not falling within these specified parameters will negate all previous tests.
3. Each drug screen will be done at your expense.
4. Have the testing center forward the results to the CON.

### **Smoking policy**

Smoking is prohibited on the CON campus. Students must comply with all facility and/or city regulations.

### **Student Concerns**

Students are encouraged to share any concerns regarding their academic or clinical performance with Faculty and Program Chair. Appointments may be made during office hours. Besides academic concerns, the student liaison, the Program Chair and the Student Support/Services Coordinator are available to discuss problems with students that may impact their performance in school. In keeping with the school's philosophy, the faculty and staff serve to facilitate the student's successful completion of the program. In some circumstances, advising will be initiated by the Faculty or Program Chair. Reasons for advising may include failing grades, poor clinical performance, and infraction of a school policy, irresponsible attendance, or inappropriate behavior. All academic and clinical performance advising will be documented in writing. Violation of school policies may result in verbal or written advising. Documented advising will include reason for advising, actions to be taken, and the time frame for agreed resolution. All parties involved will sign written forms to indicate they have read them and understand the proposed steps for resolution.

### **Appeal Process**

Any students wishing to appeal any action taken by school official should refer to the academic catalog for detailed information on the appeals process. Students need to submit a letter of appeal explaining mitigating circumstances, if they have been unsuccessful in (2) or more courses during their enrollment an appeal letter should be sent to the following email: [nursingprogramappeal@thechicagoschool.edu](mailto:nursingprogramappeal@thechicagoschool.edu) to be considered for re-entry. If only one course has been failed then a student should contact the student services coordinator for re-entry at [dalstudentsupport@thechicagoschool.edu](mailto:dalstudentsupport@thechicagoschool.edu). Students must sit in class by the third class day to be eligible to continue when appealing or for the re-entry process. There is no guarantee of re-entry/re-take with submission of an appeal letter during the term or semester in which the appeal meeting occurs. Students may appeal once while enrolled in the program. Future appeal requests can be denied. The decision of the appeal committee is final.

As part of the re-admission process if a student is dismissed for unsuccessful academic progress or behavioral issues, a student needs to submit a letter to this email address after 1 year or 365 days from the day of dismissal with an explanation of the following regarding unsatisfactory academic performance including any mitigating circumstances;

Evidence of the ability to succeed academically including new professional experience(s) or changed personal circumstances, and Official documentation of any coursework completed while in dismissal status and, Why the committee should consider you for re-admission.

Again, if the above is done, **re-admission is not guaranteed.**

### **Change of Information**

In order to maintain accurate records for the school and for the Board of Nursing it is imperative students notify the school Registrar in writing of any change in name, address, or telephone number. A legal change of name requires appropriate documentation. Failure to do so will result in delaying the Board of Nursing's ability to process the student information that leads to the permit of approval to sit the NCLEX-RN examination.

### **Telephone Usage**

If a student needs to make a personal phone call at a clinical site, the student must use the public telephone or go outside the facility and use his/her own cell phone. The student will inform Faculty or their assigned preceptor/trainee when they leave a unit to make a phone call. If a cell phone is carried into a facility or into school, it must be turned OFF or placed on silent/vibrate.

### **Library**

The CON's library is located on campus. Students should check the library for hours of operation. Computers with Internet access and the library catalog are available for student use during regularly scheduled library hours. Books, videotapes, and DVDs are available for check out from the library. The borrower is responsible for the use, care, and return of all library materials. Reference materials, professional journals, and magazines may be used in the library but may not be checked out.

#### **Library Policies and Procedures**

1. A maximum of 5 books may be checked out for 3 weeks. A maximum of 3 DVDs and other media items may be checked out for 1 week.
2. Journals, periodicals, and magazines may only be used within the library and may not be checked out.
3. Items borrowed from the library must be returned to the library information desk by the due date to avoid a late fee.
4. Late fees for books are \$ .50 per day and DVDs are \$1 per day excluding weekends and holidays.
5. Borrowed items may be renewed one time in person or by calling the library at 469-941-8310 no later than the item's due date in order to avoid a late fee.
6. Failure to return any books upon completion of course requirements, will result in a hold on the student's account, inability to participate in graduation and sending the student's name to the Texas Board of Nursing for NCLEX.
7. If an item is damaged or lost, the patron will be expected to pay the full replacement cost.
8. For further information, please obtain a CON Library brochure which is available at the library information desk.

All students entering the ADN program will be scheduled for an instructional session with the librarian that will introduce the student to the print and electronic holdings of the library, including research and reference strategies. At the conclusion of the session, the student will receive a handout with information on how to access the library's electronic resources

when off campus, as well as the library's policies and procedures.

### **Dress Code**

Students at the CON are being trained for professional careers which involve considerable public contact. The CON maintains a dress code to prepare students for these careers. Students will be required to comply with the following:

**UNIFORMS:** *Classroom Scrubs:* Scrubs must be worn to all classes. Scrubs may be any color (except black). Scrub pants must be full length (no Capri). Lab coats worn at school can be any color (except white or black). No cartilage piercing or gages allowed while on campus, including tongue, nose, eyebrow, all body parts. Tattoos must be covered in class. No caps, hats, or beanies in classroom, unless prior approval by campus administration (Dean of Nursing). Natural hair colors only. No false eyelashes. Nails should be short to the end of the finger and well-manicured. No polish or artificial nails are allowed. (i.e. gel, dip powder, press-ons, acrylic, etc). (scrubs and lab coats) must be clean, wrinkle-free, and worn at all times. Specific clinical attire is required and is issued to the student by the college. Clinical shoes must be mostly white with closed heel and toe. Students must wear white socks with clinical attire. Shoes and laces must be clean at all times. Sandals, open-toed and sling-back shoes are not permitted. Nails should not extend beyond the end of the finger. No polish or artificial/acrylic nails are permitted. Hair must be clean, neat and worn away from the face and off the collar. Hair style must be able to accommodate the Personal Protective Equipment. (No colored hair that is not of a natural color.) Hats/caps are not permitted unless required by the facility unit a student is assigned (EX: maternity ward, OR).

**CLINICAL UNIFORMS:** Clinical uniforms must be worn when attending all skills, Sims, and clinical labs, as well as those conducted on and off campus.

**ID BADGES:** CON ID badges must be worn at all times when a student is on campus and out at clinical sites. Students must present badge to enter into testing room. Failure present with an ID badge can result in dismissal from clinical/skills/sims.

**OTHER:** Students should bathe regularly and practice good personal hygiene. Makeup and jewelry should be kept at a minimum. The use of cologne is not permitted. Body piercings are not permitted, and all tattoos must be covered.

Interpretation of the dress code will be at the discretion of the faculty and Dean of Nursing. While changes in the dress code are not anticipated, information about any changes will be given to students in a timely manner.

### **Classroom Policies**

The CON believes that optimal learning takes place in an open but respectful environment. To enhance this learning environment certain guidelines are necessary:

1. Cell phones must not be visible. They should either be turned off or on "vibrate" so as not to disturb the class. No texting.
2. Students are expected to be prompt to class. Tardiness to the classroom will be counted as time absent.
3. Food and beverages **are never allowed in the library, skills labs, Sims lab or computer labs.** Fluids with lids are allowed in the classroom and food is allowed in the classroom on special occasions.

4. Students are expected to conduct themselves in a manner that demonstrates respect for peers, faculty, and ultimately patients, co-workers, and families. Disrespect in the classrooms, labs, or at clinical sites will not be tolerated.

### **Clinical Policies**

1. Faculty will collaborate with the students to choose patient care assignments that meet the program's learning objectives. Faculty reserves the right to change the student's assignment, if in his/her professional judgment either the patient's care or the student's learning is being compromised.
2. Prior to beginning a clinical rotation, faculty will orient students to each clinical area, including objectives, assignments, policies, appropriate dress, and methods of communication. Students may be required by the facility to attend a formal orientation prior to the clinical rotation.
3. Faculty will be available for clinical supervision at all times while the student is in the clinical area. Students will be advised of the method for contacting faculty.
4. Students will advise faculty when they need supervision for a procedure. If faculty is not immediately available to supervise, the student must wait or forgo the experience. Staff nurses will not be utilized for the supervision of procedures.
5. Students are to be prepared to give safe and knowledgeable care to their assigned patients. Any student not prepared to give such care may be asked to leave the clinical area and will be considered absent for the day.
6. Students will notify faculty or a staff nurse before leaving the clinical unit for any reason. Leaving the clinical area without reporting off is considered patient abandonment and is grounds for dismissal from the program.
7. Students are responsible for maintaining their skills check list and for notifying faculty when supervision of a procedure is required.
8. Students must have all medications checked by faculty before administration.
9. Students are not permitted independent access to controlled medication. These medications will be issued to the student by a licensed nurse, who must co-sign the narcotic record with the student. The student is responsible for administering all medications according to the Five Rights of medication administration.
10. Clinical pre and post conferences are considered an integral part of the clinical experience. As such, attendance by the student is mandatory. Students are expected to plan patient care so that they will arrive at post conferences on time.
11. Clinical time is required by the school in compliance with the state BON. Rescheduling clinical time may be arranged at the Program Chair's discretion under the following conditions: The following criteria qualify for clinical rescheduling up to 5% of the total course time hours for the program:
  - 1) Death of an immediate family with documentation;
  - 2) Hospitalization of you or your immediate family with documentation;
  - 3) You were summoned to court with documentation (i.e. jury duty);
  - 4) You were summoned for military duty with documentation or
  - 5) Government or state mandated natural disaster in areas where the CON is located.

