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INTRODUCTION
The Associate Degree Nursing (ADN) Program at Central Texas College has been preparing individuals to enter the field of nursing since the Fall semester, 1968. We have over 2,000 graduates who are working in many places around the world and are making a valuable contribution to quality health care. We welcome you as you begin the journey to join their ranks and wish you well during the four semesters of study.

The CTC ADN program is approved by the Texas Board of Nursing and accredited by the Accreditation Commission for Education in Nursing, Inc. (ACEN). After successful completion of the ADN program, a student is eligible to take the licensing exam (NCLEX-RN®) to become a Registered Nurse.

This Student Handbook has been prepared to provide guidance as you enter and progress through the Nursing Program and is to serve as an adjunct to the college catalog and CTC Student Handbook. Keep all three and refer to them often.

INSTITUTIONAL MISSION STATEMENT

Central Texas College’s accessible education supports student success and employability.

STATEMENT ON HARASSMENT AND DISCRIMINATION

Central Texas College is committed to providing an educational and work climate that is conducive to the personal and professional development of each individual. Faculty, staff, and students should be aware that discrimination and harassment on the basis of race, color, religion, gender, national origin, age, disability, or veteran status of individuals or any other sub groups stereotyping or grouping within the college community is unacceptable. Central Texas College also strives to protect the rights and privileges and to enhance the self-esteem of all its members.

If you believe you have experienced harassment or discrimination, contact the appropriate office where you attend. Students should contact the Director of Student Life at (254) 526-1258. Faculty and staff should contact the Human Resources Department at (254) 526-1128.

AMERICANS WITH DISABILITIES ACT

The Americans with Disabilities Act (ADA) is a federal anti-discrimination statute that provides comprehensive civil rights protection for persons with disabilities. This legislation requires that all students with disabilities be guaranteed a learning environment that provides equal access to all programs and services. If you believe you have a need for accommodations, please contact the Disability Support Services Office at (254) 526-1195, in Building 111, Room 207.
The Chain of Command to follow for student concerns and issues: Course faculty, Level Leader/Semester Coordinator, Nursing Programs Coordinator, Assistant Chair, and then Chair, Department of Nursing. Appointments may be made with the VN faculty by directly contacting the faculty member.
Philosophy & Mission of the ADN Program

**Department of Nursing Mission Statement**
In the Department of Nursing (DON), we provide quality nursing education to the global and local community through an accessible learning environment.

**Associate Degree Nursing Program Philosophy**
In accordance with the philosophy of Central Texas College and the Department of Nursing Philosophy, the Associate Degree Nursing faculty believes:

Nursing is a process which applies knowledge from scientific and humanistic theories in a unique way to the patient’s attainment of wellness while maintaining the worth and dignity of the individual.

- Nursing provides a contribution to society by addressing the spiritual, cultural, racial, and ethnic diversity of individuals and communities.
- Through the use of a systematic problem-solving process, nursing assists individuals to determine, attain, and maintain the optimum level of wellness permitted by their potential.
- Individuals have a right to quality health care but also have a responsibility to engage in health-promoting practices.

Nursing education, which takes place in institutions of higher education, is a sequence of learning experiences which fosters the application of scientific and evidenced-based nursing practice outcomes through a systematic problem-solving process while also addressing the art of nursing.

- Nursing education is organized using four concepts: Community, Caring, Communication, and Clinical Reasoning.
- It offers programs that are student centered, reflect increases in the body of knowledge in the profession as well as changes in technology and economy, and are revised and improved continuously.
- Nursing education is delivered through a variety of methods to include distance education.
- It is outcome directed and mutually interactive between faculty and students.
- The responsibility of the teacher is planning, selecting, organizing, sequencing, implementing and evaluating the program and assessing, guiding, and evaluating the learners.
- Learning experiences are organized in a curriculum addressing the needs of a diverse community of patients.
- Learning is the responsibility of the student and should be characterized by critical thinking, and systematic decision-making.

The practice of the Associate Degree Nursing graduate is defined by four roles: Member of the Profession, Provider of Patient-Centered Care, Patient Safety Advocate, and Member of the Health Care Team. (Differentiated Essential Competencies of Graduates of Texas Nursing Programs – DECs)

- As a member of a profession, the graduate is responsible to function within the ethical and legal scope of practice, assume responsibility and accountability for quality nursing care, participating in professional activities to promote development and practice of professional
nursing, and demonstrate life-long responsibility for continued competence in nursing practice.

- As a provider of patient-centered care, the graduate nurse must use clinical reasoning and nursing science as a basis for decision-making, follow a systematic process in providing comprehensive health assessment for a culturally, ethnically, and socially diverse patient population, be accountable for the plan of care, and be committed to the value of caring.

- As a patient safety advocate, the graduate demonstrates knowledge of rules and regulations governing safety requirements and standards to provide a safe environment for self and patients, and uses evidence-based data/measures to prevent harm.

- As a member of the health care team, the graduate coordinates, collaborates, and communicates with patients, families, and the interdisciplinary health care team to facilitate comprehensive care, advocates for optimal health status of patients and their families, manages patient information via technology and maintains confidentiality, and delegates care appropriately with supervision.
ADN Curriculum Organizing Conceptual Framework

The Central Texas College Associate Degree Nursing Program faculty has chosen four concepts: Caring, Clinical Reasoning, Communication and Community; and

Five Conceptual Threads - Functional Health Patterns, Legal/Ethical Issues, Systematic Process, Interdisciplinary Collaboration, Professional Socialization - to form the basis of the curriculum.

The Four C’s Defined:

- **CARING** is an altruistic principle involving respect and dignity that forms the basis of actions on behalf of another.
  - Placing self and others in high regard
  - Involves both positive and negative feedback
  - Implies the attributes of empathy, respect, trust, honesty, and responsibility
  - Enhances learning in the educational environment through grounding of professional values.
  - The attitudinal basis of nursing and of the educational process.
COMMUNICATION is a process whereby individuals or groups exchange ideas, feelings and opinions.

- Requires a sender, a receiver and a message (either verbal or nonverbal)
- Can be either effective or ineffective
- Faculty and students want to communicate effectively
- Effective communication enhances learning
- To meet differing learning needs, a variety of teaching methods must be employed
- Transcends the time/space continuum
- Is present in all interactions
- Via computers or other AV methods has the potential to be effective
- For one to be successful, one must be able to communicate effectively

COMMUNITY is an environment in which ADN students can deliver care to individuals and families in a community setting.

- Is an environment with differing boundaries
- Members are affected by multiple variables, for example age, culture, race, ethnicity, political group, diagnosis, etc.
- Defines the scope of nursing practice
- Influences decision making in education and health care
- Formal education takes place within a community
- May include non-human components
- Members exist on a health continuum
- Members may require assistance with health maintenance

CLINICAL REASONING in nursing is a complex cognitive process that uses formal and informal thinking strategies to gather and analyze patient information, evaluate the significance of the information and weigh alternative actions which result in prudent nursing decisions leading towards safe patient care.

- An individual can and must be taught clinical reasoning in this curriculum
- Is fundamental to the systematic process, which includes assessment, analysis, planning, implementation, and evaluation.
- Clinical reasoning in the novice develops into intuitive thinking in the expert
- All students that meet the entrance criteria for the AD nursing program are capable of developing clinical reasoning skills
- Faculty will teach clinical reasoning through a variety of methods


I. Program Goals
1. The goal of the Associate Degree Nursing Program is to prepare graduates who are eligible for licensure and are:
   a. Initially successful on the NCLEX-RN®.
   b. Able to provide competent, caring nursing care in a variety of community settings.
   c. Able to utilize communication and critical thinking.
   d. Committed to personal and professional development.

II. Program Outcomes
1. Program Completion
2. NCLEX-RN® Performance
3. Job placement rates
4. Program Satisfaction: Graduate and Employer

III. Strategies for Enhancement

Data will be collected in an on-going process and will be analyzed each Fall and Spring by the Faculty Organization, under the leadership of the Department Chair. Discussion of the data will be recorded in the ADN curriculum committee minutes along with any changes made that were indicated by the data.

Outcomes:

1. Student retention rate will be 85% in 150% of the program time.
2. The annual NCLEX-RN® pass rate for first time takers will be at least equal or above the National Mean.
3. At least 85% of graduates surveyed will be employed in nursing.
4. a. Graduates will rate satisfaction with the program at least "3" on a 5 point scale with 5 being the highest and 1 the lowest. b. 80% of responding Employers will indicate satisfaction with graduate preparation.

IV. Program Objectives

Third Level: Semester Four

Upon completion of the third level and the program, the student will act as:

I. Member of a 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, practice setting, ADN program and CTC.
B. Assumes 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 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 within the regional, national, and global community based upon interpretation of comprehensive health assessment findings compared with evidence-based health data derived from the diploma or associate degree nursing program.
C. Analyze assessment data to identify problems, formulate goals/outcomes, and develop plans of care for up to 5 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 across the life span and their families through abroad array of health care services.
E. Implement the plan of care for up to 5 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 for patients throughout the life-span.
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 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.
C. Formulate goals and outcomes using evidence based data to reduce patient risks.
D. Obtain instruction, supervision, or training from faculty or preceptor as needed when implementing nursing procedures or practices.
E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.
F. 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 and clinical faculty 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, and clinical faculty to promote and maintain optimal health status of patients and their families.
E. Communicate by documenting and managing information using technology to support decision making to improve patient care.
F. Assign and 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.

Second Level: Semester Two and Three

Upon completion of the second level, the student will act as:

I. Member of a 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, practice setting, ADN program and CTC.
   B. Demonstrates responsibility and accountability for the quality of nursing care provided to patients and their families.
   C. Participate in activities that demonstrate development and practice of professional nursing.
   D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection and self-care.

II. Provider of Patient-Centered Care
   A. Demonstrate clinical reasoning and knowledge based on study and evidence-based practice outcomes as a basis for decision making in nursing practice.
   B. Identify 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.
   C. Examine assessment data to identify problems, formulate goals/outcomes, and develop plans of care one to three 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, holistic nursing care to patients across the life span and their families through a broad array of health care services.
   E. Implement the plan of care for one to three 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 utilizing evidence-based practice, and plan follow-up nursing care for patients throughout the life-span.
   G. Develop, implement, and evaluate teaching plans for patients and their families to address health promotion, maintenance, and restoration.
   H. Determine and specify human, information, and material resources in providing care for patients and their families.
III. Patient Safety Advocate
A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety standards.
B. Implement measures to promote quality and a safe environment for patients, self, and others.
C. Formulate goals and outcomes using evidence based data to reduce patient risks.
D. Obtain instruction, supervision, or training from faculty when implementing nursing procedures or practices.
E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.
F. Accept assignments and tasks that take into consideration patient safety and organizational policy.

IV. Member of the Health Care Team
A. Collaborate, and communicate with patients, their families, and the interdisciplinary health care team and clinical faculty to plan, deliver, and evaluate patient-centered care.
B. Serve as a health care advocate in promoting quality and 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, and clinical faculty to promote and maintain optimal health status of patients and their families.
E. Communicate by documenting and reporting information using technology to support decision making to improve patient care.

First Level: Semester One
Upon completion of the first level, the student will act as:

I. Member of a 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, practice setting, ADN program and CTC.
B. Demonstrates responsibility for the quality of nursing care provided to patients and their families.
C. Participate in activities that demonstrate professional nursing.

II. Provider of Patient-Centered Care
A. Develop clinical reasoning processes and knowledge based on study and evidence-based practice outcomes as a basis for decision making in nursing practice.
B. Recognize the physical and mental health status, needs, and preferences of culturally, ethnically, and socially diverse patients and their families.
C. Complete assessment data for one patient to identify problems, formulate goals/outcomes, and develop a plan of care for a patient and their family using information from evidence-based practice.
D. Provide safe, compassionate, comprehensive nursing care to the geriatric patient and their family.
E. Implement the plan of care for one adult patient and their family within legal, ethical, and regulatory parameters.
F. Report patient outcomes and responses to therapeutic interventions.
G. Construct a teaching plan for a patient to address health promotion, maintenance, and restoration.

III. Patient Safety Advocate
A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety.
B. Implement measures to promote quality and a safe environment for patients, self, and others.
C. Formulate goals and outcomes using evidence based data to reduce patient risks.
D. Obtain instruction, supervision, or training from faculty when implementing nursing procedures or practices.
E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.
F. Accept assignments and tasks that take into consideration patient safety and organizational policy.

IV. Member of the Health Care Team
A. Communicate with patients, their families, and the interdisciplinary health care team and clinical faculty to plan, deliver, and evaluate patient-centered care.
B. Refer patient to resources that facilitate continuity of care and ensure confidentiality.
C. Communicate and collaborate in a timely manner with members of the interdisciplinary health care team, and clinical faculty to promote and maintain optimal health status of patients and their families.
D. Communicate by documenting and reporting information using technology to support decision making to improve patient care.
Secretary’s Commission on Achieving Necessary Skills (SCANS)

The Secretary’s Commission on Achieving Necessary Skills (SCANS), U.S. Department of Labor, was formed “to encourage a high-performance economy characterized by high skills, high-wage employment”. Representatives from education, business, labor, and government identified the five competencies and three part foundations of skills that are necessary in the workplace. Alphanumeric coding used throughout course syllabi denotes the integration of SCANS occupational competencies and are identified with C1-20 and F1-17 in bold print.

The SCANS competencies are:
1. Resources: Identifies, organizes, plans, and allocates resources.
   Time, money, material and Facilities and Human Resources. (C1-C4)
2. Information: Acquires and uses information.
   Acquires and evaluates information, organizes and maintains information, interprets and communicates information and uses computers to process information. (C5-C8)
3. Interpersonal: Works with others.
   Participates as a member of a team, teaches others new skills, services clients, exercises leadership, negotiates and works with diversity. (C9-14)
   Understands systems, monitors and corrects performance, improves or designs systems. (C15-17)
5. Technology: Works with a variety of technologies.
   Selects technology, applies technology to task, maintains and troubleshoots equipment. (C18-20)

The three-part foundation of skills and personal qualities are:
1. Basic Skills: Reads, writes, performs arithmetic and mathematical operations, listens and speaks. (F1-F6)
2. Thinking Skills: Thinks creatively, makes decisions, solves problems, visualizes, knows how to learn and reasons. (F7-F12)
3. Personal Qualities: Displays responsibility, self-esteem, sociability, self-management, integrity, and honesty. (F13-F17)

SCANS OCCUPATIONAL COMPETENCIES

Resources: Identifies, organizes, plans, and allocates resources.
C1 Time: Selects goal-relevant activities, ranks them, allocates time, and prepares and follows schedules.
C2 Money: Uses or prepares budgets, makes forecasts, keeps records, and makes adjustments to meet objectives.
C3 Materials and Facilities: Acquires stores, allocates, and uses materials or space efficiently.
C4 Human Resources: Assesses skills and distributes work accordingly, evaluates performance, and provides feedback.

Information: Acquires and uses information.
C5 Acquires and evaluates information.
C6 Organizes and maintains information.
C7 Interprets and communicates information.
C8 Use computers to process information.
Interpersonal: Works with others.
C9 Participates as a member of a team: Contributes to group effort.
C10 Teaches other new skills.
C11 Serves Clients/Customers: Works to satisfy customer’s expectations.
C12 Exercises Leadership: Communicates ideas to justify position, persuades and convinces others, responsibly challenges existing procedures and policies.
C13 Negotiates: Works toward agreements involving exchange of resources; resolves a divergent interest.
C14 Works with Diversity: Works well with men and women from diverse backgrounds.
C15 Understands Systems: Knows how social, organizational, and technological systems work and operates effectively with them.
C16 Monitors and Corrects Performance: Distinguishes trends, predicts impacts on system operations, diagnoses system’s performance, and corrects malfunctions.
C17 Improves or Designs Systems: Suggests modifications to existing systems and develops new or alternative systems to improve performance.

Technology: Works with a variety of technologies.
C18 Selects Technology: Chooses procedures, tools, or equipment, including computers and related technologies.
C19 Applies Technology to Task: Understands overall intent and proper procedures for step and operation of equipment.
C20 Maintains and Troubleshoots Equipment: Prevents, identifies, or solves problems with equipment, including computers and other technologies.

FOUNDATION SKILLS
Basic Skills: Reads, writes, performs arithmetic and mathematical operations, listens, and speaks.
F1 Reading: Locates, understands, and interprets written information in prose and in documents such as manuals, graphs, and schedules.
F2 Writing: Communicates thoughts, ideas, information, and messages in writing; creates documents such as letters, directions, manuals, reports, graphs, and flowcharts.
F3 Arithmetic: Performs basic computations; uses basic numerical concepts such as whole numbers etc.
F4 Mathematics: Approaches practical problems by choosing appropriately from a variety of mathematical techniques.
F5 Listening: Receives, attends to, interprets, and responds to verbal messages and other cues.
F6 Speaking: Organizes ideas and communicates orally.

Thinking Skills: Thinks creatively, makes decisions, solves problems, visualizes, knows how to learn, and reasons.
F7 Creative Thinking:Generates new ideas.
F8 Decision Making: Specifies goals and constraints, generates alternatives, considers risks, and evaluates and chooses best alternative.
F9 Problem Solving: Recognizes problems and devises and implements plan of action.
F10 Seeing Things in the Mind’s Eye: Organizes and processes symbols, pictures, graphs, objects, and other information.
F11 Knowing How to Learn: Uses efficient learning techniques to acquire and apply new knowledge and skills.
F12  Reasoning: Discovers a rule or principle underlying the relationship between two or more objects and applies it when solving a problem.

Personal Qualities: Displays responsibility, self-esteem, sociability, self-management, integrity, and honesty.
F13  Responsibility: Exerts a high level of effort and perseveres towards goal attainment.
F14  Self-Esteem: Believes in own self-worth and maintains a positive view of self.
F15  Sociability: Demonstrates understanding, friendliness, adaptability, empathy, and politeness in group settings.
F16  Self-Management: Assesses self accurately, sets personal goals, monitors progress, and exhibits self-control.
F17  Integrity/Honesty: Chooses ethical courses of action.
Differentiated Essential Competencies of Graduates of Texas Nursing Programs (DECs)

Evidenced by Knowledge, Clinical Judgments, and Behaviors- 2010

Background:
The Differentiated Essential Competencies (DECs) is the third generation of Texas Board of Nursing (BON or Board) education competencies with differentiation based upon the education outcomes of the three levels of pre-licensure nursing education programs. Previous documents were approved in 2002 (Differentiated Entry Level Competencies) and 1993 (Essential Competencies). All revisions were developed within the BON Advisory Committee for Education (ACE) with input from nursing programs, nursing organizations, affiliating agencies, employers, and other stakeholders. The 2010 revision incorporates concepts from current literature, national standards, and research.

Purpose:
The DECs were designed to provide guidance to nursing education programs for curriculum development and revision and for effective preparation of graduates who will provide safe, competent, compassionate care. The DECs outline knowledge, clinical behaviors, and judgments necessary to meet the essential competencies, but it is acknowledged that not all competencies can be evaluated upon graduation. It is intended that the graduate will have received the educational preparation to demonstrate each competency, but it will not be reasonable to evaluate some advanced competencies (italicized and identified by an asterisk) until the nurse has transitioned into nursing practice.

Definition of Competency:
The American Nurses Association (2008) defined a competency as an expected level or performance that integrates knowledge, skills, abilities, and judgment (p. 3).

Outline of the DECs:
Twenty-five core competencies are categorized under four main nursing roles:
- Member of the Profession
- Provider of Patient-Centered Care
- Patient Safety Advocate
- Member of the Health Care Team

Each core competency is further developed into specific knowledge areas and clinical judgments and behaviors based upon the knowledge areas. Redundancy is intentional so that sections of the document related to a specific educational level can be separated yet remain complete as a stand-alone document. Competencies for each level of educational preparation are presented in a table format. The competencies are differentiated and progressive across the levels, and the scope of practice and expectations may be compared across the table.

Implications of the DECs:
Nursing Education:
- Guideline and tool for curriculum development and revision
- Tool for benchmarking and evaluation of the program
- Statewide standard to ensure graduates will enter practice as safe and competent nurses

Employers:
- Guide for development of employee orientation and internship programs
- Guide for job descriptions and career ladders
- Information for determining entry level competencies
- Information for reviewing and revising policies and procedures for nursing care
CENTRAL TEXAS COLLEGE
Associate Degree Nursing Program

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

I Member of the Profession (MOP): A licensed nurse (RN) who exhibits behaviors that reflect commitment to the growth and development of the role and function of nursing consistent with state and national regulations and with ethical and professional standards; aspires to improve the discipline of nursing and its contribution to society; and values self-assessment and the need for lifelong learning.

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.

Knowledge
1. Texas Nursing Practice Act.
2. Texas Board of Nursing Rules, Position Statements, and Guidelines.
3. Federal, state, or local laws, rules, and regulations affecting nursing practice.
4. Nursing scope of practice in relation to delegated medical acts and facility policies.
5. Standards and guidelines from professional organizations.
6. Facility policies and procedures.

Clinical Judgments and Behaviors
1. Function within the scope of practice of the registered nurse.
2. Use a systematic approach to provide individualized, goal-directed nursing care to meet health care needs of patients and their families.
3. Practice according to facility policies and procedures and participate in the development of facility policies and procedures.
4. Question orders, policies, and procedures that may not be in the patient’s best interest.

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

Knowledge
1. Texas Board of Nursing Standards of Practice.
4. Models of ethical decision making.
5. Advocacy process.
7. Issues affecting the registered nurse role and the delivery of culturally-sensitive care to patients and their families.
8. Continuing competency and professional development.
9. Self-evaluation, staff evaluation, and peer evaluation processes.
10. Employment setting policies and procedures.
11. Methods for the development of policies and procedures.
12. Professional characteristics and values such as altruism, human dignity, truth, justice, freedom, equality, and esthetics.
13. Aspects of professionalism including attention to appearance and demeanor.
14. Communication techniques and management skills to maintain professional boundaries.
15. Principles of quality improvement and basic outcome measurement in health care organizations.
Clinical judgments and behaviors
1. Pass the Nursing Jurisprudence Examination before licensure.
2. Provide nursing care within the parameters of professional nursing knowledge, scope of practice, education, experience, and ethical/legal standards of care.
3. Evaluate care administered by the interdisciplinary health care team.
4. Advocate for standards of practice through professional memberships.
5. Practice nursing in a caring, nonjudgmental, nondiscriminatory manner.
6. Provide culturally sensitive health care to patients and their families.
7. Provide holistic care that addresses the needs of diverse individuals across the lifespan.
8. Use performance and self-evaluation processes to improve individual nursing practice and professional growth.
9. Evaluate the learning needs of self, peers, and others and intervene to assure quality of care.
10. Apply management skills in collaboration with the interdisciplinary health care team to implement quality patient care.
11. Assume accountability for individual nursing practice.
12. Promote accountability for quality nursing practice through participation on policy and procedure committees.
14. Follow established policies and procedures.
15. Question orders, policies, and procedures that may not be in the patient’s best interest.
16. Use nursing judgment to anticipate and prevent patient harm, including invoking Safe Harbor.
17. Use communication techniques and management skills to maintain professional boundaries between patients and individual health care team members.
18. Comply with professional appearance requirements according to organizational standards and policies.
19. Collaborate with interdisciplinary team on basic principles of quality improvement and outcome measurement.

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

Knowledge
1. Historical evolution of professional nursing.
2. Issues and trends affecting nursing practice, the nursing profession, and health care delivery.
3. The role of professional nursing organizations, regulatory agencies, and health care organizations.
4. Strategies to influence the public perception of nursing.
5. The evolving practice roles of professional nurses and their contributions to the profession.
6. Types of leadership.
7. Political processes to promote professional nursing practice.