Student must provide original documentation in all instances for rescheduling to be considered.

## **Safe Clinical Behaviors**

Nursing students are legally responsible for their own acts, commission and/or omission, and nursing faculty may be held responsible and/or accountable for any acts of their students in the clinical area. It is therefore necessary for the student and the nursing faculty to conscientiously evaluate and define unsafe clinical behavior and/or performance.

The ADN Program identifies safety as a basic human need. A safety need can be identified as physical, biological, and/or emotional in nature. Safe practices are an academic requirement of each program. Unsafe clinical practice shall be deemed to be behavior demonstrated by the student which threatens or violates the physical, biological, or emotional safety of the patients, caregivers, students, faculty, staff or self.

Unsafe or unprofessional clinical practice will result in the initiation of a clinical alert and may result in the following:

- A performance conference and written report
- A probation conference and written report
- Immediate dismissal from the program. (if the occurrence is past the official date for withdrawal from a course, the student will receive a performance grade of “F” for failure.)

The following examples serve as guides to these unsafe behaviors but are not to be considered all-inclusive.

**Physical Safety:** Unsafe behaviors include but are not limited to:

- Inappropriate use of side rails, wheelchairs, other equipment
- Lack of proper protection of the patient which potentiates falls, lacerations, burns, new or further injury
- Failure to correctly identify patient(s) prior to initiating care
- Failure to perform pre-procedure safety checks of equipment, invasive devices or patient status

**Biological Safety:** Unsafe behaviors include but are not limited to:

- Failure to recognize the correct violations in aseptic technique
- Improper medication administration techniques/choices
- Performing actions without appropriate supervision
- Failure to seek help when needed
- Failure to properly identify patient(s) prior to treatment

**Emotional Safety:** Unsafe behaviors include but are not limited to:

- Threatening or making a patient, caregiver, faculty, staff or bystander fearful
- Providing inappropriate or incorrect information
- Performing actions without appropriate supervision
- Failure to seek help when needed, unstable emotional behaviors

**Unprofessional Practice:** Unprofessional behaviors include but are not limited to:

- Verbal or non-verbal language, action, or voice inflections which compromise rapport and working relations with patients, family members, staff, faculty, or physicians, may potentially compromise contractual agreements and/or working relations with clinical affiliates, or constitute violations of legal/ethical standards
- Behavior which interferes with or disrupts teaching/learning experiences
- Using or being under the influence of any drug or alcohol that may alter judgment and interfere with safe performance in the clinical or classroom setting
- Breach of confidentiality in any form

- Conduct which would normally be considered unprofessional in relation to dealings and communication with students, peers, and/or supervisors or clinical training site staff

### **Documentation at Clinical Sites**

Faculty and students will follow the designated charting system used at each site. Students are not to chart on the patient record until faculty has reviewed the charting. Faculty will co-sign the student's charting. Students should complete patient assessments in the time designated by faculty. If any problems are noted during assessment, the student must inform staff nurse immediately and Faculty as soon as possible.

Students should document initial assessment on a "dummy" sheet that would then be transferred to the actual chart once reviewed by Faculty. This will enable the staff nurse to make notations on the patient's chart.

### **HIPAA Defined**

The Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191), otherwise known as HIPAA, was enacted as a broad Congressional attempt at incremental healthcare reform. The "Administrative Simplification" section of that law requires the United States Department of Health and Human Services (DHHS) to develop standards and requirements for maintaining and transmitting health information. The Administrative Simplification section of HIPAA is designed to improve the efficiency and effectiveness of the healthcare system by standardizing the electronic data for specified administrative and financial transactions, while protecting the security and confidentiality of that information. HIPAA has three standard requirements:

1. Privacy: To protect patient data from inappropriate disclosure or use
2. Security: Safeguards around patient information systems preventing unauthorized access
3. Administrative simplification: Administrative standards will replace numerous non-standard formats that currently are being used for transactions with a single uniform set of electronic formats. The following three areas will be standardized:
  - 1) Transaction sets: 9 claims related transactions
  - 2) Identifiers: provider, payer, employer and individual
  - 3) Code sets: diagnosis, therapeutic and treatment

### **Who Is Affected By HIPAA Standards?**

- Every **Payer** is required to accept the standard transactions.
- Every **Provider** that uses electronic transactions must be HIPAA compliant utilizing HIPAA standards.
- All "**Healthcare Clearinghouses**" must use HIPAA standards. Providers and health plans will also have the option of using a claims clearinghouse, which can accept non-standard claims and other transactions. The clearinghouse would then be required to convert the non-standard transactions to HIPAA standards.

### **HIPAA Requirements**

Administrative Simplification consists of requirements in all the following areas:

- Security

- Privacy
- Identifiers
- Transactions and code sets
- Timeframes
- Penalties <http://www.electronicclaim.com/hipaadefined.html>

**TITLE 34: EDUCATION**  
**PART 99—FAMILY EDUCATIONAL RIGHTS AND PRIVACY**

[www.ed.gov](http://www.ed.gov)

**§99.2 What is the purpose of these regulations?**

The purpose of this part is to set out requirements for the protection of privacy of parents and students under section 444 of the General Education Provisions Act, as amended.

NOTE TO §99.2: 34 CFR 300.610 through 300.626 contain requirements regarding the confidentiality of information relating to children with disabilities who receive evaluations, services or other benefits under Part B of the Individuals with Disabilities Education Act (IDEA). 34 CFR 303.402 and 303.460 identify the confidentiality of information requirements regarding children and infants and toddlers with disabilities and their families who receive evaluations, services, or other benefits under Part C of IDEA. 34 CFR 300.610 through 300.627 contain the confidentiality of information requirements that apply to personally identifiable data, information, and records collected or maintained pursuant to Part B of the IDE

**§99.4 What are the rights of parents?**

An educational agency or institution shall give full rights under the Act to either parent, unless the agency or institution has been provided with evidence that there is a court order, State statute, or legally binding document relating to such matters as divorce, separation, or custody that specifically revokes these rights.

**§99.5 What are the rights of students?**

(a)(1) When a student becomes an eligible student, the rights accorded to, and consent required of, parents under this part transfer from the parents to the student.

(2) Nothing in this section prevents an educational agency or institution from disclosing education records, or personally identifiable information from education records, to a parent without the prior written consent of an eligible student if the disclosure meets the conditions in §99.31(a)(8), §99.31(a)(10), §99.31(a)(15), or any other provision in §99.31(a).

(b) The Act and this part do not prevent educational agencies or institutions from giving students rights in addition to those given to parents.

(c) An individual who is or has been a student at an educational institution and who applies for admission at another component of that institution does not have rights under this part with respect to records maintained by that other component, including records maintained in connection with the student's application for admission, unless the student is accepted and attends that other component of the institution.



# **Appendices**

## **Appendix A: Disciplinary Warning Forms**

1. **Clinical alert forms** are used by Faculty when a student is unable to perform a particular skill and remediation is needed.
2. **Disciplinary Warning forms** are used when a student's grades and/or performance are unacceptable and require immediate attention.
3. **Clinical Absence Grade forms** are used when a student is absent from a clinical.



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## CLINICAL ALERT

**Student Name:** \_\_\_\_\_

**Faculty Name:** \_\_\_\_\_

**Course Level:** \_\_\_\_\_

**Facility:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*(\*required fields)*

**1. \*Description of Event:**

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**2. \*Correlate the Event with the Clinical Evaluation Tool:**

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**3. \*Results of the Event:**

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**4. \*Corrective Actions Taken:**

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**5. \*Skill Follow-up required / Completed on the CON campus:**

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**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Faculty Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



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## DISCIPLINARY WARNING FORM

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

The following areas of your grades/performance are unacceptable and require immediate attention.

\_\_\_\_\_ Mid-term grade in \_\_\_\_\_

\_\_\_\_\_ Final grade in \_\_\_\_\_

\_\_\_\_\_ Insufficient number of care plans submitted \_\_\_\_\_ are due \_\_\_\_\_ have been submitted

\_\_\_\_\_ Tardiness \_\_\_\_\_ Clinical \_\_\_\_\_ Classroom

\_\_\_\_\_ Absenteeism: Clinical \_\_\_\_\_ hours missed; Classroom \_\_\_\_\_ hours missed

\_\_\_\_\_ Insubordination

\_\_\_\_\_ Unprofessional clinical appearance (Hair not clean, neat and controlled, wrong or uniform not clean and pressed, excessive/inappropriate jewelry, shoes and/or laces -not clean, inappropriate stockings, socks or shoes).

\_\_\_\_\_ Unprofessional clinical conduct (language, inappropriate discussions in front of or about patients, inappropriate discussion in front of or about other professionals, breach of patient confidentiality).

\_\_\_\_\_ Unprofessional classroom conduct (language, confrontations with peers or faculty not otherwise classified as insubordination).

ACTIONS/EXPECTATIONS: **ANY ACTION OR CONDUCT MENTIONED ABOVE THAT OCCURS AFTER THIS WARNING IS GROUNDS FOR IMMEDIATE DISMISSAL FROM THE PROGRAM;**

\_\_\_\_\_  
\_\_\_\_\_

COMMENTS: \_\_\_\_\_

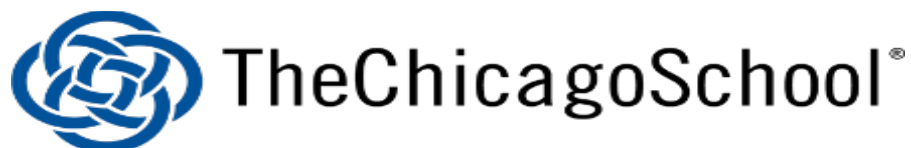
\_\_\_\_\_  
\_\_\_\_\_

Follow-up/resolution required no later than \_\_\_\_\_

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Program Chair's Signature



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## **Clinical Absence Grade**

Date: \_\_\_\_\_

Program Group: \_\_\_\_\_

Student: \_\_\_\_\_

Site Assigned: \_\_\_\_\_

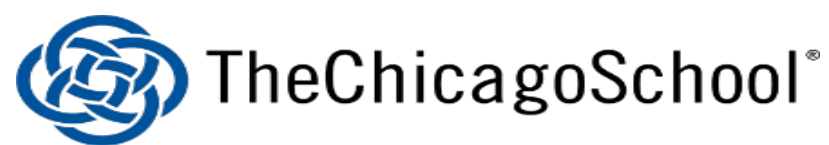
Faculty: \_\_\_\_\_

Daily Grade: \_\_\_\_\_

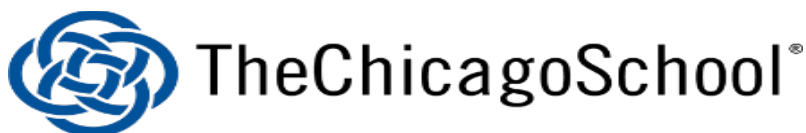
Post-Conference Grade: \_\_\_\_\_

Care Plan Grade: \_\_\_\_\_

Comment: \_\_\_\_\_  
\_\_\_\_\_



## **Appendix B: Clinical Confidentiality Agreement**



## **CLINICAL NURSING COURSE CONFIDENTIALITY AGREEMENT**

Students enrolled in the College of Nursing (CON) recognize the importance of protection of confidential information about clients and their families and of the operations of agencies where students are placed for clinical experiences. It is the obligation of every student to protect and maintain confidentiality. All client information is considered confidential. It is the ethical and legal responsibility of all students to maintain and comply with all confidentiality requirements of the agencies used for clinical experiences.

As a student at TCS CON, I agree to the following:

1. I will protect the confidentiality of all clients, family and clinical agency information.
2. I will not release unauthorized information to any source.
3. I will not access or attempt to access information other than that information which I have authorized access to and need to know in order to complete my assignment as a student nurse.
4. I will report breaches of the confidentiality agreement by others to clinical faculty. I understand that failure to report breaches of confidentiality is an ethical violation and subjects me to disciplinary action.
5. I will not put client/family/clinical agency identifying information on any stored information (disk or hard drive) on my own personal computer or on any other public or private computer.
6. I will not photograph or digitally record any client/family/clinical identifying information.
7. I will not have conversations outside of the clinical/post conference setting concerning clinical experiences.

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

## Appendix C: Texas Administrative Code

The following section of the Student Handbook is for ADN students only. All students must sign the acknowledgment or receipt and review at the end of this handbook.

### Texas Administrative Code

<u><b>TITLE 22</b></u>	EXAMINING BOARDS
<u><b>PART 11</b></u>	TEXAS BOARD OF NURSING
<u><b>CHAPTER 213</b></u>	PRACTICE AND PROCEDURE
<b>RULE §213.27</b>	<b>Good Professional Character</b>

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(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 Dean of Nursing, 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>.

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(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>.

**Source Note:** The provisions of this §213.27 adopted to be effective September 1, 1998, 23 TexReg 6444; amended to be effective November 14, 2002, 27 TexReg 10594; amended to be effective May 17, 2004, 29 TexReg 4884; amended to be effective October 10, 2007, 32 TexReg 7058; amended to be effective July 2, 2008, 33 TexReg 5007

# Texas Administrative Code

## TITLE 22

## EXAMINING BOARDS

### PART 11

### TEXAS BOARD OF NURSING

#### CHAPTER 213

#### PRACTICE AND PROCEDURE

##### **RULE §213.28**

##### **Licensure of Persons with Criminal Offenses**

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(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) i) 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) i) Prostitution (3 or more counts) or Aggravated Promotion {TPC §43.02, §43.04}
- (xxviii) i) Resisting Arrest, Use of Deadly Weapon {TPC §38.03(d)}
- (xxix) Talking {TPC §42.072(b)}
- (xxx) Harassment {TPC §42.07}
- (xxxi) Tuition or Promotion of {TPC §43.02}
- (xxxii) ii) Protective Order, Violation {TPC §25.07, §38.112}
- (xxxiii) ii) Resisting Arrest {TPC §38.03(a)}
- (xxxiv) Deadly conduct {TPC §22.05(a)}
- (xxxv) Obscenity, Participates {TPC §43.23(c), (h)}
- (xxxvi) vi) Terroristic Threat {TPC §22.07}
- (xxxvii) ii) 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 Dean of Nursing 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 Dean of Nursing, 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>.

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# Texas Administrative Code

## TITLE 22

## EXAMINING BOARDS

## PART 11

## TEXAS BOARD OF NURSING

## CHAPTER 213

## PRACTICE AND PROCEDURE

### **RULE §213.29**

### **Criteria and Procedure Regarding Intemperate Use and Lack of Fitness in Eligibility and Disciplinary Matters**

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(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 Dean of Nursing 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 Dean of Nursing 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 Dean of Nursing 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 Dean of Nursing may renew the license.

(j) The following disciplinary and eligibility sanction policies and guidelines shall be used by the Dean of Nursing, 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>.

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# Texas Administrative Code

## TITLE 22

## EXAMINING BOARDS

### PART 11

### TEXAS BOARD OF NURSING

#### CHAPTER 213

#### PRACTICE AND PROCEDURE

##### **RULE §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 Dean of Nursing proposes to find the petitioner ineligible for licensure, the petitioner may obtain a hearing before the State Office of Administrative Hearings (SOAH). The Dean of Nursing 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 Dean of Nursing, 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 Dean of Nursing 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.

(l) This section implements the requirements of the Occupations Code Chapter 53 Subchapter D and the Occupations Code §301.257.

**Source Note:** The provisions of this §213.30 adopted to be effective August 15, 2002, 27 TexReg 7107; amended to be effective May 17, 2004, 29 TexReg 4884; amended to be effective February 19, 2006, 31 TexReg 847; amended to be effective October 10, 2007, 32 TexReg 7058; amended to be effective July 2, 2008, 33 TexReg 5007; amended to be effective November 15, 2009, 34 TexReg 7812; amended to be effective July 12, 2010, 35 TexReg 6074

# Texas Administrative Code

## TITLE 22

## EXAMINING BOARDS

### PART 11

### TEXAS BOARD OF NURSING

#### CHAPTER 213

#### PRACTICE AND PROCEDURE

##### **RULE §213.31**

##### **Cross-reference of Rights and Options Available to Licensees and Petitioners**

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Licensees subject to disciplinary action and petitioners seeking a determination of licensure eligibility have certain rights and options available to them in connection with these mechanisms. For example, licensees or petitioners have the right to request information in the Board's possession, including information favorable to licensee or petitioner, and the option to be represented by an attorney at their own expense. The following is a list of references to provisions of the Nursing Practice Act (Texas Occupations Code Annotated

Chapter 301) and the Board's rules addressing these rights and options and related matters. Persons with matters before the Board should familiarize themselves with these provisions:

- (1) Section 301.257--Declaratory Order of License Eligibility;
- (2) Section 301.203--Records of Complaints;
- (3) Section 301. 204--General Rules Regarding Complaint Investigation and Disposition;
- (4) Section 301.464--Informal Proceedings;
- (5) Section 301.552--Monitoring of License Holder;
- (6) Section 301.452--Grounds for Disciplinary Action;
- (7) Section 301.453--Disciplinary Authority of Board; Methods of Discipline;
- (8) Section 301.457--Complaint and Investigation;
- (9) Section 301.159--Board Duties Regarding Complaints;
- (10) ction 301.463--Agreed Disposition;
- (11) Section 301.462--Voluntary Surrender of License;
- (12) Section 301.454--Notice and Hearing;
- (13) Section 301.458--Initiation of Formal Charges; Discovery;
- (14) Section 301.459--Formal Hearing;
- (15) Section 301.460--Access to Information;
- (16) Section 301.352--Protection for Refusal to Engage in Certain Conduct;
- (17) Section 301.455--Temporary License Suspension;
- (18) Section 217.11--Standards of Nursing Practice;
- (19) Section 217.12--Unprofessional Conduct; and
- (20) Sections 213.1 - 213.33--Practice and Procedure.

**Source Note:** The provisions of this §213.31 adopted to be effective August 15, 2002, 27 TexReg 7107; amended to be effective May 17, 2004, 29 TexReg 4884

# **Texas Administrative Code**

## **TITLE 22**

## **EXAMINING BOARDS**

## **PART 11**

## **TEXAS BOARD OF NURSING**

## **CHAPTER 215**

## **PROFESSIONAL NURSING EDUCATION**

### **RULE §215.8**

### **Students**

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(a) The number of students admitted to the program shall be determined by the number of qualified faculty, adequate educational facilities and resources, and the availability of appropriate clinical learning experiences for students.