Clinical judgments and behaviors
1. Analyze the historical evolution of professional nursing and the application to current issues and trends.
2. Promote collegiality among interdisciplinary health care team members.
3. Participate in activities individually or in groups through organizations that promote a positive image of the profession of nursing.
4. Collaborate with nursing colleagues and health care organizations to promote the profession of nursing.
5. Articulate the values and roles of nursing to the public.
6. Recognize roles of professional nursing organizations, regulatory agencies, and organizational committees.
7. Practice within the professional nursing role and Scope of Practice.
8. Serve as a positive role model for students, peers, and members of the interdisciplinary health care team.
9. Participate in activities that promote consumer awareness of nursing’s contribution to society.
D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.

Knowledge
1. Texas Board of Nursing rules for continuing competence.
2. Resources, tools, and processes to assess professional learning needs.
3. Lifelong learning opportunities to facilitate continuing competence (e.g., certifications and educational articulation/mobility).

Clinical judgments and behaviors
1. Participate in educational activities to maintain/improve competence, knowledge, and skills.
2. Participate in nursing continuing competency activities to maintain licensure.
3. Use self-evaluation, reflection, peer evaluation, and feedback to modify and improve practice.
4. Demonstrate accountability to reassess and establish new competency when changing practice areas.
5. Demonstrate commitment to the value of lifelong learning.

II Provider of Patient-Centered Care (PPCC): A licensed nurse (RN) who, based on educational preparation and scope of practice, accepts responsibility for the quality of nursing care and provides safe, compassionate nursing care using a systematic process of assessment, analysis, planning, intervention, and evaluation that focuses on the needs and preferences of patients and their families. The nurse incorporates professional values and ethical principles into nursing practice. The patients for LVNs and for Diploma and ADN educated RNs include individual patients and their families; the BSN-educated RN is also prepared to provide care to populations and communities.

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

Knowledge
1. A systematic problem-solving process in the care of patients and their families based on selected liberal arts and sciences, and evidence based practice outcomes.
2. Conceptual frameworks of nursing practice as a means of planning care and solving clinical problems in care of patients and families.
3. Priority setting based on patient health status and individual characteristics.
5. Application of current literature and/or research findings and evidence-based practice in improving patient care.

Clinical judgments and behaviors
1. Use clinical reasoning and nursing science as a basis for decision making in nursing practice.
2. Organize care based upon problem-solving and identified priorities.
3. Proactively manage priorities in patient care and follow-up on clinical problems that warrant investigation with consideration of anticipated risks.
4. Use knowledge of societal and health trends and evidence-based outcomes to identify and communicate patient physical and mental health care problems.
5. Apply relevant, current nursing practice journal articles and evidence-based outcomes from research findings to practice and clinical decisions.
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 associate degree nursing program of study.

Knowledge
1. Steps of a systematic approach, which includes assessment, analysis, planning, implementation, and evaluation.
2. Comprehensive nursing assessment of patients and their families.
3. Structured and unstructured data collection tools and techniques of assessment of patients and their families including interviewing.
4. Characteristics, concepts, and processes related to patients, including: anatomy and physiology; physical and psychosocial growth and development; pathophysiology and psychopathology; ethical reasoning; and cultural and spiritual beliefs and practices related to illness, birth, death and dying.
5. Cultural differences of patients across the lifespan and major needs of vulnerable patients.
6. Characteristics, concepts, and processes related to disease transmission, risk factors, preventive health practices and their implications for selected populations and community resources.
7. Disease processes, pharmacotherapeutics, and other therapies and treatments.
8. Introduction to established theories models and approaches that guide nursing practice.
9. Characteristics, concepts, and processes related to families, including family development, risk factors, family communication patterns, and decision-making structures. Functional and dysfunctional characteristics of families that impact health.
10. Application of clinical technology and use of nursing informatics in the delivery of safe patient care.
11. Introduction to complex and multiple healthcare problems and issues, including evidence-based complementary health care practices.
12. Political, economic, and societal forces affecting the health of individuals and their families.

Clinical judgment and behaviors
1. Use structured and unstructured data collection tools to obtain patient and family history in areas of physical, psychiatric/mental health, spiritual, cultural, familial, occupational, and environmental information, risk factors, and patient resources.
2. Perform comprehensive assessment to identify health needs and monitor changes in health status of patients and families.
3. Validate, report, and document comprehensive assessment data for patients and families, including physical and mental health status and needs for patients and their families.
4. Evaluate the use of safe complementary health care practices.
5. Identify complex multiple health needs of patients, with consideration of signs and symptoms of decompensation of patients and families.
6. Use clinical reasoning to identify patient needs based upon analysis of health data and evidence-based practice outcomes and communicate observations.
7. Perform health screening and identify anticipated physical and mental health risks related to lifestyle and activities for prevention.
8. Interpret and analyze health data for underlying pathophysiological changes in the patient’s status.
9. Incorporate multiple determinants of health when providing nursing care for patients and families.
10. Recognize that political, economic, and societal forces affect the health of patients and their families.
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.

Knowledge
2. Principles for recognizing functional and dysfunctional relationships.
3. Techniques of written, verbal, and nonverbal communication including electronic information technologies.
4. Principles of effective communication and the impact on nursing practice.
5. Principles of disease prevention, health promotion, education, and rehabilitation for patients.
6. Evidence-based clinical practice guidelines as a basis of interventions to support patients and their families throughout the lifespan, including end-of-life care.
7. Interdisciplinary collaboration.
8. Congruence of the relationships among the nursing plan of care, the therapeutic regimen, the plan of care of other interdisciplinary health care team members, and basic cost factors.
9. A systematic approach for problem-solving and decision-making for prioritizing and evaluating the plan of care.
10. Strategies for collaborative discharge planning.
11. Concepts from humanities and natural, social, and behavioral sciences applied to care planning for patients and their families.

Clinical judgments and behaviors
1. Integrate knowledge from general education and sciences for the direct and indirect delivery of safe and compassionate care for patients and their families.
2. Establish short- and long-term goals and outcomes, select interventions considering cultural aspects, and establish priorities for care in collaboration with patients, their families, and the interdisciplinary team.
3. Use current technology and evidence-based information to formulate and modify the nursing plan of care across the lifespan, including end-of-life care.
4. Assist with collection of data from direct patient care to redefine practice guidelines.
5. Collaborate with interdisciplinary team members to plan for comprehensive services for patients and their families.
6. Plan, implement, and evaluate discharge planning using evidence-based guidelines in collaboration with the interdisciplinary health care team.
7. Demonstrate fiscal accountability in providing care for patients and their families.
8. Demonstrate knowledge of disease prevention and health promotion in delivery of care to patients and their families.

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

Knowledge
1. Components of compassionate, patient-centered care.
2. Standards of Care; Standards of Practice; institutional policies and procedures for delivery of nursing care.
3. Professional ethics.
4. Professional characteristics and values such as altruism, human dignity, truth, justice, freedom, equality, and esthetics.
5. Nursing unit and staffing management.
7. Basis for determining nursing care priorities in patient care.
9. Scope of responsibilities and accountability for supervision and collaboration.
10. Principles of delegation, supervision, and collaboration including Texas Board of delegation rules.
11. Models and patterns of nursing care delivery.
12. Channels of communication for decision making processes within work settings.
13. Principles of decision making.

Clinical judgments and behaviors
1. Assume accountability and responsibility for nursing care provided within the professional scope of practice, standards of care, and professional values.
2. Identify priorities and make judgments concerning the needs of multiple patients in order to organize care.
3. Anticipate and interpret changes in patient status and related outcomes.
4. Communicate changes in patient status to other providers.
5. Manage priorities and multiple responsibilities to provide care for multiple patients.
6. Implement plans of care for multiple patients.
7. Collaborate within and across health care settings to ensure that healthcare needs are met, including primary and preventive health care.
8. Manage care for multiple patients and their families.
9. Apply management skills to assign and/or delegate nursing care to other members of the nursing team.

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 health lifestyles.

Knowledge
1. Health practices and behaviors and early manifestations of disease in patients and their families related to their developmental level, gender, culture, belief system, and the environment.
3. Patterns and modes of therapeutic and nontherapeutic communication, delegation, and collaboration.
4. Rights and responsibilities of patients related to health care and advocacy.
5. Advocacy for health promotion for patients and their families.
6. Physiological, psychiatric, and mental health aspects of nursing interventions.
7. Approaches to comprehensive healthcare, including health promotion and preventive practices for patients and families.
8. Principles and factors that contribute to the maintenance or restoration of health and prevention of illness.
9. Principles and rationale underlying the use, administration, and interaction of pharmacotherapeutic and psychopharmacotherapeutic agents using evidence-based outcomes which impact patients’ responses.
10. Effects of misuse of prescription and nonprescription medications and other substances.
12. Code of ethics, ethical practices, and patient’s rights and framework for ethical decision making.
13. Legal parameters of professional nursing practice and health care.
14. Intra-disciplinary and interdisciplinary resources and organizational relationships including structure, function, and utilization of resources.
15. Key federal and state statutes and institutional policies regarding patient confidentiality.
17. Management of nursing informatics using principles of confidentiality.
18. Nursing interventions to implement plan of care, reduce risks, and promote health for patients and their families.
19. Clinical reasoning for patients and their families with complex health care needs using framework of knowledge derived from the diploma or associate degree nursing program of study.
Clinical judgments and behaviors
1. Implement individualized plan of care to assist patients and their families to meet physical and mental health needs.
2. Implement nursing interventions to promote health and rehabilitation.
3. Implement nursing care to promote health and manage acute and chronic physical and mental health problems and disabilities.
4. Assist patients and their families to learn skills and strategies to protect and promote health.
5. Adjust priorities and implement nursing interventions in rapidly-changing and emergency patient situations.
6. Participate with the interdisciplinary team to manage health care needs for patients and their families.
7. Communicate accurately and completely and document responses of patients to prescription and nonprescription medications, treatments, and procedures to other health care professionals clearly and in a timely manner.
8. Facilitate coping mechanisms of patients and their families during alterations in health status and end of life.
9. Apply evidence-based practice outcomes to support patient and family adaptation during health crises.
10. Collaborate with other health care providers with treatments and procedures.
11. Promote interdisciplinary team collaboration in carrying out the plan of care.
12. Seek clarification as needed.
13. Provide accurate and pertinent communication when transferring patient care to another provider.
15. Evaluate and clarify patient’s understanding of health care rights.
16. Encourage active engagement of patients and their families in care.
17. Use interdisciplinary resources within the institution to address ethical and legal concerns.
18. Use therapeutic communication skills when interacting with and maintaining relationships with patients and their families, and other professionals.
19. Apply current technology and informatics to enhance patient care while maintaining confidentiality and promoting safety.
20. Facilitate maintenance of patient confidentiality.
21. Demonstrate accountability by using independent clinical judgment and established clinical guidelines to reduce risks and promote health.
22. Provide nursing interventions safely and effectively using evidence-based outcomes.
23. Provide direct and indirect patient and family care in disease prevention and health promotion and/or restoration.

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.

Knowledge
1. Methods to evaluate health care processes and patient outcomes.
2. Factors indicating changes that have potential for life-threatening consequences based on knowledge including physiology, pathophysiology, and pharmacology.
3. Introduction to performance improvement concepts in patient care delivery.

Clinical judgments and behaviors
1. Report changes in assessment data.
2. Evaluate need to intervene to stabilize and prevent negative patient outcomes and/or to support end-of-life care.
3. Evaluate patterns of behavior and changes that warrant immediate intervention.
4. Use standard references to compare expected and achieved outcomes of nursing care.
5. Analyze patient data to compare expected and achieved outcomes for patient using evidence-based practice guidelines.
6. Communicate reasons and rationale for deviation from plan of care to interdisciplinary health care team.
7. Use nursing knowledge to recommend revisions of plan of care with interdisciplinary team.
8. Modify plan of care based on overt or subtle shifts in patient status and outcomes.
10. Evaluate and communicate quality and effectiveness of therapeutic interventions.
11. Collaborate with interdisciplinary health care team to evaluate plan of care and to promote quality and effectiveness of care.
12. Evaluate the effectiveness of nursing interventions based on expected patient outcomes; modify interventions to meet the changing needs of patients; and revise plan of care as a result of evaluation.

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

Knowledge
1. Lifespan development and sociocultural variables affecting the teaching/learning process.
2. Techniques for assessment of learning needs and factors affecting learning.
4. Methods and strategies to evaluate learning and teaching.
5. Resources that support patient health care knowledge, decision making, and self-advocacy.

Clinical judgments and behaviors
1. Assess learning needs of patients and their families related to risk reduction and health promotion, maintenance, and restoration.
2. Collaborate with the patient and interdisciplinary health care team to develop individualized teaching plans based upon developmental and health care learning needs.
3. Use best practice standards and other evidence based findings in developing and modifying teaching plans for patients and their families.
4. Develop and implement comprehensive teaching plans for health promotion, maintenance, and restoration and risk reduction for patients and their families with consideration of their support systems.
5. Evaluate learning outcomes of the patients and their families receiving instruction.
6. Modify teaching plans for health promotion and maintenance and self-care to accommodate patient and family differences.
7. Teach health promotion and maintenance and self-care to individuals and their families based upon teaching goals.
8. Provide patients and their families with the information needed to make choices regarding health.

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

Knowledge
1. Organizational mission, vision, and values as a framework for care and management.
2. Types of organizational frameworks of various health care settings.
3. Workplace safety consistent with current federal, state, and local regulations and guidelines.
4. Promoting a safe environment.
5. Key issues related to budgetary constraints impacting the use of resources.
6. Basic models of reimbursement.
7. Basic principles of management and communication within an organization.
8. Roles and responsibilities of members of the interdisciplinary health care team.
Clinical judgments and behaviors
1. Identify and participate in activities to improve health care delivery within the work setting.
2. Report the need for corrective action within the organization for safe patient care.
3. Collaborate with interdisciplinary health care team to select human and materiel resources that are optimal, legal, and cost effective to achieve patient-centered outcomes and meet organizational goals.
4. Use basic management and leadership skills, act as a team leader, supervise and delegate care, and contribute to shared goals.
5. Use management skills to delegate to licensed and unlicensed personnel.
6. Demonstrate leadership role in achieving patient goals.
7. Implement established standards of care.

III Patient Safety Advocate (PSA): A licensed nurse (RN) who promotes safety in the patient and family environment by: following scope and standards of nursing practice; practicing within the parameters of individual knowledge, skills, and abilities; identifying and reporting actual and potential unsafe practices; and implementing measures to prevent harm. The BSN-educated RN is also prepared to be a patient safety advocate for populations and communities.

A. Demonstrate knowledge of the Texas Nursing Practice Act 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.

Knowledge
1. Texas Nursing Practice Act and Texas Board of Nursing rules.
2. National Standards of Nursing Practice.
3. Federal, state, and local government and accreditation organizations’ safety requirements and standards.
4. Facility policies and procedures.
5. Facility licensing agency or authority standards.
6. Principles of quality improvement and outcome measurement in health care organizations.

Clinical judgments and behaviors
1. Attain licensure.
2. Practice according to Texas Nursing Practice Act and Texas Board of Nursing rules.
3. Seek assistance if practice requires behaviors or judgments outside of individual knowledge and expertise.
4. Use standards of nursing practice to provide and evaluate patient care.
5. Recognize and report unsafe practices.
6. Manage personnel to maintain safe practice including participation in quality improvement processes for safe patient care.
7. Participate in peer review.

B. Implement measures to promote quality and a safe environment for patients, self, and others.

Knowledge
1. Principles of patient safety including safe patient handling.
4. Role in safety and risk management for patients and others.
5. Principles of a culture of safety including safe disposal of medications and hazardous materials.
6. Texas Board of Nursing rules related to mandatory reporting, Safe Harbor, and “Whistleblower” protection.
Clinical judgments and behaviors
1. Promote a safe, effective environment conducive to the optimal health and dignity of the patients and their families.
2. Accurately identify patients.
3. Safely perform preventive and therapeutic procedures and nursing measures including safe patient handling.
4. Safely administer medications and treatments.
5. Reduce patient risk related to medication administration and treatment based on evidenced-based data.
6. Clarify any order or treatment regimen believed to be inaccurate, non-efficacious, contraindicated, or otherwise harmful to the patient.
7. Document and report reactions and untoward effects to medications, treatments, and procedures and clearly and accurately communicate the same to other health care professionals.
8. Report environmental and systems incidents and issues that affect quality and safety, promote a culture of safety, and participate in organizational initiatives that enhance a culture of safety.
9. Use evidence-based information to participate in development of interdisciplinary policies and procedures related to a safe environment including safe disposal of medications and hazardous materials.
10. Assess potential risk for patient harm related to accidents and implement measures to prevent risk of patient harm resulting from errors and preventable occurrences.
11. Inform patients regarding their plans of care and encourage participation to ensure consistency and accuracy in their care.

C. Formulate goals and outcomes using evidence based data to reduce patient risks.

Knowledge
1. Principles of disaster preparedness and communicable disease prevention and control for patients and their families.
2. Current national and state standards and guidelines and local procedures for infection control.

Clinical judgments and behaviors
1. Formulate goals and outcomes using evidence-based data to reduce the risk of health care-associated infections.
2. Implement measures to prevent exposure to infectious pathogens and communicable conditions.
3. Anticipate risk for the patient.
4. Participate in development of policies to prevent exposure to infectious pathogens, communicable conditions, and occupational hazards.

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

Knowledge
1. Standards of Practice.
2. Texas Board of Nursing rules (including Scope of Practice), Texas Board of Nursing Position Statements and Guidelines.
3. Facility policies and procedures.

Clinical judgments and behaviors
1. Evaluate individual scope of practice and competency related to assigned task.
2. Seek orientation/training for competency when encountering unfamiliar patient care situations.
3. Seek orientation/training for competency when encountering new equipment and technology.
E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.

Knowledge
1. Standards of Practice.
2. Texas Board of Nursing rules, Position Statements and Guidelines.
3. Scope of Practice.
4. Facility policies and procedures.

Clinical judgments and behaviors
1. Report unsafe practices of healthcare providers using appropriate channels of communication.
2. Understand Safe Harbor rules and implement when appropriate.
3. Report safety incidents and issues to the appropriate internal or external individual or committee.
4. Participate in committees that promote safety and risk management.

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

Knowledge
1. Standards of Practice.
2. Texas Board of Nursing rules, Position Statements and Guidelines.
3. Scope of Practice.
4. Facility policies and procedures.

Clinical judgments and behaviors
1. Accept only those assignments that fall within individual scope of practice based on experience and educational preparation.
2. When making assignments and delegating tasks, ensure clear communication regarding other caregivers’ levels of knowledge, skills, and abilities.
3. When assigning and delegating nursing care, retain accountability and supervise personnel according to Texas Board of Nursing rules based on the setting to ensure patient safety.
4. Implement and participate in development of organizational policies and procedures regarding assignments and delegated tasks.

IV Member of the Health Care Team (MHCT): A licensed nurse (RN) who provides patient-centered care by collaborating, coordinating, and/or facilitating comprehensive care with an interdisciplinary/multidisciplinary health care team to determine and implement best practices for the patients and their families. The BSN-educated RN is also prepared to become a leader of the health care team as well as to provide care to populations and communities.

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

Knowledge
1. Structure, function, and interdisciplinary relationships within the health care delivery system.
2. Models of care delivery and roles of interdisciplinary health care team members.
3. Patterns and processes of effective communication and collaboration including assertiveness, negotiation, conflict resolution, and delegation.
4. Principles of change, team management, and leadership.
5. Roles of all levels of nursing and other health care professionals.
6. Patient advocacy and consumer rights and responsibilities.
7. Legal and ethical processes related to healthcare.
9. Methods of evaluation for continuous quality improvement.
Clinical judgments and behaviors
1. Involve patients and their families in collaboration with other interdisciplinary health care team members for planning health care delivery to improve the quality of care across the lifespan.
2. Use strategies of cooperation, collaboration, and communication to plan, deliver, and evaluate interdisciplinary health care.
3. Promote the effective coordination of services to patients and their families in patient-centered health care.
4. Apply principles of evidence-based practice and methods of evaluation with the interdisciplinary team to provide quality care to patients and their families.

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

Knowledge
1. Rights and responsibilities of patients regarding health care, including self-determination and right of refusal.
2. Current legal and societal factors that influence access to health care for patients and their families relating to safeguarding patient rights.
3. Individual responsibility for quality of nursing care.
4. Role of the nurse as advocate for patients and their families.
5. Role of organizational committees, peer review committees, nursing organizations, and community groups involved with improving the quality of health care for patients and families.
6. Knowledge of reliable online sites and other resources that provide quality health care data.
7. Role and responsibility for public safety and welfare, which may involve mandatory reporting.

Clinical judgments and behaviors
1. Support the patient’s right of self-determination and choice even when these choices conflict with values of the individual professional.
2. Apply legal and ethical principles to advocate for patient well-being and preference.
3. Identify unmet needs of patients and their families from a holistic perspective.
4. Act as an advocate for patient’s basic needs, including following established procedures for reporting and solving institutional care problems and chain of command.
5. Advocate on behalf of patients and their families with other members of the interdisciplinary health care team.
6. Teach patients and families about access to reliable and valid sources of information and resources including health information.
7. Participate in quality improvement activities.
8. Participate in professional organizations and community groups to improve the quality of health care.
9. Refer patients and their families to community resources.
10. Serve as a member of health care and community teams to provide services to individuals and their families who experience unmet needs.

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

Knowledge
1. Institutional and community resources including agencies/services and health care providers.
2. Principles of case management.
3. Roles of family and significant others in providing support to the patient.
4. Roles and functions of members of the interdisciplinary health care team.
5. Confidentiality regulations (e.g., HIPAA).
6. Referral processes for patients and their families to promote continuity of care.
8. Major current issues affecting public/government/private health care services, programs, and costs.
9. Organizational, local, and state resources for risk reduction, and health promotion, maintenance, and restoration.

Clinical judgments and behaviors
1. Assess the adequacy of the support systems of patients and their families.
2. Work with families to use resources to strengthen support systems.
3. Identify providers and national and community resources to meet the needs of patients and their families.
4. Facilitate communication among patients, their families, and members of the health care team to use institutional or community resources to meet health care needs.
5. Maintain confidentiality according to HIPAA guidelines.
7. Advocate with other members of the interdisciplinary health care team on behalf of patients and families to procure resources for care.
8. Assist patients and their families to communicate needs to their support systems and to other health care professionals.
9. Collaborate with interdisciplinary team concerning issues and trends in health care delivery affecting public/government/private health care services, programs, and cost to patients and families.

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

Knowledge
1. Principles of communication theory with patients, families, and the interdisciplinary health care team.
2. Principles of management, decision making, assertiveness, conflict management, communication, motivation, time management, delegation, and principles of change.
3. Functions of interdisciplinary health care team members.
4. Group process as a means of achieving and evaluating goals.
5. Principles of change and conflict resolution and strategies for effective management and improvement of patient care.

Clinical judgments and behaviors
1. Communicate changes in patient status and/or negative outcomes in patient responses to care with members of the interdisciplinary health care team.
2. Follow legal guidelines in communicating changes in patient status, including chain of command and Texas Nursing Practice Act.
3. Facilitate joint decision making with the interdisciplinary health care team.
4. Refer to community agencies and health care resources to provide continuity of care for patients and their families.
5. Assist the interdisciplinary health care team to implement quality, goal-directed patient care.
6. Facilitate positive professional working relationships.
7. Use evidence-based clinical practice guidelines to guide critical team communications during transitions in care between providers.
8. Recognize and manage conflict through the chain of command.
9. Initiate and participate in nursing or interdisciplinary team meetings.
10. Provide evidence-based information during interdisciplinary meetings.
11. Use change strategies in the work environment to achieve stated patient outcomes to facilitate optimum patient care.
E. Communicate and manage information using technology to support decision making to improve patient care.