(b) Individuals enrolled in approved professional nursing educational programs preparing students for initial licensure shall be provided verbal and written information regarding conditions that may disqualify graduates from licensure and of their rights to petition the Board for a Declaratory Order of Eligibility. Required eligibility information includes: (1) Texas Occupations Code §§301.252, 301.257 and 301.452 - 301.469; and

(2) Sections 213.27 - 213.30 of this title (relating to Good Professional Character, Licensure of Persons with Criminal Offenses, Criteria and Procedure Regarding Intemperate Use and Lack of Fitness in Eligibility and Disciplinary Matters, Declaratory Order of Eligibility for Licensure).

(c) The program shall have well-defined written nursing student policies based upon statutory and Board requirements, including nursing student admission, dismissal, progression, and graduation policies that shall be developed, implemented and enforced.

(1) Student policies shall be in accordance with the requirements of applicable federal and state agencies.

(2) Nursing student policies which differ from those of the governing institution shall be in writing and shall be made available to faculty and students.

(d) Reasons for dismissal shall be clearly stated in written nursing student policies and shall include any demonstration of the following, including, but not limited to:

(1) evidence of actual or potential harm to patients, clients, or the public;

(2) criminal behavior whether violent or non-violent, directed against persons, property or public order and decency;

(3) intemperate use, abuse of drugs or alcohol, or diagnosis of or treatment for chemical dependency, mental illness, or diminished mental capacity; and

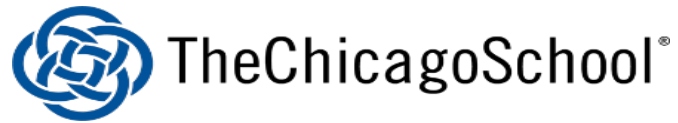
(4) the lack of good professional character as evidenced by a single incident or an integrated pattern of personal, academic and/or occupational behaviors which, in the judgment of the Board, indicates that an individual is unable to consistently conform his or her conduct to the requirements of the 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.

(e) ) Policies shall facilitate mobility/articulation, be consistent with acceptable educational standards, and be available to students and faculty.

(f) ) Student policies shall be furnished manually or electronically to all students at the beginning of the students' enrollment in the nursing educational program.

- (1) The program shall maintain a signed receipt of student policies in all students' records.
- (2) It is the responsibility of the program and the nursing faculty to define and enforce nursing student policies.
- (g) Acceptance of transfer students and evaluation of allowable credit for advanced placement remains at the discretion of the Dean or coordinator of the program and the controlling agency/governing institution. Upon completing the receiving program's requirements, the individual is considered to be a graduate of the program.
- (h) Students shall have mechanisms for input into the development of academic policies and procedures, curriculum planning, and evaluation of teaching effectiveness.
- (i) Students shall have the opportunity to evaluate faculty, courses, and learning resources and these evaluations shall be documented.

**Source Note:** The provisions of this §215.8 adopted to be effective January 9, 2005, 29 TexReg 12190; amended to be effective October 19, 2008, 33 TexReg 8509; amended to be effective December 27, 2010, 35 TexReg 11668



## **Appendix D:**

### **Use of Social Media by Nurses**

### **Differentiated Essential Competencies**

## Use of Social Media by Nurses

With the rapidly growing use of social media sites and applications such as Facebook, Twitter, LinkedIn, YouTube, and blogs, professional obligations to patients, peers, and employers may be unclear. While the Board recognizes that the use of social media can be a valuable tool in healthcare, there are potential serious consequences if used inappropriately. Online postings may harm patients if protected health information is disclosed. These types of postings may reflect negatively on individual nurses, the nursing profession, the public's trust of our profession, as well as jeopardize careers.

Both the National Council of State Boards of Nursing (NCSBN) and the American Nurses Association (ANA) endorse each other's guidelines and principles on the use of social media in order for it to be used appropriately and without harm to patients. The benefits of social media are many, and include:

- "Networking and nurturing relationships
- Exchange of knowledge and forum for collegial interchange
- Dissemination and discussion of nursing and health related education, research, best practices
- Educating the public on nursing and health related matters" (ANA, 2012, para. 4).

However, if used indiscriminately, the risks are great, and include:

- "Information taking on a life of its own where inaccuracies become fact
- Patient privacy being breached
- The public's trust of nurses being compromised
- Individual nursing careers being undermined" (ANA, 2012, para. 5).

In a recent survey by the NCSBN, many of the responding boards reported that they had received complaints about nurses inappropriately using social media sites. Nurses have been disciplined by boards, fired by employers, and criminally charged for the inappropriate or unprofessional use of social media (NCSBN, 2012).

To ensure the mission to protect and promote the welfare of the people of Texas, the Texas Board of Nursing supports both the guidelines and principles of social media use by the NCSBN and ANA. In keeping with the NCSBN guidelines, it is the Board's position that:

- *Nurses must recognize that they have an ethical & legal obligation to maintain patient privacy and confidentiality at all times.*
- *Nurses are strictly prohibited from transmitting by way of any electronic media any patient-related image. In addition, nurses are restricted from transmitting any information that may be reasonably anticipated to violate patient rights to confidentiality or privacy, or otherwise degrade or embarrass the patient.*
- *Nurses do not identify patients by name or post or publish information that may lead to the identification of a patient. Limiting access to postings through privacy settings is not sufficient to ensure privacy.*

- *Nurses do not refer to patients in a disparaging manner, even if the patient is not identified.*
- *Nurses do not take photos or videos of patients on personal devices, including cell phones. Follow employer policies for taking photographs or video of patients for treatment or other legitimate purposed using employer-provided devices.*
- *Nurses maintain professional boundaries in the use of electronic media. Like in-person relationships, the nurse has the obligation to establish, communicate and enforce professional boundaries with patients in the online environment. Use caution when having online social contact with patients or former patients. Online contact with patients or former patients blurs the distinction between a professional and personal relationship. The fact that a patient may initiate contact with the nurse does not permit the nurse to engage in a personal relationship with the patient.*
- *Nurses consult employer policies or supervisor within the organization for guidance regarding work related postings.*
- *Nurses promptly report any identified breach of confidentiality or privacy.*
- *Nurses must be aware of and comply with employer policies regarding use of employer-owned computers, cameras and other electronic devices and use of personal devices in the work place.*
- *Nurses do not make disparaging remarks about employers or co-workers. Do not make threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or other offensive comments.*
- *Nurses do not post content or otherwise speak on behalf of the employer unless authorized to do so and follow all applicable policies of the employer (NCSBN, 2012).*
- *Nurses update your privacy settings on a regular basis.*

The use of social media can be of tremendous benefit to nurses and patients alike. However, nurses must be aware of the potential consequences of disclosing patient-related information via social media. Nurses must always maintain professional standards, boundaries, and compliance with state and federal laws as stated in 22 TAC § 217.11(1)(A). All nurses have an obligation to protect their patient's privacy and confidentiality (as required by 22 TAC § 217.11(1)(E)) which extends to all environments, including the social media environment.

Resource: <http://www.bon.texas.gov/practice/position.html#15.29>

Students may be terminated for violation of Social Media policies.

## **Texas Board of Nursing Diploma and Associate Degree Nursing Education**

Although the programs for Diploma nursing and Associate Degree Nursing (ADN) may vary in the missions and philosophies of the sponsoring institutions, competencies have been identified as common for graduates of both programs.

These competencies are the expectations for entry-level into registered nursing practice. Diploma programs are hospital-based, single purpose schools of nursing that consist of two to three years of general education and nursing courses. These programs are based on the missions, values, and purposes of the governing institutions and prepare graduates to provide and coordinate health care of individuals and their families throughout the life span across the health continuum.

General education courses, from an accredited college or university, may be required as prerequisites to or offered concurrently with nursing courses. The general education courses provide a foundation in communication, psychology, human growth and development, and related sciences to support the nursing courses. A Diploma program of study that is completed on or after December 31, 2014, must entitle a student to receive a degree [Texas Occupation Code 301.157(a-1)].

ADN programs, located in community colleges, senior colleges, and career schools, require a minimum of two years of full-time study, integrating a balance between courses in liberal arts; natural, social, and behavioral sciences; and nursing. Academic associate degrees consist of 60 to 72 credit hours with approximately half the program requirements in nursing courses.

General education courses provide a foundation for nursing content in ADN programs and enable graduates to apply theoretical content and evidence-based findings in the provision of nursing care. The Texas Board of Nursing (BON or Board) approved curriculum includes requirements for didactic instruction and clinical learning experiences in four content areas: medical-surgical, maternal/child health, pediatrics, and mental health nursing. Nursing courses in Diploma and ADN programs provide opportunities to demonstrate competence in the application of nursing knowledge and clinical judgments and behaviors in health care settings. The entry-level graduate from a Diploma or ADN program integrates knowledge from general education and sciences for the delivery of safe and compassionate care for patients and their families. Nursing content includes the importance of establishing partnerships with patients and their families in the promotion, prevention, rehabilitation, maintenance, and restoration of health of individuals of all ages. Nursing care supervision, basic nursing management, and legal/ethical content are imbedded in the curriculum.

All levels of pre-licensure nursing education prepare graduates to demonstrate the Differentiated Essential Competencies of Graduates of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgments, and Behaviors (DECs).

The competencies for each education level are based upon the preparation in the program of study. The Texas BON licenses individuals who pass the National Council Licensure Examination for

Registered Nurses (NCLEX-RN). Qualified graduates of Diploma and ADN programs typically receive a temporary permit to practice under direct supervision of a registered professional nurse for a 75-day period while awaiting testing and licensure.

The primary role of the entry-level graduate of a Diploma or ADN program is to provide direct nursing care to or coordinate care for a limited number of patients in various health care settings. Such patients may have complex multiple needs with predictable or unpredictable outcomes. With additional experience and continuing education, the Diploma or ADN graduate can increase the numbers of assigned patients, provide independent direct care, supervise health care of patients and their families, and receive certification in various specialty areas. Through articulation, graduates may continue their education to prepare for expanded roles.

The entry-level competencies of the Diploma and ADN graduate build upon the entry-level competencies of the Vocational Nursing graduate.

## **Differentiated Essential Competencies of Graduates of Texas Diploma and Associate Degree Nursing Education Programs**

### **I. Member of the Profession:**

A. Function within the nurse's legal scope of practice and in accordance with the policies and procedures of the employing health care institution or practice setting.

B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.

C. Participate in activities that promote the development and practice of professional nursing.

D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.

### **II. Provider of Patient-Centered Care:**

A. Use clinical reasoning and knowledge based on the diploma or ADN program of study and evidence-based practice outcomes as a basis for decision-making in nursing practice.

B. Determine the physical and mental health status, needs, and preferences of culturally, ethnically, and socially diverse patients and their families based upon interpretation of comprehensive health assessment findings compared with evidence-based health data derived from the diploma or ADN program of study.

C. Analyze assessment data to identify problems, formulate goals/outcomes, and develop plans of care for patients and their families using information from evidence-based practice in collaboration with patients, their families, and the interdisciplinary health care team.

D. Provide safe, compassionate, comprehensive nursing care to patients and their families through a broad array of health care services.

E. Implement the plan of care for patients and their families within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.

F. Evaluate and report patient outcomes and responses to therapeutic interventions in comparison to benchmarks from evidence-based practice, and plan follow-up nursing care.

G. Develop, implement, and evaluate teaching plans for patients and their families to address health promotion, maintenance, and restoration.

H. Coordinate human, information, and materiel resources in providing care for patients and their families.

### **III. Patient Safety Advocate:**

A. Demonstrate knowledge of the Texas Nursing Practice Act (NPA) and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.

B. Implement measures to promote quality and a safe environment for patients, self, and others. Formulate goals and outcomes using evidence-based data to reduce patient risks.

C. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.

D. Comply with mandatory reporting requirements of the Texas NPA.

E. Accept and make assignments and delegate tasks that take into consideration patient safety and organizational policy.

### **IV. Member of the Health Care Team:**

A. Coordinate, collaborate, and communicate with patients, their families, and the interdisciplinary health care team to plan, deliver, and evaluate patient-centered care.

B. Serve as a health care advocate in monitoring and promoting quality and access to health care for patients and their families.

C. Refer patients and their families to resources that facilitate continuity of care; health promotion, maintenance, and restoration; and ensure confidentiality.

D. Communicate and collaborate in a timely manner with members of the interdisciplinary health care team to promote and maintain the optimal health status of patients and their families.

E. Communicate and manage information using technology to support decision-making to improve patient care.

F. Assign and/or delegate nursing care to other members of the health care team based upon an analysis of patient or unit need.

G. Supervise nursing care provided by others for whom the nurse is responsible by using evidence-based nursing practice.



## **Appendix E:**

# **Substance Abuse Prevention Policy**

 <b>TheChicagoSchool®</b>  <b>Substance Abuse Prevention Policy</b>	Policy Number	
	Effective Date	6-2014
	Revision Date	7-2020
	Revision Number	2
	Page Number	1 of 1
	Approval	

TCS College of Nursing (CON) is committed to creating a work and education environment which is free from the use or distribution of illicit drugs or the abuse of alcohol.

#### Revision History

Date	Rev. No.	Change	Reference Sections
June 1, 2014		Original	Public Law 101 226, Public Law 100 690 and subsequent federal regulations
July 1, 2020		Institutional Name	
January 13, 2022			

1.0 Purpose: To provide guidelines regarding the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees on its property or as a part of any of its activities.

2.0 Persons Affected- Faculty, Staff, Students

3.0 Policy: CON may require a student be tested for drug abuse at his/her own expense if a clinical training facility requests it and/or if a substantiated claim is reported by faculty or clinical staff. Test results must be acceptable within standard norms as determined by the college.

4.1 Procedures:

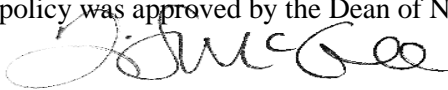
- 4.2 CON provides drug education information to each student upon enrollment in the college, and each fall when information regarding drug and alcohol abuse and the college's prevention program is distributed throughout the CON community.
- 4.3 Further information and confidential referrals concerning counseling and treatment programs for drug and alcohol abuse may be obtained from the Student Affairs office.
- 4.4 Failure to pass the drug screening will result in immediate dismissal from the program.
- 4.5 Students who are taking prescribed scheduled drugs can continue in the program with proof of prescription and physician statement that student is fit to function as a licensed nurse.

5.1 Violation of Policy:

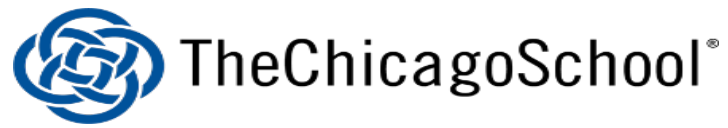
- 5.2 If tested positive for drugs, to be considered for re-enrollment in the ADN, ADN-LVN to RN Transition or Vocational Nursing Program student must do the following:
  - a. Show proof of three consecutive negative drug screens.
  - b. Each drug test spaced at 25-35 day intervals. Any screening not falling within these specified parameters will negate all previous tests.
  - c. Each drug screen will be done at the student's expense.
  - d. Have the testing center forward the results to CON.

Effective Date

This policy was approved by the Dean of Nursing effective 1.13.2022.




Tonya Sawyer-McGee, DNP, MBA, MSN, RN, BSN, ACNP  
(Dean of Nursing)



## **Appendix F:**

# **Application for Licensure and Petition for Declaratory Order/Disclosure of Information**

 <b>TheChicagoSchool®</b>  <b>Disclosure of Information Policy</b>	Policy Number	
	Effective Date	12-2014
	Revision Date	01-2022
	Revision Number	3
	Page Number	1 of 1
	Approval	

**1.0 Purpose:** To provide guidelines for disclosure of information that may adversely affect the student's ability to complete the College of Nursing (CON) School of Nursing (SON) programs. Applies to all students who are admitted into CON nursing programs.

## 2.0 Revision History

Date	Rev. No.	Change	Reference Sections
December 2014	1	Original	Texas Board of Nursing Declaratory Order
October 2015	2	Institutional Name	
Jan 2022	3	Institutional Name	

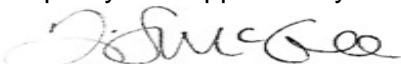
**3.0 Persons Affected** – Associate Vice President (AVP), Deans, Chairs, Faculty, Staff and Students

## 4.0 Policy:

- 4.1 Each student is considered to be a responsible adult and as a nursing student is held to high professional standards that require the exercise of sound judgment and ethical behavior.
- 4.2 Criminal background checks are performed on all potential candidates who applied for entry into one of the CON's nursing programs by the Texas Board of Nursing (BON).
- 4.3 The BON will issue a cleared background or a Declaratory Order if needed.
- 4.4 Once admitted into the nursing program, the student must report any new convictions involving criminal activity, including but not limited to theft, assault, illegal drug/alcohol activity, chemical/drug dependency, mental health diagnosis to include but not limited to schizophrenia and/or psychotic disorders, bipolar disorder, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder, any activity, other than minor traffic violations, which could interfere with clinical placements or obtaining a licensure to practice nursing to the Director of Nursing. The student must also report if they have been a defendant in a civil suit. Involvement in criminal activity that occurs or is discovered while a student is in attendance at the CON may result in disciplinary action, including dismissal.
- 4.5 If the student receives any criminal charges/changes in his/her criminal history, or as noted in 4.4 above, or contacts from the Board of Nursing after being accepted into the SON, the student is required to immediately report these to the Dean of Nursing and Department Chair.

Effective Date

This policy was approved by the Dean of Nursing effective 1/13/2022.



Tonya Sawyer-McGee, DNP, MBA, MSN, RN, BSN, ACNP  
(Dean)





### **Licensure Eligibility Information**

Applicants for a nursing license must submit a sworn application to the Board of Nursing that demonstrates:

1. Good professional character;
2. Successful completion of an approved nursing program; and
3. Passage of the jurisprudence exam.

### **An individual who has been convicted of an offense may be ineligible for a nursing license.**

You may petition the Board of Nursing for a declaratory order concerning your eligibility for a license if you have reason to believe that you are ineligible for licensure and are:

1. Enrolled or planning to enroll in an educational program that prepares them for an initial license as an RN; or
2. An applicant for a license.

The request must state the basis for the person's ineligibility.

Please see the Education Assistant for a paper copy of the Petition for Declaratory Order, or download and print the form from the BON website at the following web address:

<http://www.bon.state.tx.us/olv/pdfs/DOapp.pdf>

For further information on the conditions that may disqualify individuals from licensure and about your rights to petition the Board for a Declaratory Order of Eligibility please review:

1. Texas Occupations Code 301.252, 301.257 and 301.452-469
2. Sections 213.27 – 213.30 of the Texas Administrative Code (relating to Good Professional Character, Licensure of Persons with Criminal Convictions, Criteria and Procedure Regarding Intemperate Use and Lack of Fitness in Eligibility and Disciplinary Matters, Declaratory Order of Eligibility for Licensure).
3. Texas Administrative Code 215.8

### **Application for Licensure**

TCS CON assists with the applications for testing and licensure and assists the applicant in completing both applications. The fees are covered by the individual student and must be paid prior to graduation. The following questions are asked on the application:

1. Have you ever been convicted of a felony or misdemeanor other than a minor traffic violation?
2. Have you ever been declared judicially incompetent or judicially or voluntarily committed to a psychiatric institution?
3. Were you or are you currently an intemperate user of drugs?
4. Were you or are you currently an intemperate user of alcohol?