Knowledge
1. Current information and communication systems for managing patient care, data, and the medical record.
2. Current technology-based information and communication systems.
3. Regulatory and ethical considerations protecting confidentiality when using technology.
4. Technology skills including word-processing, email, accessing databases, bibliographic retrieval, and accessing multiple online resources.

Clinical judgments and behaviors
1. Identify, collect, process, and manage data in the delivery of patient care and in support of nursing practice and education.
2. Evaluate credibility of sources of information, including internet sites.
3. Access, review, and use electronic data to support decision making.
4. Participate in quality improvement studies.
5. Apply knowledge of facility regulations when accessing client records.
6. Protect confidentiality when using technology.
7. Intervene to protect patient confidentiality when violations occur.
8. Use current technology and informatics to enhance communication, support decision making, and promote improvement of patient care.
10. Use informatics to promote health care delivery and reduce risk in patients and their families.
11. Document electronic information accurately, completely, and in a timely manner.

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

Knowledge
1. Texas Board of Nursing RN Delegation Rules.
2. Principles of supervision and management, team work/group dynamics, and nursing care delivery systems.
3. Competencies of assistive personnel and other licensed team members.
4. Structure and function of the interdisciplinary team.
5. Patient care requirements and assessment techniques.
7. Time management.
9. Regulatory laws and facility policies.

Clinical judgments and behaviors
1. Compare needs of patient with knowledge, skills, and abilities of assistive and licensed personnel prior to making assignments or delegating tasks.
2. Assess competency level and special needs of nursing team members.
3. Participate in decision making related to delegation and assigned tasks.
4. Assign, delegate, and monitor performance of unlicensed and licensed personnel in compliance with Texas Board of Nursing rules.
5. Assign patient care based on analysis of patient or organizational need
6. Reassess competency and learning needs of team members.
7. Evaluate responses to delegated and assigned tasks and make revisions based on assessment.
8. Plan activities to develop competency levels of team members.
G. Supervise nursing care provided by others for whom the nurse is responsible by using evidence based nursing practice.

Knowledge
1. Principles of management and organizational behavior.
2. Principles of communication and group process.
3. Assessment of learning needs.
4. Instructional methods.
5. Evaluation of teaching effectiveness.
6. Facility policies and procedures.
7. Organizational structure including chain of command.

Clinical judgments and behaviors
1. Provide staff education to members of the health care team to promote safe care.
2. Provide direction and clarification to health care team members or seek additional direction and clarification to promote safe care by health care team.
3. Oversee and follow through on patient care provided by health team members.
4. Base assignments and delegation on team member competencies.
5. Ensure timely documentation by assigned health team members.

Differentiated Essential Level Competencies of Graduates of Texas Nursing Programs. Board of Nurse Examiners, October 2010.
American Nurses Association (ANA)
Code of Ethics for Nurses:

Preface:

Ethics is an integral part of the foundation of nursing. Nursing has a distinguished history of concern for the welfare of the sick, injured, and vulnerable and for social justice. This concern is embodied in the provision of nursing care to the individual and the community. Nursing encompasses the prevention of illness, the alleviation of suffering and the protection, promotion, and restoration of health in the care of individuals, families, groups, and communities. Nurses act to change those aspects of social structures that detract from health and well-being. Individuals who become nurses are expected not only to adhere to the ideals and moral norms of the profession but also embrace them as a part of what it means to be a nurse. The ethical tradition of nursing is self-reflective, enduring, and distinctive. A code of ethics makes explicit the primary goals, values, and obligations of the profession. The ANA Code of Ethics is available online at: http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses or for purchase. The cost associated with the entire Code covers the cost to print, warehouse, and respond to requests for the document. The Code of Ethics is available online for viewing only, at no charge. Copies of the Code are available for purchase.

The Code of Ethics for Nurses serves the following purposes:

- It is a succinct statement of the ethical obligations and duties of every individual who enters the nursing profession.
- It is the profession's nonnegotiable ethical standard.
- It is an expression of nursing's own understanding of its commitment to society.

**Provision 1:** The nurse in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.

1.1 Respect for human dignity
1.2 Relationships to patients
1.3 The nature of health problems
1.4 The right to self determination
1.5 Relationships with colleagues and others.

**Provision 2:** The nurse's primary commitment is to the patient, whether an individual, family, group, or community.

2.1 Primacy of the patient's interest
2.2 Conflict of interest for nurses
2.3 Collaboration
2.4 Professional boundaries

**Provision 3:** The nurse promotes, advocates for, and strives to protect the health, safety and rights of the patient.

3.1 Privacy
3.2 Confidentiality
3.3 Protection of participants in research
3.4 Standards and review mechanisms
3.5 Acting on questionable practice
3.6 Addressing impaired practice
Provision 4: The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse obligation to provide optimum patient care.

4.1 Acceptance of accountability and responsibility
4.2 Accountability for nursing judgment and action
4.3 Responsibility for nursing judgment and action
4.4 Delegation of nursing activities

Provision 5: The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.

5.1 Moral self-respect
5.2 Professional growth and maintenance of competence
5.3 Wholeness of character
5.4 Preservation of integrity

Provision 6: The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.

6.1 Influence of the environment on moral virtues and values
6.2 Influence of the environment on ethical obligations
6.3 Responsibility for the health care environment

Provision 7: The nurse participates in the advancement of the profession through contributions to practice, education, administration and knowledge development.

7.1 Advancing the profession through active involvement in nursing and in health care policy
7.2 Advancing the profession by developing, maintaining, and implementing professional standards in clinical, administrative, and educational practice
7.3 Advancing the profession through knowledge development, dissemination, and application to practice

Provision 8: The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.

8.1 Health needs and concerns
8.2 Responsibilities to the public

Provision 9: The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

9.1 Assertion of values
9.2 The profession carries out its collective responsibility through professional associations
9.3 Intraprofessional integrity
9.4 Social reform

First Semester (Prerequisites)

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
<th>Contact Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>RNSG 1209</td>
<td>Introduction to Nursing</td>
<td>2</td>
<td>32</td>
</tr>
<tr>
<td>BIOL 2401****</td>
<td>Anatomy &amp; Physiology I</td>
<td>4</td>
<td>96</td>
</tr>
<tr>
<td>ELCT**</td>
<td>CHEM 1406/1411 or Math 1314/1414</td>
<td>4</td>
<td>96</td>
</tr>
<tr>
<td>ENGL 1301</td>
<td>Composition I</td>
<td>3</td>
<td>48</td>
</tr>
<tr>
<td></td>
<td>Total Hours</td>
<td>13</td>
<td>240-288</td>
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</tbody>
</table>

Also: The Admission Assessment Exam (HESI/A2): Vocabulary and General Knowledge score of 75% or higher, Reading Comprehension score 75% or higher, and Math score 75% or higher. Based on test scores, remedial work may be required. Exam results are available immediately upon completion. The exam may be repeated if not successful.

Second Semester

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
<th>Contact Hours</th>
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</thead>
<tbody>
<tr>
<td>RNSG 1413</td>
<td>Foundations for Nursing Practice</td>
<td>4</td>
<td>96</td>
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<tr>
<td>RNSG 1105</td>
<td>Nursing Skills I</td>
<td>1 (1st 8 weeks)</td>
<td>48</td>
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<tr>
<td>RNSG 1115</td>
<td>Health Assessment</td>
<td>1</td>
<td>48</td>
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<td>RNSG 1301</td>
<td>Pharmacology</td>
<td>3</td>
<td>48</td>
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<tr>
<td>RNSG 1262</td>
<td>Clinical – Nursing I</td>
<td>2 (10 weeks)</td>
<td>144</td>
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<tr>
<td>BIOL 2402 ****</td>
<td>Anatomy &amp; Physiology II</td>
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Third Semester

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<tbody>
<tr>
<td>RNSG 1331</td>
<td>Principles of Clinical Decision Making</td>
<td>3</td>
<td>80</td>
</tr>
<tr>
<td>RNSG 1251</td>
<td>Care of the Childbearing Family</td>
<td>2</td>
<td>64</td>
</tr>
<tr>
<td>RNSG 2213</td>
<td>Mental Health Nursing</td>
<td>2</td>
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<tr>
<td>RNSG 1363</td>
<td>Clinical – Nursing II</td>
<td>3</td>
<td>288</td>
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<tr>
<td>PSYC 2301</td>
<td>General Psychology</td>
<td>3</td>
<td>48</td>
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<tr>
<td>BIOL 2420 (*<strong>&amp;</strong>**)</td>
<td>Microbiology for Non-Science Majors</td>
<td>4</td>
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Fourth Semester

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<td>RNSG 1347</td>
<td>Concepts of Clinical Decision-Making</td>
<td>3</td>
<td>80</td>
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<tr>
<td>RNSG 2201</td>
<td>Care of Children &amp; Families</td>
<td>2</td>
<td>64</td>
</tr>
<tr>
<td>RNSG 2362</td>
<td>Clinical – Nursing III</td>
<td>3</td>
<td>288</td>
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<tr>
<td>SPCH 1318</td>
<td>Interpersonal Communications</td>
<td>3</td>
<td>48</td>
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<tr>
<td>PSYC 2314</td>
<td>Life Span Growth and Development</td>
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<td>48</td>
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Fifth Semester

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<th>Credit Hours</th>
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</thead>
<tbody>
<tr>
<td>RNSG 2331</td>
<td>Advanced Concepts of Clinical Decision-Making</td>
<td>3</td>
<td>80</td>
</tr>
<tr>
<td>RNSG 2221</td>
<td>Management of Client Care</td>
<td>2</td>
<td>64</td>
</tr>
<tr>
<td>RNSG 2363</td>
<td>Clinical – Nursing IV</td>
<td>3</td>
<td>288</td>
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<tr>
<td>ELCT *</td>
<td>Humanities/Fine Arts Selection</td>
<td>3</td>
<td>48</td>
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<tr>
<td>KINE</td>
<td>Physical Education</td>
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<td>Total Hours</td>
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GRAND TOTAL

<table>
<thead>
<tr>
<th>Course Number</th>
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<th>Credit Hours</th>
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<tbody>
<tr>
<td></td>
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<td>71</td>
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****Credit in the science courses must have been earned within five (5) years prior to acceptance in the nursing program.
*** BIOL 2421 may be accepted in lieu of BIOL 2420.
** If Microbiology 2420 or 2421 is completed successfully prior to the second semester, elective credit may be granted for CHEM 1406, CHEM 1411, MATH 1314 or MATH 1414.

### Prerequisite Courses:

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
<th>Contact Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIOL 2401 ****</td>
<td>Anatomy &amp; Physiology I</td>
<td>4</td>
<td>96</td>
</tr>
<tr>
<td>ELCT***</td>
<td>CHEM 1406/1411 or Math 1314/1414</td>
<td>4</td>
<td>96</td>
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<tr>
<td>ENGL 1301</td>
<td>Composition I</td>
<td>3</td>
<td>48</td>
</tr>
<tr>
<td>PSYC 2301</td>
<td>General Psychology</td>
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<tr>
<td><strong>Total Hours</strong></td>
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<td><strong>288</strong></td>
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#### Second Semester

<table>
<thead>
<tr>
<th>Course Number</th>
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<th>Credit Hours</th>
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<tbody>
<tr>
<td>BIOL 2402 ****</td>
<td>Anatomy &amp; Physiology II</td>
<td>4</td>
<td>96</td>
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<tr>
<td>BIOL 2420 (*** &amp; ****)</td>
<td>Microbiology for Non-Science Majors</td>
<td>4</td>
<td>96</td>
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<tr>
<td>RNSG 1229*</td>
<td>Integrated Nursing Skills II</td>
<td>2</td>
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<td><strong>Total Hours</strong></td>
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Upon successful completion of the last semester, Articulation students will receive 8 credit hours for RNSG 1413, 1105, 1115, & 1262). Other admission requirements - Admission Assessment Exam (HESI/A2) & Texas Success Initiative (TSI) complete or exempt.

#### Second Year (Acceptance into ADN Program*)

**Third Semester**

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
<th>Contact Hours</th>
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</thead>
<tbody>
<tr>
<td>RNSG 2213</td>
<td>Mental Health Nursing</td>
<td>2</td>
<td>64</td>
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<tr>
<td>RNSG 1301</td>
<td>Pharmacology</td>
<td>3</td>
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<tr>
<td>RNSG 1363</td>
<td>Clinical Nursing II</td>
<td>3</td>
<td>288</td>
</tr>
<tr>
<td>RNSG 1331</td>
<td>Principles of Clinical Decision Making</td>
<td>3</td>
<td>80</td>
</tr>
<tr>
<td><strong>Total Hours</strong></td>
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#### Fourth Semester

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<th>Credit Hours</th>
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</thead>
<tbody>
<tr>
<td>RNSG 1347</td>
<td>Concepts of Clinical Decision-Making</td>
<td>3</td>
<td>80</td>
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<td>Care of Children &amp; Families</td>
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<tr>
<td>RNSG 2362</td>
<td>Clinical – Nursing III</td>
<td>3</td>
<td>288</td>
</tr>
<tr>
<td>PSYC 2314</td>
<td>Life Span Growth and Development</td>
<td>3</td>
<td>48</td>
</tr>
<tr>
<td>SPCH</td>
<td>1315, 1318, or 1321</td>
<td>3</td>
<td>48</td>
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<tr>
<td><strong>Total Hours</strong></td>
<td></td>
<td><strong>14</strong></td>
<td><strong>528</strong></td>
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#### Fifth Semester

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
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<tbody>
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<td>RNSG 2331</td>
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<tr>
<td>PHED/KINE</td>
<td>Physical Education</td>
<td>1</td>
<td>16</td>
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<tr>
<td><strong>Total Hours</strong></td>
<td></td>
<td><strong>12</strong></td>
<td><strong>496</strong></td>
</tr>
</tbody>
</table>

**GRAND TOTAL**

|               |                                                   | 71           | 2096          |

****Credit in the science courses must have been earned within five (5) years prior to acceptance in the nursing program.

***BIOL 2421 may be accepted in lieu of BIOL 2420. If Microbiology 2420 or 2421 is completed successfully prior to the second semester, elective credit may be granted for CHEM 1406, CHEM 1411, MATH 1314, or MATH 1414.

*RNSG 1229 credit must have been earned within two (2) years prior to acceptance in the nursing program.
POLICIES

Policies of the Associate Degree Nursing Student Handbook are congruent with the guidelines of the college and the CTC Student Handbook. The program prepares the student for professional licensure; therefore disciplinary action based on a nursing professional code of conduct is permitted by the college.

Support Services available to students are discussed in the CTC Student Handbook and in the Schedule Bulletin printed each semester.

Admission Policy
Applicants for the A.D.N. Program must be admitted to Central Texas College first. After being admitted to the College, the following is required of all applicants to be considered for admission to the A.D.N. Program:

- Apply to the A.D.N. Program at CTC and provide copies of transcripts from all prior colleges attended;
- Only transfer courses with a grade of a “C” or better will be considered for the CTC A.D.N. Nursing Degree Plan;
- All International or Community Foreign students who meet the CTC exception or the TBON language requirement should be able to seek admission to the ADN program without taking the TOEFL examination;
- Disclosure of the Social Security number is required for admission into the Department of Nursing Programs: Associate Degree Nursing, Vocational Nursing, and Emergency Medical Technology. Affiliated clinical agencies require the student Social Security number in order to approve placement of student in their facility. The Department of Nursing policy requires the student to be eligible to attend all affiliated clinical sites and does not provide special placement. Central Texas College will not locate or provide alternative sites for clinical rotations for students ineligible to attend clinical rotations at the specified sites. Clinical rotations are completed at sites specified by and contracted with Central Texas College.
- Meet with a counselor at CTC in Guidance and Counseling for assistance. Initially, prospective A.D.N. students are placed on a General Studies Degree Plan (pre-nursing);
- Complete all prerequisite courses to Foundations for Nursing Practice (RNSG 1413) with a “C” or better and achieve an overall ADN Degree Plan GPA of 2.8 or greater. Pharmacology (RNSG 1301), lab science courses, and other non-nursing co-requisites on the A.D.N. Degree Plan may also be completed during this time;
- Complete the Admission Assessment Exam HESI (A2), a computerized test, which may be taken at the CTC Testing Center. Math, Reading Comprehension, Vocabulary and General Knowledge, and A&P sections are required. A HESI (A2) Prep book is available for purchase in the CTC Bookstore. The most current HESI A2 nursing pre-entrance exam must be passed with scores of 80% or higher in each section of Math, Reading Comprehension, and Vocabulary and General Knowledge on the same exam within 2 years from admission date (there is currently no minimum score for the A&P section). No HESI A2 exams greater than two years old will be considered. Based on test scores, remedial work may be required. Exam results are available immediately upon completion. The exam may be repeated if not successful. If the exam is failed twice, the student is recommended to wait 5 months before attempting the HESI (A2) again. This period may be used for remediation.
- Be Texas Success Initiative (TSI) complete or exempt;
- Attain a minimum of a 2.8 overall (average) GPA (on a 4.0 scale) for all CTC A.D.N. Degree Plan courses whether taken at CTC or transferred from another college or university;
Attain a minimum of a 2.8 overall (average) GPA (on a 4.0 scale) for all lab science courses. Lab science courses over five (5) years old must be repeated. Grades for all required science courses attempted within the last five years will be considered when calculating the overall science GPA. This includes any science courses that were repeated.

A student who has repeated a required science course more than once within the last five years and earned grades of less than a “C” will be ineligible for admission into the Associate degree nursing program.

Attendance is required at a mandatory Small Group Informational Meeting with the Chair of the Department of Nursing/Nursing Program Coordinator or designee during the semester all prerequisite courses are completed. The following must be on record in the Department of Nursing prior to the scheduled mandatory Small Group Informational Meeting: CTC Department of Nursing application, nursing pre-entrance exam scores, TSI exam scores and all transcripts.

When you are notified of selection to the A.D.N. Program, and prior to registration for the first semester nursing courses, you must provide validation in the form of original documents and one photocopy each of the following mandatory immunizations:

**Tetanus/Diphtheria**  Tdap must be noted as administered once in lifetime- If no record then student will need to get a Tdap. If a Tdap was administered then Td is required every ten years.

**Polio**  Students enrolled in health-related courses are encouraged to ascertain that they are immune to poliomyelitis.

**Measles**  Students born on or after January 1, 1957 must have two doses of measles-containing vaccine administered since January 1, 1968. Those born prior to January 1, 1957 must show one dose.

  Or, serologic confirmation of immunity is acceptable (titer completed and interpreted as immune to measles).

**Mumps**  One dose required.

  Or serologic confirmation of immunity is acceptable (titer completed and interpreted as immune to mumps).

**Rubella**  One dose required.

  Or serologic confirmation of immunity is acceptable (titer completed and interpreted as immune to rubella).

**Hepatitis B**  Students must complete the Hepatitis B series which consists of three injections. The series consists of 3 injections over a 6-month period of time – please plan accordingly!

  Or serologic confirmation of immunity is acceptable (titer completed and interpreted as immune to Hepatitis B).

**Purified Protein Derivative (PPD)/Tuberculin** must be completed within the **90 day period immediately prior to the program start date** and each year thereafter. If a history of positive PPD then a chest x-ray interpretation must be current and updated each year. If other than negative results, healthcare provider’s recommendations will be considered.

**Varicella**  must receive two doses of varicella (Chicken Pox) vaccine

  Or a written statement from a physician, the student’s parent or guardian, or school nurse supporting a history of varicella is acceptable.

  Or serologic confirmation of immunity is acceptable (titer completed and interpreted as immune to varicella).
Influenza must show current vaccination, annually each fall.

**Bacterial Meningitis**

The Texas legislature passed a law requiring students, under the age of 22, entering at institutions of higher education to have an initial bacterial meningitis vaccination or booster during the five-year period preceding and at least 10 days prior to the first day of the first semester or submit an affidavit for an exemption. Vaccinations older than 5 years will require a booster.

**Are you exempt?**

Evidence of receiving the vaccination against bacterial meningitis, or a booster dose, is not required by students who:

- Are 22 years of age or older by the first day of the start of the semester; or
- Enrolled only in online or other distance education courses
- Enrolled in a continuing education course or program that is less than 360 contact hours, or continuing education corporate training
- Enrolled in a dual credit course which is taught at a public or private K-12 facility not located on a higher education institution campus

[Title 25 Health Services Rule 97.64 and Rule 97.65 of the Texas Administrative Code (March 2009)]

- Physical Examination on the CTC Department of Nursing form must be completed within the 90 day period immediately prior to the program start date. The student completes the first side and the medical doctor (MD), doctor of osteopathy (DO), physician’s assistant (PA), or nurse practitioner (NP) completes the second side. Please make certain that the activity level (limited or unlimited) is noted on the physical exam form signed by the health care provider.
- During progression through the Program, inform the CTC Department of Nursing Chair and/or designee of any mental or physical condition, illness, injury, surgery, pregnancy, etc. that would result in a change of the physical limitations status. Safety is a priority for the patient and health and wellbeing of students and faculty. Failure to inform the program may result in immediate withdrawal from the course or program. Medical care which results in student absence must include the physician’s return to class/clinical documentation following illness, injury, surgery, pregnancy, or as required by faculty. Documentation must be mailed, faxed, or hand carried in a sealed envelope that has the agency stamp or employee’s signature on the back.
- Current Cardiopulmonary Resuscitation (CPR) - American Heart Association – Health Care Provider (BLS) and Military Training Network (MTN) are the only CPR courses that will be accepted. Please furnish the original card and a photocopy – front and back – online certification not accepted.
- Negative 11 panel Drug Screen must be completed within the 45 day period immediately prior to the program start date. The clerks can only accept a drug screen that has been mailed, e-mailed or faxed from the testing agency directly to the nursing department.
- Negative Criminal Background Check, or Declaratory Order from the Texas Board of Nursing (TBON). All criminal history background checks must be conducted and verification of negative results received prior to enrollment in the A.D.N. Program. Negative results for the criminal history background check and drug screen tests will be honored for the duration of the enrollment period in the Program if there has not been a break from enrollment in the Department of Nursing at Central Texas College. A break in enrollment is defined as nonattendance of one full (16 week) semester or more.
- Disclosure of the Social Security number is required for admission into the Department of Nursing Programs: Associate Degree Nursing, Vocational Nursing, and Emergency Medical Technology. Affiliated clinical agencies require the student Social Security number in order to approve placement of student in their facility. The Department of Nursing policy requires the student to be eligible to attend all affiliated clinical sites and does not provide special placement. Central Texas College will not locate or provide alternative sites for clinical rotations for students ineligible to attend clinical rotations at the specified sites. Clinical rotations are completed at sites specified by and contracted with Central Texas College.
- Current liability insurance (purchased by CTC upon admission).
• Proof of purchase of lab kit.
• The prospective student will also sign a statement agreeing to:

1. Inform the Chair, Department of Nursing and the clinical agency facility if criminal activity or substance abuse occurs after the initial Criminal History Background Check and Drug Screen, or is aware of such activity that was not disclosed on the original background check. Failure to disclose discoverable information, which will be revealed on clinical facility and/or the FBI background check as required by the TBON, may prohibit progression in the program or eligibility for licensure.
3. Provide a birth certificate, U.S. passport, naturalization certificate, permanent alien card or other documents if required by the clinical facility.

Each prospective student must bear the cost of all the above requirements.

Neither the College nor the clinical agency facilities provide medical coverage or workmen’s compensation for emergency illness or injury. Medical coverage is the responsibility of the student.