If a student answers “yes” to any of the above questions, proper documentation and a letter of explanation must accompany the application. The Texas Board of Nursing evaluates all cases on an individual basis.

I acknowledge that I have read the questions above and am able to answer “no” to the

questions. I have filed a Declaratory Order with the Texas Board of Nursing if I answered “yes” to any of the questions. I understand that I will not be able to take the NCLEX-RN until a decision is determined by the Texas Board of Nursing.

**Texas Board of Nursing**  
333 Guadalupe, Ste 3-460, Austin, TX 78701  
Phone: 512-305-7400

For Office Use Only

Date: \_\_\_\_\_

Amount: \_\_\_\_\_

Audit #: \_\_\_\_\_

FBI HX: YES NO

**PETITION FOR DECLARATORY ORDER**

Complete this application in its entirety. Failure to submit a complete application, fee, personal statement, court documents and L1-ID Fingerprint scan or FBI fingerprint card, will delay the approval of your application. Your application will not be reviewed until all requirements have been met and the FBI background check has been completed and processed. Applications are processed in the order that they are received. Please type or print in ink. (Rev 12/2009)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Previous Names: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_ Apt. No. \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_ Email Address \_\_\_\_\_

☐ Yes ☐ No (1.) Are you enrolled, planning to enroll, or have you graduated from a nursing program?

Name of Nursing Program: \_\_\_\_\_

Location: \_\_\_\_\_  
City State

Type of Nursing Program: (circle one) LVN RN

Date of Enrollment: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

- ☐ Yes ☐ No (2.) 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 have 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. Non-disclosure 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 any conduct that raises issues of character.

Applicant's Signature \_\_\_\_\_

Date:\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ **Page 1 of 2**

Applicant's Name (PRINT): \_\_\_\_\_ Social Security # \_\_\_\_\_

- ☐ Yes ☐ No (3.) Are you currently the target or subject of a grand jury or governmental agency investigation?
- ☐ Yes ☐ No (4.) 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 license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?
- ☐ Yes ☐ No (5.) \*Within the past five (5) years have you been addicted to and/or treated for the use of alcohol or any other drug?
- ☐ Yes ☐ No (6.) \*Within the past five (5) years have you been diagnosed with, treated, or hospitalized for schizophrenia and/or psychotic disorders, 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

\*Pursuant to Occupations Code §301.207, information regarding a person's diagnosis or treatment for a physical condition, mental condition, or chemical dependency is confidential to the same extent that information collected as part of an investigation is confidential under the Occupations Code §301.466. You may indicate "NO" if you have completed and/ or are in compliance with Texas Peer Assistance Program for Nurses (TPAPN) for substance abuse or mental illness.

\*\*\*IF YOU ANSWER "YES" TO ANY QUESTION #2 - #6, YOU MUST PROVIDE A SIGNED AND DATED LETTER DESCRIBING THE INCIDENCE(S) THAT YOU ARE REPORTING TO THE BOARD, AS WELL AS SUPPORTING DOCUMENTATION. REFER TO THE INSTRUCTIONS PAGE FOR MORE INFORMATION.

### Attestation

I, the Petitioner referenced in this application, acknowledge this document is a legal document and I attest that the statements herein contained are true in every respect. I understand that no one else may submit this form on my behalf and that I am accountable and responsible for the accuracy of any answer or statement on this form.

Further, I understand that it is a violation of the 22 TAC § 217.12 (6)(I) and the Penal Code, sec 37.10, to submit a false statement to a government agency; and

I consent to release of confidential information to the Texas Board of Nursing and further authorize the Board to use and to release said information as needed for the evaluation and disposition of my application.

I understand that if I have any questions regarding this affidavit I should contact an attorney or the appropriate professional health provider.

I will immediately notify the Board if at any time after signing this affidavit I no longer meet the eligibility requirements.

Applicant's Signature \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date:

Page 1 of 2

**TEXAS BOARD OF NURSING**  
**333 Guadalupe, Ste 3-460, Austin, TX 78701**  
**512-305-7400**

**Petition of Declaratory Order Instructions**  
**to take the NCLEX examination for licensure as an RN or LVN.**

A petition for Declaratory Order is a formal disclosure to the Board of an outstanding eligibility issue that may prevent an applicant in taking the NCLEX examination upon completion of a nursing program. The Declaratory Order process permits the Board to make decisions regarding a petitioner's eligibility for licensure prior to entering or completing a nursing program. Complete and return the petition with the following:

1. Attach a \$39.00 Cashier's Check, Personal Check, or Money Order made payable to the Texas Board of Nursing. **ALL FEES ARE NON-REFUNDABLE.** The Texas Board of Nursing - Operations Department will initially review the completed application within 45 days. The Operations Department has limited delegated parameters to approve petitioners in the declaratory process. If the issue is more complex and outside the delegated parameters of the Operations Department, the applicant will be billed an additional \$150 review fee. Once we receive this fee, your file will be transferred to the Enforcement Department for review. If a Declaratory Order petition is transferred to the Enforcement Department, the Operations staff will not be able to provide updates on the file. Applicants will need to allow a minimum of four (4) months before contacting the Enforcement Department at (512) 305-6838 with any inquiries. **Please note: The fee and petition application expire after one (1) year. If petition packet is not completed within one (1) year, then all fees and forms must be re-submitted.**
2. **The BON requires a criminal background check.** Ten working days after submitting this application and fee, you will need to contact L1-Identity Solution ( [www.l1id.com](http://www.l1id.com) ) and arrange to have your fingerprints scanned. L1 Identity Solutions will complete an electronic submission to the Texas Department of Public Safety for processing and the results are submitted directly to the BON. If you reside outside the State of Texas and are unable to arrange to have the electronic submission completed by L1 Identity Solutions, you must contact the BON and request an FBI fingerprint card which must be completed by the applicant and mailed back to the BON. List your name exactly as it appears on your Picture ID or Driver's license.
3. Provide a signed and dated statement (letter) describing the incident(s) that you are reporting to the Texas Board of Nursing.
4. Provide court documents that show the disposition of the case being reported. You must contact the court whereby the incident occurred to request a certified copy. If the record does not exist, you must obtain a statement from that court that the document has been destroyed or could not be located. See question number two on the following page for complete requirements.
5. All documentation described in these instructions must be submitted with your petition. Decisions regarding eligibility will be based upon the documents submitted. Falsification or omission of materials related to this petition will affect your eligibility and authorization to take the NCLEX® Examination. **Additional documentation may be requested.**
6. Eligibility will **not** be considered until your petition, the required fee, and **all** required documentation has been received and reviewed.
7. Statutes and Rules governing this petition may be found in the Texas Occupations Code §§ 301.257, 301.452-301.454 (Nursing Practice Act), and in the Board Rules and Regulations relating to Nurse Education, Licensure and Practice, 22 TAC §§ 213.27-.30 and §§ 217.11-.12. These statutes and rules can be located on the BON's web site [www.bon.state.tx.us](http://www.bon.state.tx.us).

**Time Frames:** Once all the required information is received by the Operations staff, we have up to 45 days to respond. If the file has to be transferred to our Enforcement Department, you will receive a letter requesting a \$150 review fee. Once the \$150 fee is received, your file will be transferred to the Enforcement Department. If the file is transferred to the Enforcement Department, the eligibility determination may take a minimum of 4 months but could be longer depending on the issue and volume of applications.

Incomplete petitions **will not** be reviewed. To determine your eligibility, you must submit the following information that is relevant to your circumstance.

## **DISCLOSURE OF CRIMINAL HISTORY OR DISCIPLINARY ACTIONS**

### **If you answered yes to questions 2-6, you must provide the Board with the following information:**

**QUESTION #2.** The Board has determined that criminal behavior is highly relevant to an individual's fitness to practice nursing. Therefore, all criminal convictions or deferred orders, prosecution, or adjudication (a determination by a court that is withheld or delayed for a specific time period) must be reported to the Board. This includes offenses under the law of another state, federal law, or the Uniform Code of Military Justice that contains elements of criminal conduct. SUBMIT a personal letter of explanation describing each incident, the behavior that led up to the criminal order and your conduct since the order, and any rehabilitative efforts that have been performed since the order. In addition, SUBMIT the following documentation for all felonies and for all misdemeanors:

Certified copies of:

1. charges (indictment, information, or complaint);
2. disposition of charges (Judgment, Order of Probation, Sentence, and/or Deferred orders); and
3. evidence that the conditions of the court have been met.

(To obtain this documentation, contact the county clerk in the jurisdiction where the order was issued for misdemeanors; district court clerk for felonies.)

You may answer "NO" to the question of prior convictions only if you: (a) received a pardon; or (b) were adjudicated as a minor without a finding of "delinquent conduct". If you were ever required to register as a sex offender, you must answer "YES".

If you have questions regarding the outcome of any criminal matter, consult your attorney.

**QUESTION #3.** The Nursing Practice Act provides that a person's conduct in violation of the Nursing Practice Act or rules of the board may be considered as a factor in its deliberations regarding fitness to practice nursing. Therefore, if a licensee or applicant is the subject of a grand jury or governmental agency investigation, the information regarding conduct or behavior giving rise to the investigation may be relevant in determining a violation of the Nurse Practice Act or lead to the admissibility of relevant evidence of such violation. If you are the subject of a grand jury or governmental agency investigation, please SUBMIT the name and address of the investigating entity and an explanation as to the basis of the investigation.

**QUESTION #4.** The Board has determined that if any licensing authority has taken disciplinary action against a person for any reason, then those actions are highly relevant to an individual's current ability to practice nursing in the state of Texas. If any licensing authority has refused to issue a license, revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a license, certificate, or multi state privilege held by you or previously fined, censured, reprimanded or otherwise disciplined you, SUBMIT the names and address of the licensing authority who has taken action and a letter explaining the background of the action. Additionally, SUBMIT certified copies of

1. formal charges or allegations supporting the licensure action;
2. final disposition of the licensing authority regarding those formal charges or allegations; and
3. evidence that the conditions of the licensing authority's order or requirements have been met.

**QUESTION #5.** The practice of professional nursing requires current sobriety and fitness. If you have been addicted to or treated for the use of alcohol or any other drug within the last five years, SUBMIT:

1. verification of treatment for substance abuse sent directly to the Board from the treatment center;
2. verification of compliance with aftercare recommendations;
3. evidence of continuing sobriety/abstinence, for example, current support group attendance; and
4. a personal letter of explanation with sobriety date and plan for relapse prevention.

\*Pursuant to Occupations Code §301.207, information regarding a person's diagnosis or treatment for a physical condition, mental condition, or chemical dependency is confidential to the same extent that information collected as part of an investigation is confidential under the Occupations Code §301.466

**QUESTION #6.** The practice of professional nursing requires current fitness. The Board has identified certain disorders which, if occurring within the last 5 years, indicate a lack of fitness. The disorders are: schizophrenia and other psychotic disorders, bipolar disorder, paranoid personality disorder, anti-social personality disorder, or borderline personality disorder. If you have been diagnosed, treated or hospitalized for any of the above illnesses within the last 5 years, SUBMIT:

1. A report, on letterhead, from your physician, psychiatrist, psychologist or counselor, sent directly to this office, that includes: your diagnosis; treatments rendered; including current medications; prognosis; cognitive, affective, and emotional stability and continuing after-care recommendations, including reasonable accommodations needed to safely practice professional nursing, if any; and,
2. Verification of compliance with aftercare recommendations.

\*Pursuant to Occupations Code §301.207, information regarding a person's diagnosis or treatment for a physical condition, mental condition, or chemical dependency is confidential to the same extent that information collected as part of an investigation is confidential under the Occupations Code §301.466.

## **Frequently asked questions regarding Petitions for Declaratory Order**

### **1. How long will it take to receive an eligibility decision from the Board?**

- The initial review process can take a minimum of 45 days in the Operations Department and a minimum of four (4) months or longer if transferred to the Enforcement Department. Unfortunately, Board staff cannot provide a time frame over the telephone to an applicant regardless of the type of case. The Board strongly advises that the applicant petition the Board before enrolling into a nursing program if the applicant has potential eligibility issues.

### **2. I am in my last semester of nursing school and I am not allowed to participate in clinicals until I receive an eligibility determination from the Board. How can I speed up the petition process?**

- Unfortunately, the Board cannot "speed up" the eligibility process. Applications are reviewed on a case- by-case basis and are processed in the order that they are received.

### **3. My criminal history came back with a charge I forgot about. I did not indicate this on my Application for Initial Licensure. Will I automatically be denied because I did not disclose the offense to the Board?**

- You will not be approved to take the NCLEX exam without providing the Board with information concerning the offense. This may result in the Board delaying or denying your eligibility to take the NCLEX exam.

### **4. Can a person be licensed if they have a misdemeanor or felony crime on their record?**

- Each application is evaluated on a case-by-case basis. Eligibility to take the NCLEX cannot be determined without an applicant providing a Petition for Declaratory Order to the Board with all required documentation. The Texas Board of Nursing considers the nature, severity, the age of the individual when the incident occurred, and other factors when reviewing a case for eligibility. The Board will not make a determination for approval or denial of licensure without evaluating the entire application and supporting documentation.

### **5. I have a pending criminal charge against me. Do I have to report this to the Board?**

- YES. All pending criminal charges and/or disciplinary action must be reported to the Board.

### **6. Can I work as a Graduate Nurse/Graduate Vocational Nurse (GN/GVN) while the Board is determining my eligibility?**

- NO. The Board will not authorize applicants to practice as a GN/GVN or to take the NCLEX exam until an eligibility decision is rendered. Some applicants may not be eligible to practice as a GN/GVN upon receiving the eligibility determination.

### **7. What can I do if I am denied?**

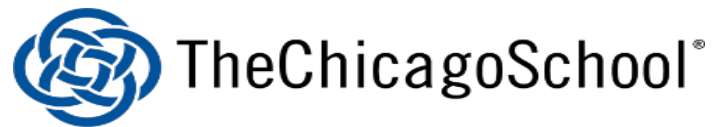
- Petitioners who receive a proposal to deny eligibility may request a hearing before an Administrative Law Judge at the State Office of Administrative Hearings by filing a written request with the Board. The request must be made within 60 days of the denial date and must be addressed to the Office of General Counsel.
- Petitioners who are denied can re-petition the Board at a later date. To determine when you will be eligible to re-petition the Board, speak to the Enforcement or Legal department for the length of time you must wait before re-petitioning.

**Petition for a Declaratory Order  
Check List**

- ☐ Have you attached the \$39.00 fee?
- ☐ Have you filled in **all** applicable blanks and written **all dates** with month/day/year?
- ☐ Have you listed all offenses and dates of offenses for questions 2 & 3 in your letter of explanation?
- ☐ Have you attached all the court documentation for each offense?
- ☐ Have you attached your personal letter explaining the occurrences of each offense, addiction, or mental illness? Did you sign and date your letter?
- ☐ If you are petitioning due to a mental illness, have you attached physician, psychiatrist and/or psychologist's documentation?
- ☐ Have you attached verification of compliance with after care recommendations (only if petitioning due to mental illness or addiction)?
- ☐ Have you attached evidence of continuing sobriety/abstinence (only if petitioning due to alcohol/substance abuse addiction)?
- ☐ Have you attached verification of treatment for substance abuse (only if petitioning due to addiction, all documentation must be sent directly from physician and/or treatment center)?

**Send to:**

**Texas Board of Nursing  
333 Guadalupe, Tower 3, Suite 460  
Austin, TX 78701**

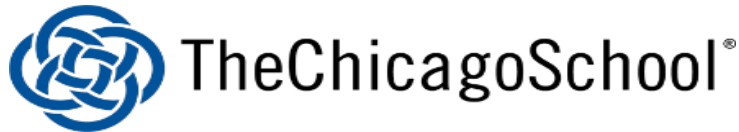


## **Appendix G: Handbook Receipt/ Acknowledgement**

**Please sign both forms-**

- **Turn in one form**
- **Keep the other for your records**





2101 Waterview Pkwy. • Richardson, TX 75080 • Phone: 469-941-8300 • Fax: 214-575-9090

### **Student Handbook Received and Reviewed**

## **ELIGIBILITY INFORMATION**

Conditions that may disqualify graduates from licensure and of the rights to petition the Board for a Declaratory Order of Eligibility are set forth in:

1. Texas Occupations Code 301.252, 301.257 and 301.452-469
2. Sections 213.27 – 213.30 of the Texas Administrative Code (relating to Good Professional Character, Licensure of Persons with Criminal Convictions, Criteria and Procedure Regarding Intemperate Use and Lack of Fitness in Eligibility and Disciplinary Matters, Declaratory Order of Eligibility for Licensure).
3. Texas Administrative Code 215.8

Please see Appendix C of the handbook for the Petition for Declaratory Order, or download and print the form from the BON website at the following web address:

<http://www.bon.state.tx.us/olv/pdfs/DOapp.pdf>

## **APPLICATION FOR LICENSURE**

TCS CON assists with the applications for testing and licensure and assists the applicant in completing both applications. The fees are covered by the individual student and must be paid prior to graduation. The following questions are asked on the application:

1. Have you ever been convicted of a felony or misdemeanor other than a minor traffic violation?
2. Have you ever been declared judicially incompetent or judicially or voluntarily committed to a psychiatric institution?
3. Were you or are you currently an intemperate user of drugs?
4. Were you or are you currently an intemperate user of alcohol?

If a student answers “yes” to any of the above questions, proper documentation and a letter of explanation must accompany the application. The Texas Board of Nursing evaluates all cases on an individual basis.

I acknowledge that I have read the questions above and am able to answer “no” to the questions. I have filed a Declaratory Order with the Texas Board of Nursing if I answered “yes” to any of the questions. I understand that I will not be able to take the NCLEX-RN until a decision is determined by the Texas Board of Nursing.

I acknowledge receipt of the current Student Handbook (date appears at the bottom of this page) that includes Social Media by Nurses and Differentiated Essential Competencies of Graduates. I have received information on eligibility, Petition for Declaratory Order, and application for licensure. I have reviewed and understood all the policies included in this Student Handbook.