There are questions on the Texas Board of Nursing (TBON) Application for Licensure regarding criminal convictions, treatment for mental illness, and alcohol or drug addiction/ treatment. The TBON may deny licensure to individuals with previous problems in one or more of these areas. Please go to [http://www.bon.texas.gov/](http://www.bon.texas.gov/) click on other Application and Forms, then Candidates for Licensure, then Declaratory Order Form for more information.

Time Frames: Please note the eligibility determination takes a minimum of 3-6 months. Disclosure of a positive criminal background will prohibit registration. The student will be advised to petition the Board for an eligibility determination PRIOR to enrollment in a nursing program.

The prospective student for the CTC Department of Nursing will not be considered for admission until the Declaratory Order outcomes (in the case of a positive criminal history background check) are received by the Chair, Department of Nursing from the prospective student/TBON.

Please refer to the “FREQUENTLY ASKED QUESTIONS REGARDING PETITION FOR DECLARATORY ORDER” on the TBON website for additional information.

**Additional Need–to–Know Information**

Students will be required to complete nationally normed and referenced examinations throughout the curriculum and earn satisfactory scores based on national and school benchmarks on such examinations. In the fourth semester of the curriculum (the final semester of the Program), students are required to take an exit nationally normed comprehensive examination as part of the final grade. This examination is predictive of success on the NCLEX-RN®.

**Articulating Student Nursing Option Admission Policy**

**Applicants for Nursing Option for Articulating Student Program must be admitted to Central Texas College first.** After being admitted to the College, the following is required of all applicants to be considered for admission to the A.D.N. Program:

- Apply to the A.D.N. Program at CTC and provide copies of transcripts to the Department of Nursing from all prior colleges and universities attended to include an LVN/LPN and Paramedic transcript.;
- All International or Community Foreign students who meet the CTC exception or the TBON language requirement should be able to seek admission to the ADN program without taking the TOEFL examination;
- Disclosure of the Social Security number is required for admission into the Department of Nursing Programs: Associate Degree Nursing, Vocational Nursing, and Emergency Medical Technology. Affiliated clinical agencies require the student Social Security number in order to approve placement of student in their facility. The Department of Nursing policy requires the student to be eligible to
Central Texas College will not locate or provide alternative sites for clinical rotations for students ineligible to attend clinical rotations at the specified sites. Clinical rotations are completed at sites specified by and contracted with Central Texas College.

- Only transfer courses with a grade of a “C” or better will be considered for the CTC A.D.N. Nursing Degree Plan;
- Hold a current LVN/LPN license or Paramedic certification/licensure from any state;
- Submit two work references, as an LVN/LPN, or Paramedic one of which is from a current supervisor within the last two years. All applicants for this course must have been employed one year full-time or two years part-time as a GVN/LVN or Paramedic in the two calendar years prior to admission to the Nursing Option for Articulating Student Program.
- The experience requirement for the Nursing Option for Articulating Student Program may be waived before entry into the Program provided the following requirements are satisfied:
  - Graduation from the CTC Vocational Nursing Program, or CTC Paramedic Program,
  - Current, valid LVN/LPN license, or current Paramedic certification/licensure
  - Attainment of at least a “B” (or 80%) or greater overall average in the CTC Vocational Nursing Program or EMT/P Program.
  - A letter from the EMT/P Program Director, or VN admissions and standards committee chair person recommending such a waiver,
  - Appraisal forms completed by 2 previous clinical faculty
  - Completion of all prerequisite courses for the Nursing Option for Articulating Student degree plan
- Meet with a counselor at CTC in Guidance and Counseling, Building 119 for assistance. Initially, prospective A.D.N. students are placed on a General Studies Degree Plan (pre-nursing);
- Complete all prerequisite courses with a “C” or better and achieve an overall GPA of 2.8 or greater.
- Be Texas Success Initiative (TSI) complete or exempt. For more information and assistance on testing contact the Guidance & Counseling Office.
- Complete the Admission Assessment Exam HESI (A2), a computerized test, which may be taken at the CTC Testing Center. Math, Reading Comprehension, Vocabulary and General Knowledge, and A&P sections are required. A HESI (A2) Prep book is available for purchase in the CTC Bookstore. The most current HESI A2 nursing pre-entrance exam must be passed with scores of 80% or higher in each section of Math, Reading Comprehension, and Vocabulary and General Knowledge on the same exam within 2 years from admission date (there is currently no minimum score for the A&P section). No HESI A2 exams greater than two years old will be considered. Based on test scores, remedial work may be required. Exam results are available immediately upon completion. The exam may be repeated if not successful. If the exam is failed twice, the student is recommended to wait 5 months before attempting the HESI (A2) again. This period may be used for remediation.
- Attain a minimum of a 2.8 overall (average) GPA (on a 4.0 scale) for all CTC ADN Degree Plan courses whether taken at CTC or transferred from another college or university;
- Attain a minimum of a 2.8 overall (average) GPA (on a 4.0 scale) for all lab science courses at time of admission. Lab science courses over five (5) years old must be repeated. Grades for all required science courses attempted within the last five years will be considered when calculating the overall science GPA. This includes any science courses that were repeated.
- A student who has repeated a required science course more than once within the last five years and earned grades of less than a “C” will be ineligible for admission in to the Associate degree nursing program.
Attendance is required at a mandatory Small Group Informational Meeting with the Chair of the Department of Nursing/Nursing Program Coordinator or designee during the semester all prerequisite courses are completed. The following must be on record in the Department of Nursing prior to the scheduled mandatory Small Group Informational Meeting: CTC Department of Nursing application, nursing pre-entrance exam scores, TSI exam scores and all transcripts.

When you are notified of selection to the Nursing Option for Articulating Student Program and prior to enrollment in the program, you must provide validation in the form of original documents and one photocopy each of the following mandatory immunizations:

**Tetanus/Diphtheria** Tdap must be noted as administered once in lifetime- If no record then student will need to get a Tdap. If a Tdap was administered then Td is required every ten years.

**Polio** Students enrolled in health-related courses are encouraged to ascertain that they are immune to poliomyelitis.

**Measles** Students born on or after January 1, 1957 must have two doses of measles-containing vaccine administered since January 1, 1968. Those born prior to January 1, 1957 must show one dose.

- Or serologic confirmation of immunity is acceptable (titer completed and interpreted as immune to measles).

**Mumps** One dose required.

- Or serologic confirmation of immunity is acceptable (titer completed and interpreted as immune to mumps).

**Rubella** One dose required.

- Or serologic confirmation of immunity is acceptable (titer completed and interpreted as immune to rubella).

**Hepatitis B** Students must complete the Hepatitis B series which consists of three injections given at day 1, 30, and 180. The series consists of 3 injections over a 6 month period of time – please plan accordingly!

- Or serologic confirmation of immunity is acceptable (titer completed and interpreted as immune to Hepatitis B).

**Purified Protein Derivative (PPD)/Tuberculin** must be completed within the 90 day period immediately prior to the program start date and each year thereafter. If a history of positive PPD then a chest x-ray interpretation must be current and updated each year. If other than negative results the healthcare provider’s recommendations will be considered.

**Varicella** Must receive two doses of varicella (Chicken Pox)

- Or a written statement from a physician, the student’s parent or guardian, or school nurse supporting a history of varicella is acceptable.

- Or serologic confirmation of immunity is acceptable (titer completed and interpreted as immune to varicella).

**Influenza** must show current vaccination, annually each fall

**Bacterial Meningitis** The Texas legislature passed a law requiring ALL entering students at institutions of higher education to have an initial bacterial meningitis vaccination or booster during the five-year period preceding and at least 10 days prior to the first day of the first semester or submit an affidavit for an exemption. Vaccinations older than 5 years will require a booster.
Are you exempt?

Evidence of receiving the vaccination against bacterial meningitis, or a booster dose, is not required by students who:

- Are 22 years of age or older by the first day of the start of the semester; or
- enrolled only in online or other distance education courses
- enrolled in a continuing education course or program that is less than 360 contact hours, or continuing education corporate training
- enrolled in a dual credit course which is taught at a public or private K-12 facility not located on a higher education institution campus

[Title 25 Health Services Rule 97.64 and Rule 97.65 of the Texas Administrative Code (March 2009)]

• Physical Examination on the CTC Department of Nursing form must be completed within the 90 day period immediately prior to the program start date. The student completes the first side and the medical doctor (MD), doctor of osteopathy (DO), physician’s assistant (PA), or nurse practitioner (NP) completes the second side. Please make certain that the activity level (limited or unlimited) is noted on the physical exam form signed by the health care provider.

• During progression through the Program, Inform the CTC Department of Nursing Chair and/or designee of any mental or physical condition, illness, injury, surgery, pregnancy, etc. that would result in a change of the physical limitations status. Safety is a priority for the patient and health and wellbeing of students and faculty. Failure to inform the program may result in immediate withdrawal from the course or program. Medical care which results in student absence must include the physician’s return to class/clinical documentation following illness, injury, surgery, pregnancy, or as required by faculty. Documentation must be mailed, faxed, or hand carried in a sealed envelope that has the agency stamp or employee’s signature on the back.

• Current Cardiopulmonary Resuscitation (CPR) - American Heart Association – Health Care Provider (BLS) and Military Training Network (MTN) are the only CPR courses that will be accepted. Please furnish the original card and a photocopy – front and back) – online certification not accepted.

• Negative 11 panel Drug Screen must be completed within the 45 day period immediately prior to the program start date. The clerks can only accept a drug screen that has been mailed, e-mailed or faxed from the testing agency directly to the nursing department.

• Negative Criminal Background Check, or Declaratory Order from the Texas Board of Nursing (TBON). – All criminal history background checks must be conducted and verification of negative results received prior to enrollment in the A.D.N. Program. Negative results for the criminal history background check and drug screen tests will be honored for the duration of the enrollment period in the Program if there has not been a break from enrollment in the Department of Nursing at Central Texas College. A break in enrollment is defined as nonattendance of one full (16 week) semester or more.

• Social Security Release Information: Disclosure of the Social Security number is required for admission into the Department of Nursing Programs: Associate Degree Nursing, Vocational Nursing, and Emergency Medical Technician/Paramedic. Affiliated clinical agencies require the student Social Security number in order to approve placement of students in their facility. The Department of Nursing policy requires the student to be eligible to attend all affiliated clinical sites and does not provide special placement. Central Texas College will not locate or provide alternative sites for clinical rotations for students ineligible to attend clinical rotations at the specified sites. Clinical rotations are completed at sites specified by and contracted with Central Texas College.

• Current liability insurance (included in registration fees).

• Proof of purchase for lab kit.
The prospective student will also sign a statement agreeing to:

1. Inform the Chair, Department of Nursing and the clinical agency facility if criminal activity or substance abuse occurs after the initial Criminal History Background Check and Drug Screen, or is aware of such activity that was not disclosed on the original background check. Failure to disclose discoverable information, which will be revealed on clinical facility and/or the FBI background check as required by the TBON, may prohibit progression in the program or eligibility for licensure.


3. Provide a birth certificate, U.S. passport, naturalization certificate, permanent alien card or other documents if required by the clinical facility.

Each prospective student must bear the cost of all the above requirements.

Neither CTC nor the clinical agency facilities provide medical coverage or workmen’s compensation for emergency illness or injury. Medical coverage is the responsibility of the student.

There are questions on the Texas Board of Nursing (TBON) Application for Licensure regarding criminal convictions, treatment for mental illness, and alcohol or drug addiction/treatment. The TBON may deny licensure to individuals with previous problems in one or more of these areas.

Please go to [http://www.bon.state.tx.us](http://www.bon.state.tx.us), click on other Application and Forms, then Candidates for Licensure, then Declaratory Order Form for more information.

“Time Frames: Please note the eligibility determination takes a minimum of 3-6 months. Disclosure of a positive criminal background will prohibit registration. The student will be advised to petition the Board for an eligibility determination PRIOR to enrollment in a nursing program.”

The prospective student for the CTC Department of Nursing will not be considered for admission until the Declaratory Order outcomes (in the case of a positive criminal history background check) are received by the Chair, Department of Nursing from the prospective student/TBON.

Please refer to the “FREQUENTLY ASKED QUESTIONS REGARDING PETITION FOR DECLARATORY ORDER” on the TBON website for additional information.

**Additional Need-to-Know Information**

Students will be required to complete nationally normed and referenced examinations throughout the curriculum and earn satisfactory scores based on national and school benchmarks on such examinations. In the last semester of the curriculum (the final semester of the Program), students are required to take an exit nationally normed comprehensive examination as part of the final grade. These examinations are predictive of NCLEX-RN® exam success.

**Transfer Student Policies**

The Transfer Student must:

- Meet general admission requirements of CTC and the Department of Nursing.
- Possess an overall 2.8 GPA or higher on a 4.0 scale in all college work for both transfer courses and courses earned at CTC that will be credited on the nursing degree plan. Nursing course work older than two years will not be accepted.
- Possess a lab science GPA of 2.8 or greater **with courses no older than 5 years**. Grades for all required science courses attempted within the last five years will be considered when calculating the overall science GPA. This includes any science courses that were repeated.
- A student who has repeated a required science course more than once within the last five years and earned grades of less than a “C” will be ineligible for admission into the Associate degree nursing program.
- Present transcripts from all colleges attended. (Syllabi for nursing courses are required for review.) Nurse course work cannot be over 2 years old.
• Apply in writing to the CTC ADN Admissions and Standards Committee requesting admission to the Program.
• Acknowledge that placement in a nursing course will be dependent upon space availability and recommendations from the ADN Admissions and Standards Committee.
• Must complete 25% of the degree plan at CTC to meet residency requirements (a CTC requirement).
• Complete the ADN Program within three years of enrollment in your first RNSG course.
• Acknowledge that transfer students who have failed in another college or university’s nursing program may be admitted to the Associate Degree Nursing program provided they are eligible for readmission to the program from which transferring or with recommendation from the Director/Dean of the previous Nursing Program. Official letters from the original program are required for validation. A student dismissed from or academically unsuccessful in any nursing program either at CTC or any other nursing institution seeking admission into a CTC nursing program is required to provide two letters of recommendation from the previous program faculty. One must specifically come from the last clinical course attended. The final decision to accept or deny admission will be left with the Admissions and Standards Committee.
• After enrollment, a transfer student who does not successfully complete any nursing course or withdraws from a nursing course with a failing average will adhere to the readmission policy as detailed under “Readmission Policy.”
• Refer to CTC Nursing webpage http://www.ctcd.edu/academics/instructional-departments/nursing/ for the Transfer Student Check-list, and CTC college catalog for additional information per program.

Part-time Status
There is currently no part time option in the ADN program.
Texas Board of Nursing (TBON) policies

There are questions on the Texas Board of Nursing (TBON) Application for Licensure regarding criminal convictions, treatment for mental illness, and alcohol or drug addiction / treatment. The TBON may deny licensure to individuals with previous problems in one or more of these areas. Please go to http://www.bon.state.tx.us for information.

Texas Board of Nursing Rules and Regulations

Please refer to the Texas Board of Nursing’ web site: http://www.bon.state.tx.us for the Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice

Questions that appear on the application for licensure as an RN in the State of Texas as of 09/2008:

SECTION D: Eligibility Questions

1) [ ] No [ ] Yes 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.

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

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

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

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

If “YES” indicate the condition: [ ] schizophrenia and/or psychotic disorders, [ ] bipolar disorder, [ ] paranoid personality disorder, [ ] antisocial personality disorder, [ ] borderline personality disorder

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

*If you are licensed as an LVN in the State of Texas and are currently participating in the Texas Peer Assistance Program for Nurses you may answer “NO” to questions #4 and #5.
1. Have you ever been convicted, placed on community supervision whether or not adjudicated guilty, sentenced to serve jail or prison time or granted pre-trial diversion, or plead guilty, no contest or nolo contendere to any crime in any state, territory or country, or received a court order whether or not a sentence was imposed, including any pending criminal charges or unresolved arrests whether or not on appeal (excluding minor Class C traffic violations)? This includes expunged offenses and deferred adjudications with or without a finding of guilt. **Please note that DUIs, DWIs, and PIs must be reported and are not considered minor traffic violations. One time minor in possession [MIP] or minor in consumption [MIC] does not need to be disclosed; therefore, you may answer "No." If you have two or more MIPs or MICs, you must answer "Yes." You may answer "No" if you have previously disclosed a criminal matter otherwise responsive to this question in a renewal and/or licensure form.**

2. Do you have any criminal charges pending, including unresolved arrests?

3. Has any licensing authority refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a professional license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?

4. Within the past five (5) years have you been addicted to and/or treated for the use or alcohol or any other drug?

5. Within the past five (5) years have you been diagnosed with, treated, or hospitalized for schizophrenia and/or psychotic bipolar disorder, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder?

If you answered “YES” to any of the questions listed above, attach a letter of explanation that is dated and signed indicating the circumstance you are reporting to the Board. Mail to the Texas Board of Nursing for the State of Texas, P0 Box 430, Austin, TX 78767-0430; 333 Guadalupe, #3-460 Austin, TX 78701. *If you are licensed as an LVN in the State of Texas and are currently participating in the Texas Peer Assistance Program for Nurses you may answer “NO” to questions #4 and #5. Eligibility requirements can be found website at: [http://www.bon.state.tx.us](http://www.bon.state.tx.us)
Licensure Eligibility Notification Form

I hereby verify that I have received and have had the following documents regarding licensure eligibility for registered professional nurses in Texas explained to me:

1) 301.251-301.258 and 301.451-301.469 of the Nursing Practice Act.
3) Eligibility Questions, TBON Application by NCLEX-RN® and Petition for Declaratory Order (09/2008).

[ ] 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 your 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

For Office Use Only
Date: ____________
Amount: ____________
Audit #: ____________
FBI NO: YES NO

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

***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.

*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.
[ ] YES [ ] NO (1.) Are you enrolled, planning to enroll, or have you graduated from a nursing program?
Name of Nursing Program: _____________________________
Location of Nursing Program: _____________________________
City State
Type of Nursing Program: (circle one) LVN RN Date of Enrollment: _______ Date of Graduation: _______
[ ] YES [ ] NO (2.) Have you ever been convicted, placed on community supervision whether or not adjudicated guilty, sentenced to serve jail or prison time or granted pre-trial diversion, or plead guilty, no contest or nolo contendere to any crime in any state, territory or country, or received a court order whether or not a sentence was imposed, including any pending criminal charges or unresolved arrests whether or not on appeal (excluding minor Class C traffic violations)? This includes expunged offenses and deferred adjudications with or without a finding of guilt. Please note that DUIs, DWIs, and PIs must be reported and are not considered minor traffic violations. One time minor in possession [MIP] or minor in consumption [MIC] does not need to be disclosed; therefore, you may answer "No." If you have two or more MIPs orMICs, you must answer "Yes." You may answer "No" if you have previously disclosed a criminal matter otherwise responsive to this question in a renewal and/or licensure form.
[ ] YES [ ] NO (3.) Do you have any criminal charges pending, including unresolved arrests?
[ ] 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?*
Indicate the condition:
[ ] schizophrenia and/or psychotic disorders [ ] bipolar disorder [ ] paranoid personality disorder
[ ] antisocial personality disorder [ ] borderline personality disorder
***FOR ALL QUESTIONS THAT YOU ANSWER "YES" TO ABOVE, YOU MUST PROVIDE SIGNED AND DATED LETTER DESCRIBING THE INCIDENCE(S) THAT YOU ARE REPORTING TO THE BOARD.
*You may indicate ‘NO’ if you have completed and/or are in compliance with TPAPN for substance abuse or mental illness.
I, __________, being duly sworn, depose, and say that I am the Petitioner, that the statements herein contained are true in every respect, and I consent to the release of confidential information from all relevant sources to the Texas Board of Nursing (TBON) for the duration of time necessary to resolve my petition and further authorize the TBON to use and release said information as needed for the evaluation and disposition of my petition.
MUST BE SIGNED IN PRESENCE OF A NOTARY ° APPLICANT’S SIGNATURE AFFIX NOTARY SEAL BELOW
Sworn to before me this day of ____, Notary Public Signature/State of My Commission Expires
Progression Requirements
In order to progress in nursing program the following requirements must be met:

- Achievement of a grade of “C” or higher in all courses in the curriculum including general education and nursing courses.
- Achievement of a minimum 75 percent average or higher in all nursing courses.
- Successfully complete prerequisites to each nursing course.
- Complete co-requisites prior to or concurrently with nursing courses.
  - If withdrawal occurs for any reason from any of the co-requisite nursing courses, withdrawal from the corresponding clinical course (Clinical Nursing I, II, III, or, IV) is required. Example: Withdrawal from RNSG 1251 or RNSG 2201, results in withdrawal from RNSG 1363 Clinical II or RNSG 2362 Clinical III, respectively.
- Successfully complete all courses in each semester of the curriculum before progressing to the next semester courses.
- Maintain current CPR certification AHA guidelines – BLS for Health Care Providers or Military Training Network.
- Provide documentation of medical release to the Department of Nursing to return to class/clinical after mental or physical condition, illness, injury, surgery, pregnancy, “break in clinical” etc. that would result in a change of the physical limitations status and provide written documentation of medical release to return to class/clinical. Failure to inform the program may result in immediate withdrawal from the course or program. Documentation must be mailed, faxed, or hand carried in a sealed envelope that has the agency stamp or employee’s signature on the back.
- Have an annual PPD Skin test or chest x-ray if indicated as physician ordered or facility required, and provide results to Department of Nursing.
- Provide proof of an annual influenza vaccination.
- Maintain negative 11 panel drug screen and criminal background check.
- Complete all standardized assessment and exit tests as required by the course syllabus.
- Complete the nursing program within three years of first enrollment in RNSG 1413 or its equivalent.
- For Articulation Students: Complete the Nursing program within three years or first enrollment in RNSG 1331.
- Perform and behave in clinical settings and demonstrate behavior in the classroom in accordance with CTC Policy, the Standards of Practice as set forth in the Rules and Regulations of the Texas Board of Nursing for the State of Texas (TBON). Failure to perform to these standards may result in disciplinary action which could include dismissal from the program.

Readmission Policy
Readmission to any nursing course is dependent upon availability of class openings after current class progression; it is not automatic.

- Generic students must complete the nursing program within four calendar years of enrollment in nursing courses. Transfer students must complete the nursing program within three calendar years of enrollment in nursing courses.
- Students must meet the current admission/progression requirements.
- Students must provide current physical, immunization, criminal background and drug screen information. Provide proof of physical examination or diagnostic tests as recommended or required to include physicians return to class/clinical documentation after illness, injury, surgery, or pregnancy etc.
- Any student who is requesting readmission to a clinical course, or who experiences a “break” from clinical for any reason will be required to provide a “Student Nurse Medical Release Return to Class/Clinical” form before being allowed to participate in a clinical course. The medical evaluation must take place within the 30 days period immediately prior to the clinical start date. The release must be submitted to the appropriate semester coordinator during the first week of the semester or
one (1) week prior to the start date for a clinical course that does not start at the beginning of the semester. Documentation must be mailed, faxed, or hand carried in a sealed envelope that has the agency stamp or employee’s signature on the back.

- **If a student does not successfully complete any nursing course or withdraws from a nursing course with a failing average, the student may apply for readmission to the Nursing Program one time. This applies to the following nursing courses: RNSG 1105, 1115, 1251, 1262, 1301, 1331, 1347, 1363, 1413, 2201, 2213, 2221, 2331, 2362, and 2363. Failure of any two RNSG courses will result in ineligibility for readmission.**

- RNSG 1301 may be taken prior to program enrollment or be taken after enrollment, with 1st semester course as a co-requisite. If a student is unsuccessful in RNSG 1301 it will count as one of the two course failures allowed in the nursing program.

- If a student has been readmitted following a nursing course failure and subsequently withdraws from a nursing course because of extenuating circumstances, the student may be readmitted if in a passing status at time of withdrawal.

- Consideration for readmission of former students is based on the following:
  - Former faculty team recommendation.
  - Academic grade average and clinical evaluation.
  - Reason(s) for failure if applicable.
  - Resolution of outside extenuating circumstances if applicable.
  - Completion of remedial work and/or completion of corresponding Level 1 or Level 2 academic courses if recommended.
  - The recommendation of the Admissions and Standards Committee. An interview of the former student may be required.

- Selection of students for readmission will be made in May, August and December.

- Any student applying for readmission to the nursing program must request readmission, in writing, with the Admissions and Standards Committee and submit a written plan for success to be reviewed by the committee. The written request for readmission must include the student’s most current contact information, to include address. The committee may make recommendations related to this plan for success and may request an interview with the applicant. The committee determines eligibility for readmission and notifies the student in writing.

- If a student has a previous RNSG Course Failure, then they will be permitted to register for only one RNSG course during each Summer Session. Exceptions to this policy will be made on an individual basis through the Admission & Standards Committee recommendations.

**Articulating Student Nursing Option Readmission Policy**

- See readmission policy above.
- Summer session- If a student has a previous RNSG course failure they will be permitted to register for the summer session.
- Articulation students must complete the nursing program within three calendar years of enrollment in RNSG 1331.

**Graduation Requirements**

Central Texas College confers the Associate of Arts, the Associate of Science, the Associate of Applied Science, the Associate of Arts in General Studies and certificates of completion. To graduate from Central Texas College Associate Degree Nursing Program, the student must:

- Apply for graduation by the deadline date (Application available on CTC website or in the Graduation office located in the Student Services building).
- Successfully complete all courses required in the program of study.
- Complete at least 25 percent of the degree or certificate semester credit hours at CTC (to fulfill residency requirements).
- Achieve a grade of “C” or higher in all courses in the curriculum including general education and nursing courses.
- Achieve a minimum 75 percent average or higher in all nursing courses.
- Meet state, institutional, licensure and other agency rules as applicable.
- TSI-obligated students seeking an associate degree or a certificate level 2 must be TSI complete or exempt in reading, writing, and mathematics.
- Submit Application for Initial Licensure to Texas Board of Nursing 120 days prior to graduation.
- Submit NCLEX-RN application to Pearson Vue 30 days prior to graduation.

**ADN Course Challenge**
The Challenge option is available to transfer students from accredited ADN Diploma, other ADN, and/or BSN programs if the following requirements are met:

- Admission to Central Texas College.
- Completion of all admission requirements to the ADN Program.
- Submit proof of eligibility for readmission to the program from which transferred.
- Composite/overall and lab science GPA of 2.8 or higher.
- Have no prior enrollment at CTC in the course to be challenged.
- No grade lower than a C on a comparable course from the program from which transferred.
- Meet the pre- and co-requisites of the course and complete the nationally normed testing requirements of the course to be challenged.
- Submit a letter requesting approval to challenge a nursing course to the Department Chair or Admissions and Standards Committee.
- Receive the approval of the Department Chair or Admissions and Standards Committee, Semester/Level Coordinator and course Lead Instructor of a first, second and/or third semester nursing course to be challenged.
- Contact the Semester/Level Coordinator or Lead professor designee to be provided with a syllabus, progression and nationally normed testing requirements, and a list of required texts and learning guides.
- Challenge the course one time only.
- Provide a minimum of two weeks’ notice regarding the challenge exam date. The exam will be taken in the CTC Testing Office; you must bring a picture ID. The examination fee is due to the Testing Office on the date the student tests; fees are subject to change and are nonrefundable. The appropriate nationally normed test fees (HESI) will be paid to the Business Office and are nonrefundable and subject to change. Attain a final score of 80 or higher to receive evaluated credit. The challenge exam is an instructor-made comprehensive exam up to 100 items, and will include dosage calculations. The exam may include a written or technology based requirement.
- Meet the CTC residency requirement of 25 percent of the degree plan.
- Be aware that a minimum of six semester credit hours with a grade of “C” or higher must be earned in the Central Texas College system along with a request for evaluation before any evaluated credit for the challenge exam is placed on the transcript.
- Upon successful challenge of a course with an examination grade of 80 or more, the transferring student must apply to the Admission and Standards Committee for admission to the appropriate semester. Admission is contingent upon space availability; admission the semester immediately following the challenge exam is not automatic.
- Complete the A.D.N. Program within four years of first time enrollment in RNSG 1413 or its equivalent.
- Refer to the CTC College Catalog for additional information per program.
Estimated Cost of the Associate Degree Nursing Program
Costs are approximations and are subject to change.

- Tuition - Refer to the current CTC Course Schedule Bulletin
- Books and other learning tools – Approximately $750.00/Semester
- HESI(A2) - $40.00.
- 11 Panel Drug Screen – $45.00 estimated average
- Morpho Trust Criminal Background Check – $48.25.
- Physical Exam, Immunizations – Dependent upon facility and provider
- Nursing Lab Kit - $312.00 (Cashier’s check or Money Order made out to Grace Training Supplies)
- Uniform – Approximately $110-$130 for 2 sets of scrubs with 1 warm-up jacket and 3 patches.
- Transportation Expenses – Dependent upon clinical rotations/assignments:
  The Nursing Department utilizes several clinical agencies. Students are responsible for transportation between home, college and the health agencies located in Killeen, Lampasas, Copperas Cove, Temple, Waco and Gatesville. All students are expected to travel to and from these areas at their own expense.
- Application for Initial Licensure to the Texas Board of Nursing (TBON) - $125.00 (subject to change; Refer to www.bne.state.tx.us website for current fee completed in last semester)
- NCLEX-RN® Application - $200.00 (subject to change; completed in last semester).
- Participation in student organizations: CTC Student Nurse Association - Dues $80.00 for 2 years – Optional, but participation is encouraged.
Compliance Policies

Class Attendance
The Department of Nursing abides by the College Attendance Policy published in the CTC College Catalog. Regular attendance for class and clinical is expected. Class attendance will be kept by the faculty. Counseling, verbal and written, will be implemented if there is poor performance by a student in either the classroom or clinical area in correlation with excessive class absence. If absences occur from the classroom, it is the student's responsibility to obtain missed material from peers. Absences in clinical courses will result in loss of points and possible course failure. The faculty reserves the right to adjust the student’s classroom grade based upon classroom performance/behavior/civility.

Excessive Absence
Absences from classes for any reason must not exceed CTC standards. Because objectives can vary from department to department and from course to course, the instructor shall inform students of specific course objectives at the initial class meeting. A student who is not meeting course objectives may be withdrawn from the course at the discretion of the instructor. If a student has not attended class by the 12th class day of a 16 week semester or the 6th class day of an 8 week term, they will be dropped by the instructor with a grade of “W.” A student may be administratively withdrawn from any class when absences exceed a total of four class meetings for a 16 week course or three class meetings for less than 16 week courses and; in the opinion of the professor, the student cannot satisfactorily complete the course. The final decision rests solely with the professor.

Tardiness
Students are required to be in the classroom on time. Instructors may choose to lower a student’s grade because of tardiness. Excessive tardiness is disruptive to the educational process and may result in disciplinary action. Due process and the right to appeal will be provided to students subject to disciplinary action. Details can be found in the Student Handbook, available in the Office of Student Life Activities.

Computer Accessibility
Accessibility to computer hardware and software that will support the completion of assignments on the internet, DVD, CD, or other electronic delivery is supported on campus if a personal computer is not available.
DEPARTMENT OF NURSING
COMPUTER LABORATORY POLICY

This document is designed to specify the rules and requirements that govern the use of software and hardware in the computer laboratory. Students who violate the agreement will be expelled from the lab and have their laboratory privileges revoked. All software and documentation provided in the computer laboratory are copyright protected. This policy is designed to safeguard those copyrights and protect the laboratory from viral infections. The Computer Laboratory business hours are Monday – Thursday; 8:00am – 5:00pm and on Friday 8:00am – 11:30am. Note: Schedule is subject to change. Check for postings of close/reserved dates and times.

1. Users must be enrolled in at least one (1) CTC course, or obtain permission from the Nursing Department Chair.
2. Student will be allowed access to the computer lab after access policies are signed. Student must show: Current CTC photo ID to use the computer lab.
3. Student must sign in before beginning work in lab. If students leave the room for any reason, they must sign out of the computer lab.
4. Food, drinks, beverage containers or tobacco products will not be brought into lab.
5. Non educational game playing is not permitted on computers in the computer laboratory. Any student found playing games will be disciplined by department chair.
6. No children are permitted in the lab. Students with children will be asked to leave.
7. Please silence all cell phones while in the Computer Lab. All calls must be taken outside of computer laboratory.
8. If any computer equipment malfunctions, users should not attempt to repair it. Please notify a member of the Computer Lab staff immediately.
9. Students may not change, modify, or update computer configurations.
10. Loud talking is prohibited. Please help us maintain a library-like atmosphere. Please refrain from having group meetings and cell phone conversations in the lab, as they are a distraction to your fellow users. If deemed necessary, a member of the Computer Lab staff may ask you to leave.
12. Any behavior which is detrimental to the teaching or learning environment will result in the Lab Manager/ Lab Assistant asking the student to leave. If student fails to quietly and promptly leave the computer lab, Campus Police will be called to escort the student from the lab, and all computer lab privileges will be revoked.

I understand when I signed this document that I acknowledge that I understand my responsibilities as they pertain to the rules and conduct expected of me while using the computer lab of the Nursing Departments at Central Texas College. I further acknowledge that I have been made aware of the consequences of not complying with the rules and requirements as listed in this document.

STUDENT SIGNATURE: ___________________________ DATE: ___________________________
INTERNET ACCEPTABLE USE POLICY

Use of the Internet provides great educational benefits to students. Unfortunately, however, some material accessible via the Internet may contain items that are illegal, defamatory, or potentially offensive to some people. Access to the Internet is given as a privilege to students who agree to act in a considerate and responsible manner. We require that students read, accept, and sign the following rules for acceptable online behavior.

1. Students are responsible for good behavior on the Internet. General institutional rules for behavior and communications apply.

2. College personnel/administrators may review files and communications to maintain system integrity and ensure that users are using the system responsibly. Users should not expect that files will always be private.

3. Internet access in the Nursing Departments is for classroom assignments only.

4. The following are not permitted:
   - Sending or displaying offensive messages or pictures.
   - Using obscene language.
   - Harassing, insulting, or attacking other users.
   - Damaging computer, computer systems, or computer network.
   - Violating copyright laws.
   - Intentionally wasting limited resources, including the use or “chain letters” and messages broadcast to mailing list or individuals.
   - PERSONAL E-MAILING.
   - SOCIAL NETWORKS.
   - CHATTING. Chat rooms are off limits.
   - INSTANT MESSAGING.
     - Install software in the lab. With the exception of clinical VCE for clinical labs.
     - Online game playing.
     - Saving files to the Workstation hard drive—you must use a USB/Thumb drive.

5. Violations will result in the loss of access to the Nursing computer laboratory as well as other disciplinary or legal action.

I have read the rules for acceptable online behavior, and understand the rules, and agree to comply with them. Should I violate the rules, I understand that I may lose network privileges at Central Texas College.

STUDENT SIGNATURE: ____________________________       DATE: ____________________
Nursing Student Testing Procedures

1. Exam dates will be given to students at the beginning of each semester.
2. All major exams include multiple choice and alternate format questions based on the NCLEX format except for dosage calculations for administration questions in selected courses. All exams are timed. Generally, 1.5 minutes per question is allowed, provided the class schedule allows. Students who arrive late for an exam will not be given extra time beyond the allowed time from the start of the exam. Time allotted for the Final Exam is 2 hours and will follow CTC College Catalog policy.
3. Attendance at Examinations: Written examinations will be given on dates noted on the daily plan. If a student cannot attend an examination, the course coordinator/professor must be notified at their office number or (254) 526-1266 or (254) 526-1890 before the examination is given. It is your responsibility and a requirement to notify the professor in advance of any absence to retain the privilege of sitting for a make-up examination without grade penalty. Students requiring a make-up exam will report to the Department of Nursing at 9 am on the Friday following the missed exam. If the rescheduled opportunity is missed there will be no other opportunities afforded.
4. Make-up exams may be in a variety of forms to include essay.
5. A student must achieve a minimum 75% test average in all nursing theory courses; 75% average in clinical nursing courses.
6. Assigned seating may be used during exams.
7. SCANTRON forms and exam booklets are turned in to the instructors monitoring the exam and will be counted at the end of each exam. No exams may be removed from the testing room. Scratch paper, if used, will be turned in with the exam.
8. Once the student has turned in the ParScore™ scantron, they will no longer have access to it and only this document will be accepted for exam answers. It will not be manipulated by the student or faculty in any form. For example: by adding, omitting, or changing of the answers with the exception of adding alternate items and/or math answers by the faculty.
9. A group review of the exam will be scheduled only on campus for all exams to include the final.
10. Individual review by students with the instructor must be scheduled within a week of the exam being administered. Test reviews will be done only in the nursing building in faculty offices. Students may review only the most recent test. (In other words, one test cannot be reviewed after the next test is given.) Review of all tests at one time will not be allowed.
11. Grades will not be posted.
12. The faculty reserves the right to adjust the student classroom grade based upon classroom behavior/civility/performance.
13. Students with documented disabilities may request accommodations for these exams. The student must contact their instructors at the start of each semester to activate and adopt approved accommodations.

(Reference: ADN Curriculum Committee minutes 11/05, 4/12, 05/12).

Health Educations Systems Inc., (HESI)

HESI Testing: Health Educations Systems Inc., (HESI) testing must be completed by the assigned due date. Failure to successfully complete all assigned exam(s) will result in an “Incomplete” (IP) grade for the course. The student will complete the required proctored Evolve Reach Specialty (HESI) exam for each designated RNSG course as scheduled by the faculty. The student must successfully complete the required HESI exam(s) for each semester at or above the HESI National Average Score on the scheduled date. Students who do not score at or above the HESI National Average Score will be required to complete remediation. Failure to complete remediation requirements will result in an incomplete (IP) for the course.
An Evolve Reach Specialty Exam will be scheduled in Semesters 1, 2, and 3 during these courses: RNSG 1413 (Foundations Exam), RNSG 1229 (Foundations Exam), RNSG 1331 (Health Assessment Exam), RNSG 1347 (Pharmacology Exam), and RNSG 2213 (Mental Health Exam). These exams will count toward the course participation grade.

If the composite score of the Evolve Reach Specialty Exam is less than the HESI National Average Score, a required counseling session with the course faculty will be held.

Statistical data generated according to student responses will be available through the Evolve site https://evolve.elsevier.com/staticPages/s_index.html for each student for the purpose of self-directed remediation in identified areas that do not meet the HESI National Average Score.

**HESI Testing in Semester 4:** The RN Exit exam will be given during semester four in RNSG 2331. The exam will be administered and completed on the scheduled dates. Two attempts will be required for completion of the RN Exit exams. The RN Exit exams provide a conversion score, which is a weighted percentage score. The highest conversion score attained will be used as the student’s final exam grade.

All HESI RN Exit Exams (two) are mandatory for all fourth semester students. If the recommended score of 850 is not obtained on RN Exit 1, mandatory self-remediation is required PRIOR to taking the next scheduled exam. A counseling session must be held with a faculty facilitator and remediation must be documented. Counseling and remediation is mandatory, failure to take both exit exams or complete required remediation will result in course incomplete (IP). The final grade will not be configured until meeting the above requirements.

Any student repeating a course will be required to re-take the HESI exam associated with that course even if the student passed the HESI exam the first time.

Students with documented disabilities may request accommodations for these exams. The student must contact their instructors at the start of each semester to activate and adopt approved accommodations.
Familiarity with the full-body patient simulators, manikins, task trainers, and equipment prepares the student for his/her learning experience in the lab. Simulation affords the students an environment that provides higher levels of competence in clinical and critical thinking skills and replicates actual patient care procedures. The goal in simulation is to build confidence and competence prior to traditional clinical rotations. The lab provides full-body patient simulators and task trainers that are portable and have realistic anatomy and clinical functionality. The patient simulators provide simulation-based challenges and test students’ clinical and decision-making skills during realistic patient care scenarios. To provide a distraction-free environment please be mindful of your neighbors and maintain civility.

- Students, Faculty, and Staff are expected to abide by the lab policy.
- Simulation Center Hours are from (8:00 AM - 5:00 PM).
- Simulation Personnel, Faculty, and staff are expected to jointly prepare/set-up the simulation environment, and when completed with the exercise/simulation/skill practice and check-off to return the room/space back to its original condition.
- Students are expected to leave the bedside in order with bed neatly made and side rails up demonstrating proper bedside procedure.
- Pictures or audio/video-taping by students are not permitted in the simulation labs without simulation faculty or Department of Nursing (DON) permission. HIPAA and FERPA rules apply.
- Students will keep in mind during assigned simulation training video-taping will be used for debriefing purposes. Students will be provided a confidentiality agreement and release form to sign.
- Students will be required to be in proper clinical attire following CTC DON Dress code while in the simulation labs and accompanied by assigned faculty.
- All students are required to participate in an orientation to the lab at the beginning of each semester.
- All patient simulators are operated by trained faculty or staff. Students cannot operate the patient simulators. Do not disconnect or move the patient simulators.
- The labs are simulating a hospital environment; therefore, always wash hands before and after when working with the manikins.
- Respect the equipment and manikins at all times. Treat manikins respectfully, as you would a patient. Do not use markers, ink pens, pencils, acetone, iodine, or other staining medications or material on the manikins.
- Students are expected to:
  A) Stay off the hospital beds and gurneys except when the instructor is conducting health assessments or other procedures.
  B) Not stand on hospital beds, gurneys or chairs, sit or lie on tables at any time
  C) Not place personal items on the beds, or place heavy items on the bed or bedside table (e.g., suction pump, monitors).
  D) Identify all textbooks, lab bags, and personal items with your name. Items left in the lab will be turned-in to secretaries’ office and will be turned-in to the Campus Lost & Found after 2 weeks.
  E) Keep aisles clear at all times. Place your personal belongings out of the way of others. Book bags should be left in your vehicle if possible to prevent congestion while training.
  F) Use a reasonable voice level. Disruptive behavior will not be tolerated and disruptive students may be asked to leave at the discretion of the lab personnel, faculty or staff.
- The lab audio/visual system is active at all times and may be monitored continuously.
- No food or drink (this includes containers) allowed in the lab. Faculty and staff may place a drink at the Nurses’ Station.
- All incidents or accidents (lacerations, bruises, needle sticks, fall, etc.) must be immediately followed up with First Aid and Standard Precautions and notify faculty immediately of the incident. The faculty/staff must complete an Incident Report Form and submit it to the Chair, Department of Nursing.
- Wireless communication devices, personal computers, and cellular phones are not permitted.
- Do not re-use or re-cap contaminated needles. Properly place all sharps and syringes in designated sharps containers. If the sharps container is full notify the lab staff. Do not throw sharps in the trash.
In consideration of the educational opportunity to obtain practical experience in a simulated patient environment, I understand the significance of confidentiality with respect to information concerning the simulation scenarios, the simulated patients, and fellow students. I understand that active participation in the simulation scenarios is part of the course requirements. In addition, I understand that the simulation scenarios are videotaped and used for debriefing purposes and shared only with appropriate faculty.

I agree to adhere to the following conditions and guidelines:

- The simulation mannequins are to be treated with respect and handled with care as if they were live patients.
- As the simulation mannequins are to be treated as live patients, I will uphold the requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other Federal or State Laws regarding confidentiality. I agree to report any violations of confidentiality that I become aware of to my facilitator or instructor.
- All patient information, including but not limited to diagnosis, interventions, laboratory values, medications, and vital signs, used in the simulation scenario is privileged and confidential regardless of format: electronic, written, overheard or observed. As such, any viewing, discussion, or disclosure of this patient information to another student is a violation whether intentional or unintentional and may lead to disciplinary action as outlined in the student handbook.
- Patient information may be viewed, used, disclosed, and discussed with other students participating in the simulation scenarios only as it relates to the performance of my educational duties in the simulation scenario, or per the instructors directions. Any viewing, discussion, or disclosure of this information outside of the simulation environment is a violation of HIPAA and other State and Federal Laws.
- The simulation laboratory is a learning environment. All students are expected to demonstrate behaviors that maintain this respectful and supportive learning environment. The students participating in the scenario should have everyone’s respect and attention. All scenarios should be treated in a professional manner.
- No Betadine and no ink pens will be used near the mannequins. In addition, 20g IV catheters or smaller will be used for IV starts.
- The undersigned authorizes and consents to the use of the undersigned’s name, voice, photograph, video recording, and likeness by the Central Texas Nursing Program without reservation or limitation and with the understanding that the undersigned will not receive compensation.
- Central Texas College has the absolute rights and permission, with respect to the photographs and videotaped images taken of me or in which I may be included with others, to use such images for educational purposes and training only. This authorization and release shall apply to the person(s) for whom the photographs or videotaped images were taken for educational purposes only.
- I have read and understand the Simulation Lab Policy, and have been provided a copy.

Signature: _____________________________  Printed Name: _____________________________

Date: __________  Course: _______________  Instructor: _____________________________

4/2014
NURSING PROGRAMS SMOKING POLICY

I. PURPOSE
This policy lessens the health risk of tobacco usage to students, patients and all employees by prohibiting its use in all department related activities.

II. POLICY

A. This policy applies to all students in the ADN and VN programs. At no time will nursing students be allowed to smoke, or use a device producing an illusion of smoking while in CTC scrub uniforms or lab coat. This policy is in effect for Simulation & skills lab, all clinical sites, and alternate clinical settings and when representing the CTC DON at school and community events.

B. Smoking and the use of smokeless tobacco products, and any device producing an illusion of smoking is not permitted on campus (refer to CTC Smoking Policy No.230).

C. All students and employees have a responsibility to comply with this policy.

III. PROCEDURES
Patients may be upset by the odor of smoke on caregivers’ clothing, hair, etc. If faculty, staff, patients or family members/visitors report concerns or problems due to odors on the student, the student will be sent home for the day and a grade of zero will be given on the clinical evaluation form for the day.

*See the current CTC Student Handbook for smoking and tobacco use policy. Failure to comply will result in campus citation. Repeat violators may be subject to fines and discipline pursuant to the Student Code of Conduct.
Social Media Policy

PURPOSE:
“Social and electronic media have tremendous potential for strengthening personal relationships and providing valuable information to health care consumers, as well as affording students enrolled in Central Texas College, Department of Nursing a valuable opportunity to interface with colleagues from around the world. Students need to be aware of the potential consequences of disclosing patient-related information via social media, and mindful of affiliated agency policies, relevant state and federal laws, and professional standards regarding patient privacy and confidentiality and its application to social and electronic media. By being careful and conscientious, students enjoy the personal and professional benefits of social and electronic media without violating patient privacy and confidentiality (Adapted from A Nurse’s Guide to the Use of Social Media, National Council of State Boards of Nursing, (NCSBN), Jan.3, 2012).

The Department of Nursing follows the Central Texas College Social Media Guidelines, HR Policy 295-Computer Usage, Texas Nursing Practice Act, and the Texas Board of Nursing Rules and Regulation relating to Nurse Education, Licensure and Practice related to social media. As health care professionals we must also follow HIPPA Guidelines. Student conduct is expected to be ethical, respectful, civil, and professional in all types of media/networking. Failure to comply with this policy may result in disciplinary action, which may include suspension and expulsion.