---

Student's signature

---

Student's name printed

---

Today's Date



### Testing/Computer Room Acknowledgement

- No personal items, including cellular phones, hand-held computers/personal digital assistants (PDAs) or other electronic devices, pagers, watches, wallets, purses, hats (and other head coverings unless previously approved), bags, coats/jackets/sweaters, books, and notes are allowed in the testing room.
- You must store all personal items in the provided containers. Cell phones, pagers or other electronic devices must be turned off before storing them in a locker/bin, if provided to you.
- TCSPP is not responsible for lost, stolen or misplaced personal items.
- Before you enter the testing room, the test administrator will provide you with a dry erase board and marker, if needed. You are to arrive with only a standard calculator. Scientific calculators are not allowed.
- You may not remove the dry erase board and marker from the testing room at any time during the exam, and you must return them to the test administrator after the exam.
- You may not write on the dry erase board and marker until after the exam has started.
- You will start the exam only when instructed to do so.
- Please remain in your assigned seat at all times.
- Eating, drinking, chewing gum, smoking, sleeping, and making noises that create a disturbance for other test-takers are prohibited during the exam.
- To ensure a high level of security throughout your testing experience, you will be monitored at all times.
- If you need to exit the testing room for any reason, the exam may be submitted for grading.
- If you experience hardware or software problems or distractions that affect your ability to take the exam, notify the administrator immediately by raising your hand.
- If you have other questions or concerns, raise your hand and the administrator will assist you as long as other candidates are not disturbed. The administrator cannot answer questions related to exam content.
- Do not leave any items at your testing workstation and clean the area before leaving.
- You may not record or remove copies of exam questions and answers from the testing center and may not share or discuss the questions or answers seen in your exam with other students.
- If you do not follow the above rules, if you tamper with the computer or if you are suspected of cheating, appropriate action will be taken. This may include invalidation of your exam results.

I understand the information provided above and agree to follow the Rules. If I do not follow the Rules or I am suspected of cheating or tampering with the computer, this will be reported to the Nursing administration and my exam may be invalidated, receive a grade of zero, and any further actions as deemed necessary from nursing administration, including up to dismissal from the program.

\_\_\_\_\_  
Printed Name  
Date Signed: \_\_\_\_\_

\_\_\_\_\_  
Signed Name

Faculty/CON Administrator Signature: \_\_\_\_\_



## Simulation/Skills Lab Policy

### Introduction

This state-of-the-art laboratory contains realistic adult, infant and child manikins. Some manikins are computer controlled to present a myriad of physiological states to give the student a realistic and authentic learning experience. Each student is expected to fully participate in all aspects of the laboratory and skills training experience.

### Purpose of Lab:

The Nursing Lab is an integral component of the nursing curriculum and student success TCSPP. Students utilize the Nursing Lab to practice and “sign-off” on required nursing skills prior to the field clinical experience throughout the program. Students are encouraged to use the Nursing Lab at any point in the program to practice previously learned skills with pre-approved permission.

### Guidelines for Using the Lab:

1. Review the Nursing Skills Assignment Sheet to identify the particular skill or skills to be practiced, demonstrated, and signed off on and bring the paperwork for the skill during this time.
2. View and complete all assigned reading and/or video clips and/or interactive learning programs prior to coming to the Nursing Lab for practice.
3. You will be required to demonstrate each skill on the Nursing Skills Sheet and “sign-off” that you satisfactorily practiced each skill with Lab Personnel or course faculty.
4. Performance of the skill will be rated as satisfactory or unsatisfactory. You must demonstrate a skill satisfactorily before being allowed to perform the skill in the clinical area.
5. If a student is not prepared or performs a skill unsatisfactorily, the student will be required to review and practice the skill(s) until it is rated satisfactorily. Additional practice to enhance the skill will be completed with each student’s assigned Clinical Instructor in the clinical area. However, if the skill is not satisfactorily met, this may result to a “Road to Success” referral to meet with the Lab/Clinical Skills Coordinator.

### Hours of Operation:

The Nursing Lab is open during business hours and Saturday for weekend nursing programs, for independent student use except when the school is closed during summer vacation, holidays, inclement weather closings or when a class is utilizing the Nursing Lab. Permission to use the lab is needed from the program chair, faculty supervising clinical training, Dean of Nursing or

clinical manager prior to a student being present in the lab. Failure to do so may result in a disciplinary warning or dismissal from the program.

## **Simulation**

Simulation case scenarios in the simulation laboratory involves active participation for all students. Manikins are to be used with respect and treated as if they are live patients. The simulation lab is a learning environment. Situations simulated in the lab are to be used as a learning tool and no discussion of the actions of students should take place outside of the lab. A debriefing session will be provided for all simulation experiences. Upon exiting the lab, students should clean up manikins and other debris used for the training experience.

## **Confidentiality**

In order to preserve the realism of the scenarios used in the Lab and to provide an equitable learning experience for each student, all persons using the Lab will be required to sign a confidentiality agreement (see attached copy of confidentiality agreement). The scenarios are not to be discussed outside of the simulation and debriefing sessions. This is to protect the value of the experience for those who will eventually take part in the clinical scenarios. If the student discloses any simulation information, it is considered cheating and the student will receive a failing grade for the simulation, may be excluded from any further simulation experiences and may be subject to disciplinary action outlined in the Student Handbook. Students are expected to uphold all requirements of the Health Insurance Portability and Accountability Act (HIPAA). Students agree to report any violations to the faculty or instructor.

## **Lab Equipment**

1. When working in the simulation lab, students must wash their hands upon entering with soap and water.
2. Always use gloves when working with mannequins or task trainers.
3. Supplies and equipment must not be taken out of the lab unless requested and signed out by an instructor.

4. The medical and disposable equipment within the center should never be used for clinical purposes. However, it should be treated with the same safety precautions employed with actual clinical equipment.
5. Equipment should be disposed of appropriately. (sharp's containers, trash cans)
6. Computers and video equipment are for class purposes only.
7. There may come a time that equipment might get broken or become missing. It is your responsibility, as a student of the TCSPP nursing program to report it to an instructor. If the equipment is maliciously damaged, the student will be responsible for replacement of said equipment and could be academically withdrawn from the program. Please handle all equipment with appropriate care.
8. Please always treat the Nursing Lab with professionalism.
9. At the end of the scenario, students must return all equipment and supplies to the proper location.
10. Beds should be remade and left in the lowest position with the bed rails up.
11. No Betadine will be used on mannequins. (Stains mannequin)
12. No ink pens or markers to be used on mannequins or task trainers.

## Conduct

Students shall approach all simulators and actors as if they were in a clinical setting. Students will not only be measured on their clinical judgment and application of required skills but also on their ability to show empathy, respect, integrity and diplomacy towards everyone involved in the learning experience. At no time shall a student behave in a manner that disrupts the other students learning environment. Any viewing or publication outside of the classroom, such as posting on YouTube or other social media sites, is unacceptable and unethical and will result in disciplinary action.

## Student Conduct/Behavior

1. All users of the lab space must act in a manner that does not disturb the academic activities occurring in the lab.
2. No lab user shall infringe upon the privacy, rights, privileges, health, or safety of other lab users.
3. No eating or drinking is allowed in the lab.
4. Do not use the equipment for any purpose other than specified; anyone who fails to comply with this request will be asked to leave the center.

5. Adherence to the dress code, as mentioned in a student program handbook expected unless otherwise directed by faculty.
6. Do not remove the manikin from the bed unless instructed to do so.
7. Do not disconnect or move the patient simulators.
8. Remember that even though you are in a simulated environment you are to conduct yourself as if you were at a clinical site.
9. Always bring your skills supply bag on skill's day otherwise instructed by the faculty.

### **Makeup of Missed Skills/Simulation Training**

The student must demonstrate the skills check-off satisfactorily on the scheduled day.

If a student is absent on scheduled day due to a reason as approved in the student handbook for clinical, it requires submitting the document within five days of the scheduled date to [lvnreschedule@thechicagoschool.edu](mailto:lvnreschedule@thechicagoschool.edu) or [adnreschedule@thechicagoschool.edu](mailto:adnreschedule@thechicagoschool.edu) email, program chair and clinical manager.

You are allowed ONCE for skills makeup after the missed skill (skills check off). You are not allowed to reschedule it again in any circumstances.

e.g., A student missed the vitals skill checkoff on date 5/22 due to their own hospitalization, submitted the document within five days and rescheduled the skill on 5/28. Student is accountable to come prepared with skills supplies, paperwork, and skills demonstration satisfactorily. If student fails to do so, no more opportunity will be provided.

If you missed two skills check off such as vitals and nasopharyngeal suctioning, you need to demonstrate both the skills satisfactorily in 30 minutes skills makeup time (e.g., 9am to 9: 30 am).

If you miss more than two skills check off or scheduled re-check appointments, there will be no further opportunity to have any skills makeup during the semester.

## CONFIDENTIALITY AGREEMENT

For the Simulation Laboratory

As a patron of the Simulation Laboratory, I understand the rules and expectations of using the training labs and makeup policy for missed skills. I also understand the significance of confidentiality with respect to information concerning simulated patients and fellow students. I will uphold the requirements of the Health Insurance Portability and Accountability Act (HIPAA). I agree to report any violations of the skills lab and confidentiality that I become aware of to my faculty. I have received and understand the TCSPP of Nursing Simulation Laboratory Policies. I further acknowledge that failure to comply with the Simulation Laboratory rules will result in disciplinary actions up to and including being dismissed from the program.

Signature

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Printed Name

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Date 

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