DEFINITION OF SOCIAL MEDIA:
As used in this policy, “social networking” or “social media use” means communicating with others over the Internet. Internet posting is any information transmitted electronically, such as text, files, pictures, video, audio, artwork, et cetera. This includes, but not limited to Facebook, Twitter, LinkedIn, YouTube, MySpace or blogs and can also include media sites that are offered by television networks, newspapers, and magazines. Transmission may be between individuals or businesses, or to websites, by browser, cell phone, email or any other electronic device or tool.

GENERAL GUIDELINES:
A. HIPAA
Federal law reinforces and further defines privacy through the Health Insurance Portability and Accountability Act (HIPAA). HIPAA regulations are intended to protect patient health information (PHI) by defining individually identifiable information and establishing how this information may be used, by whom and under what circumstances (See HIPPA policy within this handbook).

- Students are strictly prohibited from transmitting by way of an electronic media any patient-related image.
- Students must not share, post or otherwise disseminate any information or images about a patient or information gained in the nurse/patient relationship with anyone unless there is a patient-care related need to disclose.
- Students must not identify patient by name or post or publish any information that may lead to the identification of a patient.
- Students must not make disparaging remarks about patients, fellow students, instructors, or staff at affiliated agencies, even if the identity is concealed.
- Students are not to participate in acts of cyber-bullying. Cyber-bullying is when someone purposely embarrasses, harasses, or torments another using digital media.
- Students must not take photos or videos of patients or their health information record on any electronic or personal devices, including cell phones.
- Students will not interact with patient using social media.
• Students must maintain professional boundaries in use of electronic media. Online contact with patients or former patients blurs the distinction between a professional and personal relationship.
• Students must promptly report any identified breach of confidentiality or privacy to the faculty.
• Students must be aware of and comply with the affiliated agency policies regarding use of agency owned computers, cameras and other electronic devices, and use of personal devices in the clinical setting.
• Students must not post content or otherwise speak on behalf of the Central Texas College, Department of Nursing.
• Students will not use the Central Texas College, Department of Nursing logo or any other CTC marks or images on any personal online site (CTC Catalog).
• Student will not use the Central Texas College, Department of Nursing name to promote or endorse any product, cause or political party or candidate (CTC Catalog).
• Student will not misrepresent Central Texas College, Department of Nursing in language, image or behavior.

C. Excerpts from NCSBN
• Merely removing someone’s name (or face, in the instance of images) from a communication does not necessarily protect that person’s identity.
• It is a mistaken belief that content deleted from a site is no longer accessible. The moment something is posted it lives on a server that can always be discoverable in a court of law.

POTENTIAL CONSEQUENCES:
Any violation of this policy will result in disciplinary action, which may include suspension and expulsion from the Department of Nursing Program.

I have read the Social Media Policy and understand the rules, and agree to comply with them. Should I violate the rules I understand that this may result in disciplinary action.

________________________________________                       __________________________
Student Name (Print)                                          SSN

_______________________________________                   __________________________
Student Signature                                              Date

Fall 2013
Clinical Rotation Compliance

Clinical Attendance

- A Nursing Student must inform faculty if they are assigned to a nursing care area/unit on which they are employed.
- Clinical placements for Student Nurses are ultimately at the discretion of the faculty members for each clinical course.
- **Students may not work the night shift immediately prior to the beginning of the clinical day shift.**
- The student will be required to attend mandatory facility in-processing and/or training and/or orientation at times other than regularly scheduled clinical/class hours. The student will not be able to attend clinical without required mandatory training. **Failure to comply with the mandatory requirements for admission to the affiliated facility or failure to attend the designated orientation as scheduled and on time will result in administrative withdrawal from the clinical course.**
- Students in the perceptorship program may be required to work various shifts to include weekend and evenings.
- After acceptance into a program, the following must be on record: Written documentation of medical release to return to class/clinical after serious illness, injury, surgery, pregnancy, etc.

PRECEPTORSHIP - STUDENT SELECTION CRITERIA

The following criteria shall be utilized by the Preceptorship Student Selection Committee which will consist of a representative from each Semester Team.

1. Successful on all RNSG courses from point of entry into the program.
2. Consistently attends clinical prepared and on time.
3. Abides by/follows all rules and policies of the Dept. of Nursing, CTC, NPA, and assigned clinical facility.
4. Demonstrates problem solving and critical thinking skills in the clinical settings.
5. Maintains professionalism at all times.
6. Final clinical placement is at the discretion of the faculty. (revision 12/1/2011)

TEXAS BOARD OF NURSING   3.8.3.a. EDUCATION GUIDELINE

Precepted Clinical Learning Experiences

Revised: 1/17/2013

Student Responsibilities:

1. Coordinate personal schedule with the preceptor’s work schedule to avoid any conflicts.
2. Maintain open communications with the preceptor and faculty.
3. Maintain accountability for own learning activities.
4. Prepare for each clinical experience as needed.
5. Be accountable for own nursing actions while in the clinical setting.
6. Arrange for preceptor's supervision when performing procedures, as appropriate.
7. Contact faculty by telephone, pager or email if faculty assistance is necessary.
8. Respect the confidential nature of all information obtained during clinical experience.
By signing my signature below:

- I agree to abide by the Clinical Rotation Compliance policies listed in this handbook.
- I understand that any disciplinary action taken against me may be based on departmental, institutional and TBON Rules such as 217.11 Standards of Professional Nursing Practice, 217.12 Unprofessional Conduct, and 217.13 Good Character.
- I understand that as long as I have my uniform on (even after clinical hours) that I will be held to professional behavioral standards. I understand that when I am attired in my CTC nursing uniform (even after clinical/lab hours), I will be held accountable for upholding professional behavior and conduct.
- I understand that the designated nursing uniform which includes name tags and badges will be worn only for assigned CTC nursing activities as allowed by the nursing faculty of Central Texas College.
- I understand and will abide by the CTC No-Smoking policy.
- I understand and will abide by the Department of Nursing No-Smoking policy while in school uniform policy when on campus or at clinical.
- I agree that I must inform clinical course faculty if I am assigned to a nursing care unit on which I am employed.
- I understand that clinical placements are at faculty discretion.
- I understand that I am not to work the night shift immediately prior to the beginning of the clinical day shift.
- I understand that I am required to attend mandatory facility in-processing and/or training and/or orientation at times other than regularly scheduled clinical/class hours. I will not be able to attend clinical without required mandatory training. I understand that failure to comply with the mandatory requirements for admission to the affiliated facility or failure to attend the designated orientation as scheduled and on time will result in administrative withdrawal from the course.
- I understand that written documentation of medical release to return to class/clinical must be in my record after serious illness, injury, surgery, pregnancy, etc.
- I understand that I am not to misrepresent CTC or the Department of Nursing.
- I understand that I may not participate in any activity in which it could be misconstrued that I am representing the Department of Nursing, or acting as a Student Nurse, whether on or off campus, for which I have was not been given Department of Nursing/or faculty permission.
- I understand that failure to abide by these rules may result in disciplinary action, including expulsion and reporting to the Board of Nursing.

________________________________________  _________________________
Student Name (Print)                     Student ID Number

________________________________________  _________________________
Student Signature                        Date
Central Texas College District Student Clinical Program
RELEASE AND ACKNOWLEDGEMENT of ASSUMPTION OF RISK

In consideration for participating in the Central Texas College District Clinical Program [“Program”] for the tenure of the program with expected end date _____________________, I _____________________, in full recognition and appreciation of the possible
dangerous and hazards inherent in the Program, including, but specifically not limited to, any
motorized vehicle or equipment use or transportation whether provided by Central Texas College
District, myself or another, or administration of medication associated with, during, or as a result of
the Program, I hereby agree to and do assume all of known and unknown risks and
responsibilities arising out of my participation in the Program, and any other activities undertaken
as an adjunct thereto.

I hereby expressly do for myself, my heirs, assigns, and personal representatives waive,
release, discharge Central Texas College District and all of its Officers, Directors, Trustees,
employees, volunteers, and agents from and against any and all claims, demands, actions, or causes
of actions that may arise as a result of any acts causing property damage, personal injury, or death
as a result of my participation in the Program or any activities undertaken as an adjunct thereto.

I also hereby expressly agree to hold harmless, and indemnify Central Texas College
District and all of its Officers, Directors, employees, volunteers and agents from and against any
and all claims, demands, actions, or causes of actions that may arise resulting in property damage,
personal injury or death as a result of my participation in the Program or any activities undertaken
as an adjunct thereto.

I acknowledge that I am signing this Release only after having been given full opportunity to
investigate and ask questions about the Program and possible hazards. I voluntarily sign this
Release for the satisfactory consideration as stated herein.

_____________________________  Date: ____________________
Student Signature

_____________________________
Program
DATE:

NAME of STUDENT:

The above named student is enrolled in the CTC Nursing Program and is expected to perform the following duties and activities; please mark Yes or No designating the student’s ability to carry out each and clearly define all limitations:

YES NO 1. Travel in a motor vehicle.

YES NO 2. Sit, stand, and walk for up to 12 hours per day, including walking long distances without assistive devices or apparatus.

YES NO 3. Lift, move, and transfer patients during the clinical area and clinical lab experiences up to 12 hours per day.

YES NO 4. Twisting, bending, stooping, kneeling, and reaching during aspects of client care (bathing, making beds, setting up and monitoring medical equipment up to 12 hours per day.

YES NO 5. Manual dexterity and coordination to write clearly and precisely or type; to perform various nursing procedures; and grasp and control medical equipment as necessary such as objects/equipment of various sizes, weights and shapes up to 12 hours per day.

YES NO 6. Lift up to 35 pounds * or assist with lifting various weights up to 12 hours per day.

YES NO 7. Perform physical skills such as chest compressions, moving and lifting equipment, pushing a wheelchair/gurney/stretcher holding various weights, assisting patients with activities of daily living and medical treatments up to 12 hours per day.

YES NO 8. Ability to care for all categories of patients including unimmunized, immunosuppressed, infectious, and oncology patients.

YES NO 9. Visual/hearing acuity- assessment of client’s health status when inspecting, listening and observing for changes in color, physical appearance, and non-verbal behavior. Able to accurately read medication labels and prepare medications. Reads written communication and monitors medical equipment findings up to 12 hours per day.

YES NO 10. Speech/Communication - Able to communicate in both verbal and written formats; and interact with clients, staff, and faculty supervisors up to 12 hours per day.

Is the student medically cleared to return to classroom instruction without limitations including effects of medications? Yes / No - If “no”, stated date of return. Is this future return date firm or anticipated? **

Is the student medically cleared to return to clinical practice without limitations including effects of medications? Yes / No - If “no”, stated date of return. Is this future return date firm or anticipated? **

Please state limitations for each “No” above, may continue on the back of this form:

________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

If hospitalized, a copy of the discharge instructions must be attached.

Signature of Healthcare Provider Date Address

Printed Name or Business Stamp: *Follows the Safe Patient Handling Guidelines

** Student will be required to provide further medical release prior to retuning if return date is anticipated.

Dec12 approved by ADN Curriculum/Rev. Oct 2013

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**Associate Degree Nursing Student Dress Code**

I. Classroom: Sexually oriented languages/pictures on clothing are prohibited in the classroom.

II. Clinical: Except for designated areas, full uniform is to be worn for all experiences in clinical facilities.

A. Uniforms
   1. 4-Pocket Wine Colored Top.
   2. 4-Pocket Wine Colored Pant.
   3. Wine Warm-up Jacket.
   4. CTC Nursing Patch.
   5. White T-shirt (optional).
   6. White leather duty shoes, (protective: does not allow penetration of fluids), clean, polished, with clean, white shoelaces and white crew socks or white stockings. **No clogs or canvas shoes are permitted.**

B. Name tags
   1. CTC Laminated Student ID Card. (You may purchase an ID card holder from CTC Bookstores; price subject to change.)
   2. Two name tags, 3” by 1-1/4”, Burgundy with white letters to read:
      J. Doe, SN
      Central Texas College
      ADN Program
   3. Watch capable of measuring seconds.
   4. Black ink ball point pen. **NO ERASABLE INK**
   5. Pocket sized note pad.

III. The CTC nursing uniform, which includes name tags and badges, will be worn only for assigned CTC nursing activities; students may not participate in any activity in which it could be construed that they are representing the Department of Nursing or acting as a student nurse when they have not been given DON or faculty permission.

IV. Lab coats, when worn, must be clean, white and pressed. The student must be identified with a name tag. Lab coats, with a CTC patch on the sleeve, will be worn as directed by the faculty.

V. White cardigan sweaters or wine warm up jacket may be worn with the uniform.

VI. White, black or navy blue lumbosacral supports may be worn under uniform top or jacket.

VII. Alternate uniform/street clothes.
    Conservative street clothes may be required by some agencies instead of a uniform. They must be clean and pressed. The length of a dress/skirt must be no shorter than mid-knee. The uniform style may be modified as cultural/religious needs dictate.

**Unacceptable clothes for alternate uniforms include:**
1. Jeans and mini skirts
2. Wrinkled, dirty, tattered clothing and shoes
3. Shoes without hose or socks
4. Thongs and clogs
5. Tank tops, sun dresses, sweatshirts, t-shirts (meant to be worn as an undergarment), muscle shirts, crop tops, shorts and swim suits
VIII. Jewelry, Ornaments
The following jewelry may be worn with the student uniform: wrist watch, one small stud (no larger than 6mm) per ear. No chains, necklaces, rings, dangling earrings, bracelets, nose, eyebrow, lip, tongue, etc. (exposed) rings are allowed. Attaching, affixing, or displaying objects, articles, jewelry, or ornamentation to, though, or under the skin, tongue, or any other visible body part is prohibited.

This statement applies to whenever the student is fulfilling laboratory assignments, whether in alternate or school uniform.

IX. Personal Appearance
1. The student must be clean and free from odor at all times.
2. Makeup may be used in moderation.
3. No gum chewing.
4. The hair must be arranged so that it does not fall below the collar for males and females. If hair combs or pins are used to secure the hair, please select plain ones. The hair style should be neat, tailored and well controlled without hair ornaments and a natural hair color. When beards and mustaches are allowed in the clinical facility, they must be neatly trimmed; otherwise, males must be clean shaven.
5. The nails must be clean and kept at fingertip length and no nail polish is allowed.
6. Artificial Nails are prohibited. Students will not be allowed in the clinical setting with artificial nails. It is an infection control issue.
7. The student will be obligated to follow the policies of the clinical facility regarding body art, jewelry, etc.

X. Refer to the Social Media Policy & Smoking Policy for expected behaviors while in uniform.

Medication Administration
During the one or two year course of instruction leading to the Associate Degree in Nursing, the student will acquire the requisite knowledge, skills and abilities which will enable the safe administration of medications. To this end, the faculty of Central Texas College Department of Nursing sets forth these policies governing medication administration.

General Policies
1. The instructor will teach and supervise the preparation of medications on a one-to-one basis.
2. The student nurse will administer only those medications which they have prepared.
3. The student must identify the patient and explain any necessary procedures to the patient.
4. Before administering any medication ordered for the patient, the student must check the order on the chart; know the action of the drug, dosage, side effects, nursing implications and the reason for its administration to that particular patient.
5. The instructor will teach and supervise the administration of medication on a one-to-one basis until the student reaches the third semester. At this level the student will be under the continuous supervision of the instructor until such time as the instructor considers the student capable of administering medications safely without continuous supervision.
6. Each instructor will specify to the respective head nurse which student nurses are to give medications and to whom the medication will be given.
7. In addition to the policies herein stated, the faculty and students of this school will adhere to any such additional written policies identified by the affiliating institution.

Policies Specific to Each Course
The administration of medications will be included in the student experience as follows:
1. During the first semester, the student will be taught and will practice the skills of administering medication via the oral, topical, vaginal, rectal, gastric tube, eye, ear, and nasal routes. First semester students will not administer injections to a client in the clinical setting.
During the second semester, the nursing student administers medications via the above routes in addition to utilizing the intramuscular, subcutaneous, intradermal route as well heparin/saline flushes intravenously and initiating intravenous infusions and heparin locks. The nursing student will be taught Intravenous Piggy Back (IVPB) content; the student may hang IVPB in Semester II at the discretion of the professor and in accordance with agency policy and procedures.

In the third semester, the nursing student administers medications via the above routes as well as including administration of IVPB and syringe pump medications. The student may be taught the procedures for administering antineoplastic drugs, administering drugs via intravenous bolus, and administering blood and blood components. Medication policy specific to RNSG 2362 Care of Children and Families (Pediatrics) is outlined in that syllabus.

During the fourth semester, the nursing student will administer medications via all of the above stated routes and Intravenous Push medications (IVP) under direct supervision of faculty, per faculty discretion and per facility policy.

At no time will a student be allowed to administer any of the following: blood or blood components, antineoplastic drugs, oxytocin or magnesium sulfate to an antepartum patient, or experimental drugs.

**Associate Degree Nursing Program Policy on Invasive Procedures**

Students will be under the direct supervision of a CTC Faculty in the implementation of all invasive procedures. Faculty will have discretion in allowing students to perform these procedures independently. Students are expected to always consult with the faculty prior to any invasive procedure regardless if supervised or performed independently. At no time are students allowed to practice any invasive procedure(s) on any human or animal. Consequences will fall under the prevue of the Department of Nursing per professional standards.

**Exposure Control Plan**

It is the intent of the Central Texas College Department of Nursing to promote quality patient care and safety for patients, students, staff and faculty (see Philosophy).

Thus, due to the current issues concerning communicable disease (e.g., hepatitis, tuberculosis, sexually transmitted diseases and autoimmune deficiency syndrome (AIDS)), please see the following for policies, recommendations and guidelines for students and faculty: the most current copy of the CTC Student Handbook; the Center for Disease Control web site: [http://www.cdc.gov/](http://www.cdc.gov/); [http://www.osha.gov/SLTC/bloodbornepathogens/](http://www.osha.gov/SLTC/bloodbornepathogens/)(Scroll down to bottom of page “What are some examples of possible solutions for workplace hazards”), and [http://www.immunize.org/catg.d/p2011b.htm](http://www.immunize.org/catg.d/p2011b.htm); the Texas Department of State Health Services web site: [http://www.dshs.state.tx.us](http://www.dshs.state.tx.us) and Title 25 Health Services Rule 97.64 adopted April 1, 2004, 29 TexReg 3188; amended to be effective March 5, 2009, 34 TexReg 1433and Rule 97.65 of the Texas Administrative Code (April 2004).

**National Patient Safety Goals**

The Department of Nursing adheres to the National Patient Safety Goals identified by the Joint Commission on Accreditation of Healthcare Organizations. The Joint Commission’s Board of Commissioners approves the National Patient Safety Goals annually. See [http://www.jcaho.org/](http://www.jcaho.org/) for additional information.
Health Insurance Portability and Accountability Act (HIPAA)
Information and Policy
The Department of Nursing adheres to the Health Insurance Portability and Accountability Act (HIPAA). To improve the efficiency and effectiveness of the health care system, the Health Insurance Portability and Accountability Act (HIPAA) of 1996 included a series of “administrative simplification” provisions that required the Department of Health and Human Services (HHS) to adopt national standards for electronic health care transactions. By ensuring consistency throughout the industry, these national standards will make it easier for health plans, health care clearinghouses, doctors, hospitals and other health care providers to process claims and other transactions electronically. The law also requires the adoption of privacy and security standards in order to protect individually identifiable health information. See the following web sites for additional information: http://www.hhs.gov/ocr/hipaa/

In accordance with federal law students will protect the privacy of individually identifiable patient information. Disclosure of patient information on all documents utilized by the nursing department, e.g. journals, and assessment forms, will be prohibited. If the facility permits copying of patient documents all patient data must be unidentifiable.

Patient information disclosure via electronic means such as telephone, voicemail, PDA, e-mail, camera, social networks, and fax will be prohibited. **Students are not permitted to remove any patient medical record from the clinical premises under any circumstances.**

The regulations require health care providers and other HIPAA-covered entities to “promptly” notify individuals affected by a data breach, in addition to the HHS Secretary and the media in cases where more than 500 individuals are affected, according to HHS. Breaches that affected fewer than 500 people must be reported to the HHS Secretary annually.

**What this means for you as a Student Nurse:**
The Office of Civil Rights of Health and Human services can impose civil and criminal penalties for privacy and security violations. Students responsible for breaches can be held personally liable for violations of privacy and security.

**Any breaches of patient privacy or security** should be reported immediately to your clinical instructor.

Protected Health Information (PHI) includes all patient healthcare information including demographic (address, phone #, etc) information, billing information, in any form electronic, paper, verbal.

Examples of Breaches of PHI that should be reported (not inclusive)

- Inappropriate access to PHI by students
- Email, “Twitter” or “Face Book” entries containing PHI
- Paper PHI left unattended in a public area
- Lost or stolen laptops, computers, I-phones, Blackberry or other mobile devices which contain PHI
- Verbal communication about a patient shared inappropriately
- PHI accessed appropriately for business purposes (treatment, payment, healthcare operations), but then disclosed beyond business purposes
- Patient documents provided to wrong patient
- Lost or stolen USB drives, CDs, DVDs, etc that may contain PHI data
- Photos, filming, or recording of a patient, patient record or any reference to a patient on cell phones, cameras, etc without proper patient authorization
What you as a Student Nurse must do to secure PHI:

- Do not access, use, or disclose any patient information except for Health Care Facility or approved Nursing Course purposes
- Patient identifiable information (e.g. age, name, initials and room number, etc…) will not be placed on any documentation including clinical assessment forms and concept maps.
- Do not save patient information to laptops, computers, mobile phones & devices, camera, CDs, DVDs, external drives, USB (flash) drives or any other device
- Do not text/e-mail any patient information between cell phones or other mobile devices
- Never discuss clinical experiences outside of the Classroom/Clinical setting (E-mail, Texting, Blogging, Twitter, Face Book)
- Dispose of paper in the appropriate recycle containers
- Do not carry PHI outside of the Health Care Facility
- Insure documents are provided to the correct patient

I have reviewed the HIPAA information and agree to abide by these guidelines.

Potential Consequences: Any violation of this policy will result in disciplinary action for Unsafe Practice which may result in suspension and/or expulsion. Each case will be investigated on a case by case basis.

Student Printed Name ______________________________    Student Signature__________________________

Safe Patient Handling and Ergonomics

Current practice guidelines set forth by Occupational Safety & Health Administration (OSHA) and the National Institute for Occupational Safety and Health (NIOSH) related to safe patient handling and ergonomics will be implemented. The ANA standards on Safe Patient Handling and Mobility (SPHM) provide for a safer work environment and improved patient outcomes (June 2013).

Quality and Safety Education for Nurses (QSEN)

Six areas of core competencies, as delineated by the Quality and Safety Education for Nurses (QSEN) project, will be taught and evaluated in relation to course objectives and content for RNSG courses. The (QSEN) project is to meet the challenge of preparing future nurses who will have the knowledge, skills and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work. The six core competencies are Patient-Centered care, Teamwork and Collaboration, Evidence Based Practice, Quality Improvement, Safety, and Informatics.

Bioterrorism

For information on bioterrorism, please see the following web sites:
http://www.nursingworld.org/MainMenuCategories/HealthcareandPolicyIssues/DPR.aspx
http://www.cdc.gov
http://emergency.cdc.gov/az/a.asp

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Withdrawal & Dismissal Policies

Student Withdrawal and Dismissal

1. Central Texas College (controlling agency) reserves the right to request at any time, the withdrawal or dismissal of any student whose health, conduct, personal qualities, excessive absences or scholastic records indicate that it would be inadvisable for that student to continue with the program.

2. The faculty will provide counseling, issue written warnings, and follow dismissal procedures for the following reasons:
   A. unsafe nursing practice- clinical experiences include administration of medications, health promotion and preventative aspects, nursing care of persons throughout the life span with acute and chronic illness, and rehabilitative care, intentional injury or neglect during patient care is unsafe nursing practice.
   B. unprofessional conduct – see Unprofessional Code of Conduct, pg78.
   C. falsification of information on any form or record.
   D. failure to comply with program, state and national policies may result in disciplinary action or removal

3. Student grievances should be first addressed to the immediate faculty. If unable to reach a satisfactory resolution, the grievance may be taken to the program coordinator. See Grievance Policy: Academic or Clinical Failure for Unsafe Practice.

4. Students failing to withdraw themselves will receive a grade of “F”.

STUDENT DUE PROCESS PROCEDURES

I. Disciplinary Action/Grievances Policy/Procedures

General Grievance Procedures Related to Academic Discrimination, ADA, Sexual Misconduct, Harassment, and other issues follow the procedure in the Central Texas College Student Handbook.

II. Standards of Professional Nursing

The Department of Nursing follows an adapted policy from the Academic Grievance Policy of Central Texas College, in the event that a student violates TBON Rule 217.11 Standards of Professional Nursing Practice or 217.12 Unprofessional Conduct, the following procedure will be implemented:

A. Following the violation of the rule, the student will be advised by the instructor of the violation and the possible consequences of the behavior. Whether or not the student is allowed to continue in the classroom/laboratory/clinical is at the discretion of the instructor and is based on the seriousness of the violation.

B. The instructor will confer with members of the teaching team for that semester, and a decision will be rendered about the consequences of the violation.

C. The student will be notified within 3 working days of the decision by the team.

D. Should the student wish to appeal the decision, that appeal must be submitted in writing to the Program Coordinator within 3 working days of notification of the decision.

E. The Program Coordinator will review the appeal, confer with the instructor and teaching team and will notify the student in writing of his/her decision regarding the appeal.

F. Should the student further wish to appeal, that appeal should be submitted in writing to the Department Chair.
G. If the Department Chair supports the decision of faculty/Program Coordinator, the student may further appeal to the Dean of Central Campus.

III. Clinical Failure for Unsafe Practice

In the event of clinical failure due to unsafe practice, the following procedure will be followed:

1. After the unsafe act, the student is asked to leave the clinical area.
2. The student, all members of the course or level teaching team, coordinators, and department chair are notified that this event is being evaluated for possible dismissal from the program.
3. The student is given the opportunity to present an outline, in writing, of their response to the allegations of the teaching team. The student may request a hearing with the team.
4. The teaching team meets and reviews faculty data and the student’s response, then makes a recommendation for dismissal or counseling. This review must take place within 5 working days.
5. If the recommendation is for dismissal, the student is notified of the decision.
6. The student may appeal. Should the student choose to appeal the decision, a committee of three (3) faculty members (two from the VN program and one from the ADN program) will convene and review the recommendation and all relevant data from faculty and student.
7. If the committee concurs with the decision for dismissal, the student and department chair are notified of the decision. In the event that the committee disagrees with the teaching team’s recommendation for dismissal, the issue is sent back with recommendations to the teaching team for reevaluation.
8. If again, the decision is for dismissal, the student may request an appointment with the department chair to further appeal the dismissal.
9. Should the department chair concur with the dismissal, the student may request an appointment with the Dean of Central Campus.
10. For HIPAA concerns- refer to the HIPAA policy and signature page within this student handbook.

If a student appeals the decision, they may or may not be allowed to continue to attend classes, but not clinical, until the matter is resolved. Clinical absences will not accrue during the appeals process.

Complaints against an Accredited Program

The Accreditation Commission for Education in Nursing, Inc. (ACEN) reviews any complaint it receives against an accredited program or the ACEN itself, which is related to the standards, criteria, or procedures; and resolves the complaint in a timely, fair, and equitable manner, using established time lines for each step of the complaint procedure. Contact information:

Accreditation Commission for Education in Nursing, Inc.
3343 Peachtree Road NE, Suite 850
Atlanta, Georgia 30326
Phone: 404.975.5000
Fax: 404.975.5020
Website: http://acenursing.org/

A complaint is an expression of dissatisfaction about something or someone that is the cause or subject of protest. As a formal allegation against a party or institution, it is expressed as a written, signed statement by the complainant. It may be concerned with an individual’s or institution’s rights, the interpretation or application of rules, regulations, or policies of an accredited program/school. In addition, it may include concerns from recognized state or federal agencies. In addressing a complaint the ACEN does not serve as arbitrator or mediator of internal disputes within nursing programs or between nursing programs. Its role is to ensure that the policies and procedures of an institution regarding complaints are implemented fairly and as written, or if not present, to make certain that such policies and procedures are developed and implemented.
A complaint may be filed by any of the following representatives of ACEN communities of interest including:
- Student(s) currently enrolled in an accredited institution or program;
- Applicant(s) to an accredited institution or program;
- Other interested parties.

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Time Line</th>
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<tbody>
<tr>
<td>1. The complaint is presented to ACEN as a written, signed, and dated</td>
<td>When there is a complaint.</td>
</tr>
<tr>
<td>statement with supporting evidence.</td>
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<tr>
<td>2. ACEN responds to the complainant in writing that a copy of the</td>
<td>Within fourteen (14) days of receipt.</td>
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<tr>
<td>complaint is being forwarded to the nursing program administrator, and</td>
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<tr>
<td>if appropriate, the chief executive officer of the institution.</td>
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<tr>
<td>3. ACEN sends a copy of the complaint to the nurse administrator along</td>
<td>Within fourteen (14) days of receipt.</td>
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<tr>
<td>with a request for verification that the complainant has used all</td>
<td></td>
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<tr>
<td>available institutional avenues to address the complaint.</td>
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<tr>
<td>4. The nurse administrator’s response to the complaint is submitted.</td>
<td>Within thirty (30) days to NLNAC.</td>
</tr>
<tr>
<td>5. If the analysis by ACEN finds that the policies and procedures have</td>
<td>Within fourteen (14) days.</td>
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<tr>
<td>been implemented fairly and as written, the Executive Director will</td>
<td></td>
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<tr>
<td>complete the file by sharing this finding in writing with the</td>
<td></td>
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<tr>
<td>complainant and the nurse administrator.</td>
<td></td>
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<tr>
<td>6. If the analysis by ACEN finds that the policies and procedures have</td>
<td>At the next scheduled meeting.</td>
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<tr>
<td>not been implemented fairly and/or completely, the complaint will be</td>
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<tr>
<td>submitted to the Commission for action.</td>
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<tr>
<td>7. Complaints are to be referred to a subsequent Commission meeting if</td>
<td>Subsequent Commission meeting.</td>
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<tr>
<td>the next scheduled meeting does not allow the fourteen (14) to thirty</td>
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<tr>
<td>(30) day response time by the ACEN Executive Director and the thirty</td>
<td></td>
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<tr>
<td>(30) day response time by the Institution.</td>
<td></td>
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</table>

**Student Code of Conduct**

The Department of Nursing follows the policies of Central Texas College regarding conduct, discipline and disciplinary action. Please refer to the most current copy of the CTC Student Handbook for the following:
- Student Code of Conduct
- Institution Disciplinary Process
- Non-Academic Misconduct
- Academic Dishonesty
- Administrative Disciplinary Action
- Emergency Disciplinary Procedures
- Disciplinary Actions/Committee/Hearing/Appeal Procedures
- Grievance Procedures
Standards of Nursing Practice

In addition the student will follow the Texas Board of Nursing Rules and Regulations to include §217.11, Standards of Nursing Practice; § 217.12, Unprofessional Conduct; and §213.27 Good Professional Character. The rules will apply in classroom, laboratory, and clinical. Failure to act accordingly may result in disciplinary action. The following pages are taken from the Texas Nursing Practice Act, found at: http://www.bon.state.tx.us/laws_and_rules_rules_and_regulations.asp
Texas Administrative Code

TITLE 22  EXAMINING BOARDS
PART 11  TEXAS BOARD OF NURSING
CHAPTER 217  LICENSURE, PEER ASSISTANCE AND PRACTICE
RULE §217.11  Standards of Nursing Practice

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

(1) Standards Applicable to All Nurses. All vocational nurses, registered nurses and registered nurses with advanced practice authorization shall:

   (A) Know and conform to the Texas Nursing Practice Act and the board's rules and regulations as well as all federal, state, or local laws, rules or regulations affecting the nurse's current area of nursing practice;
   (B) Implement measures to promote a safe environment for clients and others;
   (C) Know the rationale for and the effects of medications and treatments and shall correctly administer the same;
   (D) Accurately and completely report and document:
       (i) the client's status including signs and symptoms;
       (ii) nursing care rendered;
       (iii) physician, dentist or podiatrist orders;
       (iv) administration of medications and treatments;
       (v) client response(s); and
       (vi) contacts with other health care team members concerning significant events regarding client's status;
   (E) Respect the client's right to privacy by protecting confidential information unless required or allowed by law to disclose the information;
   (F) Promote and participate in education and counseling to a client(s) and, where applicable, the family/significant other(s) based on health needs;
   (G) Obtain instruction and supervision as necessary when implementing nursing procedures or practices;
   (H) Make a reasonable effort to obtain orientation/training for competency when encountering new equipment and technology or unfamiliar care situations;
   (I) Notify the appropriate supervisor when leaving a nursing assignment;
   (J) Know, recognize, and maintain professional boundaries of the nurse-client relationship;
   (K) Comply with mandatory reporting requirements of Texas Occupations Code Chapter 301 (Nursing Practice Act), Subchapter I, which include reporting a nurse:
       (i) who violates the Nursing Practice Act or a board rule and contributed to the death or serious injury of a patient;
       (ii) whose conduct causes a person to suspect that the nurse's practice is impaired by chemical dependency or drug or alcohol abuse;
       (iii) whose actions constitute abuse, exploitation, fraud, or a violation of professional boundaries; or
       (iv) whose actions indicate that the nurse lacks knowledge, skill, judgment, or conscientiousness to such an extent that the nurse's continued practice of nursing could reasonably be expected to pose a risk of harm to a patient or another person, regardless of whether the conduct consists of a single incident or a pattern of behavior.

   (v) except for minor incidents (Texas Occupations Code §§301.401(2), 301.419, 22 TAC §217.16), peer review (Texas Occupations Code §§301.403, 303.007, 22 TAC §217.19), or peer assistance if no practice violation (Texas Occupations Code §301.410) as stated in the Nursing Practice Act and Board rules (22 TAC...
Chapter 217).

(L) Provide, without discrimination, nursing services regardless of the age, disability, economic status, gender, national origin, race, religion, health problems, or sexual orientation of the client served;

(M) Institute appropriate nursing interventions that might be required to stabilize a client's condition and/or prevent complications;

(N) Clarify any order or treatment regimen that the nurse has reason to believe is inaccurate, non-efficacious or contraindicated by consulting with the appropriate licensed practitioner and notifying the ordering practitioner when the nurse makes the decision not to administer the medication or treatment;

(O) Implement measures to prevent exposure to infectious pathogens and communicable conditions;

(P) Collaborate with the client, members of the health care team and, when appropriate, the client's significant other(s) in the interest of the client's health care;

(Q) Consult with, utilize, and make referrals to appropriate community agencies and health care resources to provide continuity of care;

(R) Be responsible for one's own continuing competence in nursing practice and individual professional growth;

(S) Make assignments to others that take into consideration client safety and that are commensurate with the educational preparation, experience, knowledge, and physical and emotional ability of the person to whom the assignments are made;

(T) Accept only those nursing assignments that take into consideration client safety and that are commensurate with the nurse's educational preparation, experience, knowledge, and physical and emotional ability;

(U) Supervise nursing care provided by others for whom the nurse is professionally responsible; and

(V) Ensure the verification of current Texas licensure or other Compact State licensure privilege and credentials of personnel for whom the nurse is administratively responsible, when acting in the role of nurse administrator.

(2) Standards Specific to Vocational Nurses. The licensed vocational nurse practice is a directed scope of nursing practice under the supervision of a registered nurse, advanced practice registered nurse, physician's assistant, physician, podiatrist, or dentist. Supervision is the process of directing, guiding, and influencing the outcome of an individual's performance of an activity. The licensed vocational nurse shall assist in the determination of predictable healthcare needs of clients within healthcare settings and:

(A) Shall utilize a systematic approach to provide individualized, goal-directed nursing care by:

(i) collecting data and performing focused nursing assessments;

(ii) participating in the planning of nursing care needs for clients;

(iii) participating in the development and modification of the comprehensive nursing care plan for assigned clients;

(iv) implementing appropriate aspects of care within the LVN's scope of practice; and

(v) assisting in the evaluation of the client's responses to nursing interventions and the identification of client needs;

(B) Shall assign specific tasks, activities and functions to unlicensed personnel commensurate with the educational preparation, experience, knowledge, and physical and emotional ability of the person to whom the assignments are made and shall maintain appropriate supervision of unlicensed personnel.

(C) May perform other acts that require education and training as prescribed by board rules and policies, commensurate with the licensed vocational nurse's experience, continuing education, and demonstrated licensed vocational nurse competencies.

(3) Standards Specific to Registered Nurses. The registered nurse shall assist in the determination of healthcare needs of clients and shall:

(A) Utilize a systematic approach to provide individualized, goal-directed, nursing care by:

(i) performing comprehensive nursing assessments regarding the health status of the client;

(ii) making nursing diagnoses that serve as the basis for the strategy of care;

(iii) developing a plan of care based on the assessment and nursing diagnosis;

(iv) implementing nursing care; and

(vii) facilitating a patient-centered plan of care and collaborating with the client, significant other(s), family members, and the health care team as appropriate.
(v) evaluating the client's responses to nursing interventions;

(B) Delegate tasks to unlicensed personnel in compliance with Chapter 224 of this title, relating to clients with acute conditions or in acute care environments, and Chapter 225 of this title, relating to independent living environments for clients with stable and predictable conditions.

(4) Standards Specific to Registered Nurses with Advanced Practice Authorization. Standards for a specific role and specialty of advanced practice nurse supersede standards for registered nurses where conflict between the standards, if any, exist. In addition to paragraphs (1) and (3) of this subsection, a registered nurse who holds authorization to practice as an advanced practice nurse (APN) shall:

(A) Practice in an advanced nursing practice role and specialty in accordance with authorization granted under Board Rule Chapter 221 of this title (relating to practicing in an APN role; 22 TAC Chapter 221) and standards set out in that chapter.

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

Source Note: The provisions of this §217.11 adopted to be effective September 28, 2004, 29 TexReg 9192; amended to be effective November 15, 2007, 32 TexReg 8165
The unprofessional conduct rules are intended to protect clients and the public from incompetent, unethical, or illegal conduct of licensees. The purpose of these rules is to identify unprofessional or dishonorable behaviors of a nurse which the board believes are likely to deceive, defraud, or injure clients or the public. Actual injury to a client need not be established. These behaviors include but are not limited to:

1. **Unsafe Practice**—actions or conduct including, but not limited to:
   - Carelessly failing, repeatedly failing, or exhibiting an inability to perform vocational, registered, or advanced practice nursing in conformity with the standards of minimum acceptable level of nursing practice set out in Rule 217.11.
   - Carelessly or repeatedly failing to conform to generally accepted nursing standards in applicable practice settings;
   - Improper management of client records;
   - Delegating or assigning nursing functions or a prescribed health function when the delegation or assignment could reasonably be expected to result in unsafe or ineffective client care;
   - Accepting the assignment of nursing functions or a prescribed health function when the acceptance of the assignment could be reasonably expected to result in unsafe or ineffective client care;
   - Failing to supervise the performance of tasks by any individual working pursuant to the nurse's delegation or assignment; or
   - Failure of a clinical nursing instructor to adequately supervise or to assure adequate supervision of student experiences.

2. **Failure** of a chief administrative nurse to follow appropriate and recognized standards and guidelines in providing oversight of the nursing organization and nursing services for which the nurse is administratively responsible.

3. **Failure to practice** within a modified scope of practice or with the required accommodations, as specified by the board in granting a coded license or any stipulated agreement with the board.

4. **Careless or repetitive conduct** that may endanger a client's life, health, or safety. Actual injury to a client need not be established.

5. **Inability to Practice Safely**—demonstration of actual or potential inability to practice nursing with reasonable skill and safety to clients by reason of illness, use of alcohol, drugs, chemicals, or any other mood-altering substances, or as a result of any mental or physical condition.

6. **Misconduct**—actions or conduct that include, but are not limited to:
   - Falsifying reports, client documentation, agency records or other documents;
   - Failing to cooperate with a lawful investigation conducted by the board;
   - Causing or permitting physical, emotional or verbal abuse or injury or neglect to the client or the public, or failing to report same to the employer, appropriate legal authority and/or licensing board;
   - Violating professional boundaries of the nurse/client relationship including but not limited to physical, sexual, emotional or financial exploitation of the client or the client's significant other(s);
   - Engaging in sexual conduct with a client, touching a client in a sexual manner, requesting or offering sexual favors, or language or behavior suggestive of the same;
   - Threatening or violent behavior in the workplace;
   - Misappropriating, in connection with the practice of nursing, anything of value or benefit, including but not limited to, any property, real or personal of the client, employer, or any other person or entity, or failing to take precautions to prevent such misappropriation;
(H) Providing information which was false, deceptive, or misleading in connection with the practice of nursing;

(I) Failing to answer specific questions or providing false or misleading answers that would have affected the decision to license, employ, certify or otherwise utilize a nurse; or

(J) Offering, giving, soliciting, or receiving or agreeing to receive, directly or indirectly, any fee or other consideration to or from a third party for the referral of a client in connection with the performance of professional services.

(7) Failure to repay a guaranteed student loan, as provided in the Texas Education Code §57.491, or pay child support payments as required by the Texas Family Code §232.001, et seq.

(8) Drug Diversion—diversion or attempts to divert drugs or controlled substances.

(9) Dismissal from a board-approved peer assistance program for noncompliance and referral by that program to the BNE.

(10) Other Drug Related—actions or conduct that include, but are not limited to:

(A) Use of any controlled substance or any drug, prescribed or unprescribed, or device or alcoholic beverages while on duty or on call and to the extent that such use may impair the nurse's ability to safely conduct to the public the practice authorized by the nurse's license;

(B) Falsification of or making incorrect, inconsistent, or unintelligible entries in any agency, client, or other record pertaining to drugs or controlled substances;

(C) Failing to follow the policy and procedure in place for the wastage of medications at the facility where the nurse was employed or working at the time of the incident(s);

(D) A positive drug screen for which there is no lawful prescription; or

(E) Obtaining or attempting to obtain or deliver medication(s) through means of misrepresentation, fraud, forgery, deception and/or subterfuge.

(11) Unlawful Practice—actions or conduct that include, but are not limited to:

(A) Knowingly aiding, assisting, advising, or allowing an unlicensed person to engage in the unlawful practice of vocational, registered or advanced practice nursing;

(B) Violating an order of the board, or carelessly or repetitively violating a state or federal law relating to the practice of vocational, registered or advanced practice nursing, or violating a state or federal narcotics or controlled substance law;

(C) Knowingly aiding, assisting, advising, or allowing a nurse under Board Order to violate the conditions set forth in the Order; or

(D) Failing to report violations of the Nursing Practice Act and/or the Board's rules and regulations.

(12) Leaving a nursing assignment, including a supervisory assignment, without notifying the appropriate personnel.

(13) Criminal Conduct—including, but not limited to, conviction or probation, with or without an adjudication of guilt, or receipt of a judicial order involving a crime or criminal behavior or conduct that could affect the practice of nursing.

Source Note: The provisions of this §217.12 adopted to be effective September 28, 2004, 29 TexReg 9192
(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 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 imposed by any jurisdiction under subsection (d) of this section shall be required to prove, by a preponderance of the evidence:

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

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

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

(g) The following disciplinary and eligibility sanction policies and guidelines shall be used by the Executive Director, the State Office of Administrative Hearings (SOAH), and the Board in evaluating good professional character in eligibility and disciplinary matters:

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

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

   (3) Disciplinary Sanctions for Sexual Misconduct approved by the Board and published on February 22, 2008 in the Texas Register (33 TexReg 1649) and available on the Board's website at http://www.bon.state.tx.us/disciplinaryaction/dsp.html.
(4) Eligibility and Disciplinary Sanctions for Nurses with Substance Abuse, Misuse, Substance Dependency, or other Substance Use Disorder and published on February 22, 2008 in the *Texas Register* (33 TexReg 1651) and available on the Board's website at http://www.bon.state.tx.us/disciplinaryaction/dsp.html.

(5) Disciplinary Guidelines for Criminal Conduct approved by the Board and published on May 17, 2013, in the *Texas Register* (38 TexReg 3152) and available on the Board's website at http://www.bon.texas.gov/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; amended to be effective July 10, 2013, 38 TexReg 4320
Policy on Alcohol, Drug and Mental Illness Program for Student Nurses

The purpose of this policy is to facilitate a health environment for students so that optimal safety of patients can be assured. The faculty is concerned about the welfare of the impaired student, and they accept the responsibility to recognize the impaired behavior and to help the student through early intervention that encourages cooperation and facilitates assessment of impaired practice or treatment.

Impaired student nurse practice is defined as student performance that endangers patient health and safety and would, if demonstrated by an RN or LVN, be considered a violation of the Texas statutes regulating the practice of professional and vocational nursing. Such performance must be related to suspected chemical dependence and/or mental illness. The categories of mental illness that fall under this policy are the same ones identified by Texas Peer Assistance Program for Nurses. These are anxiety disorder (panic disorder), schizophrenia, major depression, bipolar disorder and schizoaffective disorder.

The intent of this policy is to:

1. Maintain confidentiality as impairment is recognized.
3. If necessary, intervene by confronting student with observed impairment.
5. Intervention data and follow-up information will be kept confidential and separate from the student's official student record and will be destroyed upon successful completion of licensing exam.
6. If necessary, documentation of data discussed in the intervention process will be submitted to the Dean of Central Campus for possible disciplinary action if the student declines the offer to seek assessment/indicated treatment.

Student Participation in Department and Program Governance

Student Affairs Committee

1. The purpose of this committee is to facilitate student's communication with each other, between nursing courses and with the faculty.
2. Membership in this committee shall consist of a faculty member and a student representative from each semester of the program. Students will serve at least one semester.
3. The function of this committee shall be to:
   a. meet as necessary to achieve its purpose.
   b. make recommendations and/or inform students and faculty about needs, policies and social functions.
   c. coordinate student functions (e.g. pinning ceremony).

Curriculum Committee

1. The purpose of this committee is to provide ongoing development and evaluation of the curriculum in accordance with the philosophy of the Department of Nursing.
2. Membership in this committee shall consist of the entire full-time ADN faculty. Ex-officio members include student representative from each semester in session, VN Curriculum chair, & Lab Manager. Students will serve at least one semester. The committee shall meet monthly.

3. The chairperson shall be elected in the Spring to serve the following academic year.

4. The functions of this committee shall be to:
   a. implement the Systematic Program Evaluation.
   b. correlate program, level, course and unit objectives to ensure continuity and progression.
   c. receive and act upon recommendations from faculty, students and faculty committees.
   d. develop the Curriculum of the Department of Nursing.
   e. recommend to the Faculty Organization appropriate curriculum changes.

5. Process for submitting student concerns to committee:
   a. Student Representatives must address student concerns with professor(s) initially in the SBAR format (see form on next page). In resolution to the concerns, the professor documents the response to student concerns in writing and submits all documents to the Curriculum Committee.
   b. Unresolved concerns can be initiated in SBAR format (see form on next page) to the Curriculum Committee for further discussion in 10 minute time frame. All documents will be submitted to Curriculum Committee.

Library/Media Committee

1. The purpose of this committee is to facilitate use of current educational materials by the student body and faculty.

2. Membership of this committee shall consist of at least four (4) faculty members and three (3) student representatives (one each from ADN, VN, and EMT/Paramedic programs). Students will serve at least one semester. The Nursing Lab Manager, Librarian, and Building 150 Computer Laboratory Technician shall serve as ex-officio members.

3. The functions of this committee shall be to:
   a. Maintain and update the laboratory software inventory and make recommendations for purchase.
   b. Prepare a list of books and periodicals recommended by faculty for purchase by the Oveta Culp Hobby Memorial (OCH) Library each semester.
   c. Perform annual survey of the OCH library holdings in nursing and related disciplines for the purpose of removing outdated materials and periodicals no longer considered relevant.

Recruitment Committee

1. The purpose of this committee is to recruit persons interested in a nursing or EMT/P career.

2. Membership in this Committee shall consist of at least three (3) faculty members and an elected student representative from each program (LVN, ADN, EMT, and Paramedic) and one student at large. Students will serve at least one semester.

3. The functions of the committee shall be to:
   a. Meet annually to plan its activities and call additional meetings as needed.
   b. Develop informational material about the nursing program and implement other necessary recruitment activities.
   c. Present career information to schools and groups that request this service.
   d. Meet with social or civic groups concerned with nursing or EMT/P education in this community.
(S) Situation

This is the situation (problem):
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

(B) Background

Pertinent history (how did we get here):
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

(A) Assessment

This is what’s going on:
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

(R) Recommendation

I suggest:
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Respectfully submitted by ________________________________
Central Texas College Department of Nursing Student Nurses Association

The Central Texas College (CTC) Student Nurses Association (SNA) is part of the National Student Nurse Association (NSNA) which is the largest independent student organization in the country and the only national organization for students of nursing.

For a membership fee a student can participate in this organization which is dedicated to giving student nurses the opportunity to contribute to their nursing education now and assisting them to prepare for future leadership roles. The members become familiar with current professional activities, educational changes and needs, and community health care needs, among other things. More important, though, is the emphasis by the association on direct involvement in these activities from the early planning stages through implementation of programs. The student members are also encouraged by the association to participate in interdisciplinary activities and to continue working with other professional nursing organizations.

The CTC SNA posts scheduled monthly meetings.

Nursing Honors

Nursing Honors is awarded to any student who, at the conclusion of Semester IV, has a GPA of 3.5 or higher in the RNSG courses.

Nursing Highest Honors is awarded to any student who, at the conclusion of Semester IV, has a GPA of 3.8 or higher in the RNSG courses.
CENTRAL TEXAS COLLEGE
Associate Degree Nursing
Nursing Pinning Ceremony

The pinning ceremony has been a long-held graduation tradition that signifies that you are now a full-fledged graduate nurse. The nurse pinning ceremony dates back more than 1,000 years ago.

Nurses enter the ceremony wearing their traditional white uniforms. Even though many nurses today do not wear the cap any longer in the health care environment, during the ceremony they do wear the traditional nurse's cap.

A nursing leader is selected by the graduating class to provide a speech to inspire and congratulate the new nursing graduates. Speeches may be a faculty or community leader.

The pinning of the graduate nurses at CTC is performed by faculty, selected by the graduating class. The pin represents the rite of passage into the nursing profession. The graduates are pinned over their heart.

In candle lighting ceremony, the Department Chair’s candle lights the Coordinator’s candle and thus lights the graduate student’s candle; representing one of the most well-known nurses, Florence Nightingale. This symbolizes the "passing of the flame" from Nightingale to each nurse, and then they recite the nurse's pledge.

After pinning, candle lighting and recitation of the nurse's pledge, they may wear their school pin, which signifies they are members of their nursing community.

Requirements for the CTC ADN Pinning Ceremony:
2. Nursing Cap.
3. Nursing Lamp.
4. CTC ADN Program School Pin.
5. Participation is optional, not mandatory.
SIGNATURE PAGES

All students are provided with copies of the following policies in this handbook. Students will sign each of the policies on the following pages indicating they have received a copy of the policy and understand its content. The signed copies will be placed in the student’s academic record.
Central Texas College  
Department of Nursing  
Simulation Center/Laboratory  
Confidentiality Agreement and Release Form

In consideration of the educational opportunity to obtain practical experience in a simulated patient environment, I understand the significance of confidentiality with respect to information concerning the simulation scenarios, the simulated patients, and fellow students. I understand that active participation in the simulation scenarios is part of the course requirements. In addition, I understand that the simulation scenarios are videotaped and used for debriefing purposes and shared only with appropriate faculty.

I agree to adhere to the following conditions and guidelines:

- The simulation mannequins are to be treated with respect and handled with care as if they were live patients.
- As the simulation mannequins are to be treated as live patients, I will uphold the requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other Federal or State Laws regarding confidentiality. I agree to report any violations of confidentiality that I become aware of to my facilitator or instructor.
- All patient information, including but not limited to diagnosis, interventions, laboratory values, medications, and vital signs, used in the simulation scenario is privileged and confidential regardless of format: electronic, written, overheard or observed. As such, any viewing, discussion, or disclosure of this patient information to another student is a violation whether intentional or unintentional and may lead to disciplinary action as outlined in the student handbook.
- Patient information may be viewed, used, disclosed, and discussed with other students participating in the simulation scenarios only as it relates to the performance of my educational duties in the simulation scenario, or per the instructor’s directions. Any viewing, discussion, or disclosure of this information outside of the simulation environment is a violation of HIPAA and other State and Federal Laws.
- The simulation laboratory is a learning environment. All students are expected to demonstrate behaviors that maintain this respectful and supportive learning environment. The students participating in the scenario should have everyone’s respect and attention. All scenarios should be treated in a professional manner.
- No Betadine and no ink pens will be used near the mannequins. In addition, 20g IV catheters or smaller will be used for IV starts.
- The undersigned authorizes and consents to the use of the undersigned’s name, voice, photograph, video recording, and likeness by the Central Texas Nursing Program without reservation or limitation and with the understanding that the undersigned will not receive compensation.
- Central Texas College has the absolute rights and permission, with respect to the photographs and videotaped images taken of me or in which I may be included with others, to use such images for educational purposes and training only. This authorization and release shall apply to the person(s) for whom the photographs or videotaped images were taken for educational purposes only.
- I have read and understand the Simulation Lab Policy, and have been provided a copy.

Signature: ___________________________ Printed Name: ___________________________

Date: _______________ Course: ___________________ Instructor: _______________________

4/2014
DEPARTMENT OF NURSING  
COMPUTER LABORATORY POLICY

This document is designed to specify the rules and requirements that govern the use of software and hardware in the computer laboratory. Students who violate the agreement will be expelled from the lab and have their laboratory privileges revoked. All software and documentation provided in the computer laboratory are copyright protected. This policy is designed to safeguard those copyrights and protect the laboratory from viral infections. The Computer Laboratory business hours are Monday – Thursday; 8:00am – 5:00pm and on Friday 8:00am – 11:30am.  
Note: Schedule is subject to change. Check for postings of close/reserved dates and times.

Users must be enrolled in at least one (1) CTC course, or obtain permission from the Nursing Department Chair.

1. Student will be allowed access to the computer lab after access policies are signed. Student must show: Current CTC photo ID to use the computer lab.
2. Student must sign in before beginning work in lab. If students leave the room for any reason, they must sign out of the computer lab.
3. Food, drinks, beverage containers or tobacco products will not be brought into lab.
4. Non educational game playing is not permitted on computers in the computer laboratory. Any student found playing games will be disciplined by department chair.
5. No children are permitted in the lab. Students with children will be asked to leave.
6. Please silence all cell phones while in the Computer Lab. All calls must be taken outside of computer laboratory.
7. If any computer equipment malfunctions, users should not attempt to repair it. Please notify a member of the Computer Lab staff immediately.
8. Students may not change, modify, or update computer configurations.
9. Loud talking is prohibited. Please help us maintain a library-like atmosphere. Please refrain from having group meetings and cell phone conversations in the lab, as they are a distraction to your fellow users. If deemed necessary, a member of the Computer Lab staff may ask you to leave.
11. Any behavior which is detrimental to the teaching or learning environment will result in the Lab Manager/ Lab Assistant asking the student to leave. If student fails to quietly and promptly leave the computer lab, Campus Police will be called to escort the student from the lab, and all computer lab privileges will be revoked.

I understand when I signed this document that I acknowledge that I understand my responsibilities as they pertain to the rules and conduct expected of me while using the computer lab of the Nursing Departments at Central Texas College. I further acknowledge that I have been made aware of the consequences of not complying with the rules and requirements as listed in this document.

STUDENT SIGNATURE: ____________________________      DATE: ____________________________
INTERNET ACCEPTABLE USE POLICY

Use of the Internet provides great educational benefits to students. Unfortunately, however, some material accessible via the Internet may contain items that are illegal, defamatory, or potentially offensive to some people. Access to the Internet is given as a privilege to students who agree to act in a considerate and responsible manner. We require that students read, accept, and sign the following rules for acceptable online behavior.

1. Students are responsible for good behavior on the Internet. General institutional rules for behavior and communications apply.
2. College personnel/administrators may review files and communications to maintain system integrity and ensure that users are using the system responsibly. Users should not expect that files will always be private.
3. Internet access in the Nursing Departments is for classroom assignments only.
4. The following are not permitted:
   - Sending or displaying offensive messages or pictures.
   - Using obscene language.
   - Harassing, insulting, or attacking other users.
   - Damaging computer, computer systems, or computer network.
   - Violating copyright laws.
   - Intentionally wasting limited resources, including the use or “chain letters” and messages broadcast to mailing list or individuals.
   - **PERSONAL E-MAILING.**
   - **SOCIAL NETWORKS.**
   - **CHATTING.** Chat rooms are off limits.
   - **INSTANT MESSAGING.**
   - Install software in the lab. With the exception of clinical VCE for clinical labs.
   - Online game playing.
   - Saving files to the Workstation hard drive—you must use a USB/Thumb drive.
5. Violations will result in the loss of access to the Nursing computer laboratory as well as other disciplinary or legal action.

I have read the rules for acceptable online behavior, and understand the rules, and agree to comply with them. Should I violate the rules, I understand that I may lose network privileges at Central Texas College.

**STUDENT SIGNATURE:** ___________________________  **DATE:** _______________________
Information and Policy
The Department of Nursing adheres to the Health Insurance Portability and Accountability Act (HIPAA). To improve the efficiency and effectiveness of the health care system, the Health Insurance Portability and Accountability Act (HIPAA) of 1996 included a series of “administrative simplification” provisions that required the Department of Health and Human Services (HHS) to adopt national standards for electronic health care transactions. By ensuring consistency throughout the industry, these national standards will make it easier for health plans, health care clearinghouses, doctors, hospitals and other health care providers to process claims and other transactions electronically. The law also requires the adoption of privacy and security standards in order to protect individually identifiable health information. See the following web sites for additional information: http://www.hhs.gov/ocr/hipaa/

In accordance with federal law students will protect the privacy of individually identifiable patient information. Disclosure of patient information on all documents utilized by the nursing department, e.g. journals, and assessment forms, will be prohibited. If the facility permits copying of patient documents all patient data must be unidentifiable.

Patient information disclosure via electronic means such as telephone, voicemail, PDA, e-mail, camera, social networks, and fax will be prohibited. Students are not permitted to remove any patient medical record from the clinical premises under any circumstances.

The regulations require health care providers and other HIPAA-covered entities to “promptly” notify individuals affected by a data breach, in addition to the HHS Secretary and the media in cases where more than 500 individuals are affected, according to HHS. Breaches that affected fewer than 500 people must be reported to the HHS Secretary annually.

What this means for you as a Student Nurse:
The Office of Civil Rights of Health and Human services can impose civil and criminal penalties for privacy and security violations. Students responsible for breaches can be held personally liable for violations of privacy and security.

Any breaches of patient privacy or security should be reported immediately to your clinical instructor. Protected Health Information (PHI) includes all patient healthcare information including demographic (address, phone #, etc) information, billing information, in any form electronic, paper, verbal.

Examples of Breaches of PHI that should be reported (not inclusive)

- Inappropriate access to PHI by students
- Email, “Twitter” or “Face Book” entries containing PHI
- Paper PHI left unattended in a public area
- Lost or stolen laptops, computers, I-phones, Blackberry or other mobile devices which contain PHI
- Verbal communication about a patient shared inappropriately
• PHI accessed appropriately for business purposes (treatment, payment, healthcare operations), but then disclosed beyond business purposes
• Patient documents provided to wrong patient
• Lost or stolen USB drives, CDs, DVDs, etc that may contain PHI data
• Photos, filming, or recording of a patient, patient record or any reference to a patient on cell phones, cameras, etc without proper patient authorization

What you as a Student Nurse must do to secure PHI:
• Do not access, use, or disclose any patient information except for Health Care Facility or approved Nursing Course purposes
• Patient identifiable information (e.g. age, name, initials and room number, etc…) will not be placed on any documentation including clinical assessment forms and concept maps.
• Do not save patient information to laptops, computers, mobile phones & devices, camera, CDs, DVDs, external drives, USB (flash) drives or any other device
• Do not text/e-mail any patient information between cell phones or other mobile devices
• Never discuss clinical experiences outside of the Classroom/Clinical setting (E-mail, Texting, Blogging, Twitter, Face Book)
• Dispose of paper in the appropriate recycle containers
• Do not carry PHI outside of the Health Care Facility
• Insure documents are provided to the correct patient

I have reviewed the HIPAA information and agree to abide by these guidelines.

Potential Consequences: Any violation of this policy will result in disciplinary action for Unsafe Practice which may result in suspension and/or expulsion. Each case will be investigated on a case by case basis.

Student Printed Name_________________________________________

Student Signature_____________________________________________

23 Sept. 2009
Central Texas College  
Department of Nursing  
Social Media Policy

PURPOSE:
“Social and electronic media have tremendous potential for strengthening personal relationships and providing valuable information to health care consumers, as well as affording students enrolled in Central Texas College, Department of Nursing a valuable opportunity to interface with colleagues from around the world. Students need to be aware of the potential consequences of disclosing patient-related information via social media, and mindful of affiliated agency policies, relevant state and federal laws, and professional standards regarding patient privacy and confidentiality and its application to social and electronic media. By being careful and conscientious, students enjoy the personal and professional benefits of social and electronic media without violating patient privacy and confidentiality (Adapted from A Nurse’s Guide to the Use of Social Media, National Council of State Boards of Nursing, (NCSBN), Jan.3, 2012).

The Department of Nursing follows the Central Texas College Social Media Guidelines, HR Policy 295-Computer Usage, Texas Nursing Practice Act, and the Texas Board of Nursing Rules and Regulation relating to Nurse Education, Licensure and Practice related to social media. As health care professionals we must also follow HIPPA Guidelines. Student conduct is expected to be ethical, respectful, civil, and professional in all types of media/networking. Failure to comply with this policy may result in disciplinary action, which may include suspension and expulsion.

DEFINITION OF SOCIAL MEDIA:
As used in this policy, “social networking” or “social media use” means communicating with others over the Internet. Internet posting is any information transmitted electronically, such as text, files, pictures, video, audio, artwork, et cetera. This includes, but not limited to Facebook, Twitter, LinkedIn, YouTube, MySpace or blogs and can also include media sites that are offered by television networks, newspapers, and magazines. Transmission may be between individuals or businesses, or to websites, by browser, cell phone, email or any other electronic device or tool.

GENERAL GUIDELINES:
A. HIPAA  
   Federal law reinforces and further defines privacy through the Health Insurance Portability and Accountability Act (HIPAA). HIPAA regulations are intended to protect patient health information (PHI) by defining individually identifiable information and establishing how this information may be used, by whom and under what circumstances (See HIPPA policy within this handbook).

   - Students are strictly prohibited from transmitting by way of an electronic media any patient-related image.
   - Students must not share, post or otherwise disseminate any information or images about a patient or information gained in the nurse/patient relationship with anyone unless there is a patient-care related need to disclose.
   - Students must not identify patient by name or post or publish any information that may lead to the identification of a patient.
   - Students must not make disparaging remarks about patients, fellow students, instructors, or staff at affiliated agencies, even if the identity is concealed.
   - Students are not to participate in acts of cyber-bullying. Cyber-bullying is when someone purposely embarrasses, harasses, or torments another using digital media.
   - Students must not take photos or videos of patients or their health information record on any electronic or personal devices, including cell phones.
• Students will not interact with patient using social media.
• Students must maintain professional boundaries in use of electronic media. Online contact with patients or former patients blurs the distinction between a professional and personal relationship.
• Students must promptly report any identified breach of confidentiality or privacy to the faculty.
• Students must be aware of and comply with the affiliated agency policies regarding use of agency owned computers, cameras and other electronic devices, and use of personal devices in the clinical setting.
• Students must not post content or otherwise speak on behalf of the Central Texas College, Department of Nursing.
• Students will not use the Central Texas College, Department of Nursing logo or any other CTC marks or images on any personal online site (CTC Catalog).
• Students will not use the Central Texas College, Department of Nursing name to promote or endorse any product, cause or political party or candidate (CTC Catalog).
• Students will not misrepresent Central Texas College, Department of Nursing in language, image or behavior.

C. Excerpts from NCSBN
• Merely removing someone’s name (or face, in the instance of images) from a communication does not necessarily protect that person’s identity.
• It is a mistaken belief that content deleted from a site is no longer accessible. The moment something is posted it lives on a server that can always be discoverable in a court of law.

POTENTIAL CONSEQUENCES:
Any violation of this policy will result in disciplinary action, which may include suspension and expulsion from the Department of Nursing Program.

I have read the Social Media Policy and understand the rules, and agree to comply with them. Should I violate the rules I understand that this may result in disciplinary action.

________________________________________  __________________________
Student Name (Print)  Student ID number

________________________________________  __________________________
Student Signature  Date

Fall 2013
Central Texas College
Department of Nursing
Clinical Rotation Policies

By signing my signature below:

- I agree to abide by the Clinical Rotation Compliance policies listed in this handbook.
- I understand that any disciplinary action taken against me may be based on departmental, institutional and TBON Rules such as 217.11 Standards of Professional Nursing Practice, 217.12 Unprofessional Conduct, and 217.13 Good Character.
- I understand that as long as I have my uniform on (even after clinical hours) that I will be held to professional behavioral standards. I understand that when I am attired in my CTC nursing uniform (even after clinical/lab hours), I will be held accountable for upholding professional behavior and conduct.
- I understand that the designated nursing uniform which includes name tags and badges will be worn only for assigned CTC nursing activities as allowed by the nursing faculty of Central Texas College.
- I understand and will abide by the CTC No-Smoking policy.
- I understand and will abide by the Department of Nursing No-Smoking policy while in school uniform policy when on campus or at clinical.
- I agree that I must inform clinical course faculty if I am assigned to a nursing care unit on which I am employed.
- I understand that clinical placements are at faculty discretion.
- I understand that I am not to work the night shift immediately prior to the beginning of the clinical day shift.
- I understand that I am required to attend mandatory facility in-processing and/or training and/or orientation at times other than regularly scheduled clinical/class hours. I will not be able to attend clinical without required mandatory training. I understand that failure to comply with the mandatory requirements for admission to the affiliated facility or failure to attend the designated orientation as scheduled and on time will result in administrative withdrawal from the course.
- I understand that written documentation of medical release to return to class/clinical must be in my record after serious illness, injury, surgery, pregnancy, etc.
- I understand that I am not to misrepresent CTC or the Department of Nursing.
- I understand that I may not participate in any activity in which it could be construed that I am representing the Department of Nursing, or acting as a Student Nurse, whether on or off campus, for which I have was not been given Department of Nursing/or faculty permission.
- I understand that failure to abide by these rules may result in disciplinary action, including expulsion and reporting to the Board of Nursing.

________________________________________
Student Name (Print)

________________________________________
Student Signature

________________________________________
Student ID Number

________________________________________
Date
Central Texas College District Student Clinical Program

RELEASE AND ACKNOWLEDGEMENT of ASSUMPTION OF RISK

In consideration for participating in the Central Texas College District Clinical Program [“Program”] for the tenure of the program with expected end date ________________________, I ________________________, in full recognition and appreciation of the possible dangers and hazards inherent in the Program, including, but specifically not limited to, any motorized vehicle or equipment use or transportation whether provided by Central Texas College District, myself or another, or administration of medication associated with, during, or as a result of the Program, I hereby agree to and do assume all of known and unknown risks and responsibilities arising out of my participation in the Program, and any other activities undertaken as an adjunct thereto.

I hereby expressly do for myself, my heirs, assigns, and personal representatives waive, release, discharge Central Texas College District and all of its Officers, Directors, Trustees, employees, volunteers, and agents from and against any and all claims, demands, actions, or causes of actions that may arise as a result of any acts causing property damage, personal injury, or death as a result of my participation in the Program or any activities undertaken as an adjunct thereto.

I also hereby expressly agree to hold harmless, and indemnify Central Texas College District and all of its Officers, Directors, employees, volunteers and agents from and against any and all claims, demands, actions, or causes of actions that may arise resulting in property damage, personal injury or death as a result of my participation in the Program or any activities undertaken as an adjunct thereto.

I acknowledge that I am signing this Release only after having been given full opportunity to investigate and ask questions about the Program and possible hazards. I voluntarily sign this Release for the satisfactory consideration as stated herein.

______________________________ Date: ____________________
Student Signature

______________________________
Program
I, Student Nurse ______________________________________, am informed that, as per the
CTC Student Handbook, cheating on academic work includes, but is not necessarily limited to:

4. Obtaining, using, buying, selling, stealing, transporting, or soliciting the contents
   of a test or coursework.

Reference: https://www.ncsbn.org/2993.htm: Students are informed that disclosure of any content
of NCLEX examination questions before, during or after the examination is a violation of law and
licensure of the candidate can be denied. This, of course, has application to test banks and test bank
questions.

You are hereby informed that should you be found to be in possession of, or use, transport, or solicit
the contents of test banks or test bank questions, you may be subject to discipline up to and
including being administratively dropped from a course with a grade of “F” and subject to
disciplinary action, which may include suspension or expulsion.

My signature acknowledges full understanding of this policy and, if violated, the consequences.

_______________________________________________     __________________________
Student Signature                              Date


NOTE: This is from the current FAQs as of July 2013.

Reference: https://www.ncsbn.org/2325.htm  Quoted: Candidates should never divulge any
information about their actual exams. All candidates sign a confidentiality agreement on the
computer at the start of their examination and, therefore, no information regarding exam content
should be expressed.

Test Security Policy 08 July 2013
Central Texas College
Department of Nursing
Students

I have received a copy of the Central Texas College Department of Nursing, Associate Degree Nursing Student Handbook.

I understand that I am responsible for all information contained therein.

I understand that I am responsible for abiding by all rules, regulations, standards, and polices of CTC and CTC Department of Nursing.

I understand if withdrawal occurs for any reason from any of the co-requisite nursing courses, withdraw from the corresponding clinical course (Clinical Nursing I, II, III, or, IV) is required.

Central Texas College has the absolute rights and permission, with respect to the photographs and videotaped images taken of me or in which I may be included with others, to use such images for educational purposes and training only. This authorization and release shall apply to the person(s) for whom the photographs or videotaped images were taken for educational purposes only.

It has been explained and I understand that I may NOT progress unless I have successfully completed all prerequisite courses and course requisites.

I have read and acknowledge all information contained in the documents requiring my signature.

________________________________  _______________________________________
Student Signature                      Date

____________________________________
Print Name