

Student Nursing Handbook 2018-2020

The El Paso County Community College District does not discriminate on the basis of race, color, national origin, religion, gender, age, disability, veteran status, sexual orientation, or gender identity.

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NURSING PROGRAM INFORMATION

INTRODUCTION

The Nursing Division of El Paso Community College includes two nursing programs, which are designed to meet the personnel needs of this community. With your entry into a Nursing Program, you have become an integral member of the HEALTH CARE TEAM. An important portion of your educational program is the clinical experience you will receive in the community as a part of your program. These clinical experiences require special preparation and practices on behalf of the College, the Nursing Programs, and the students.

This handbook contains only the specific procedures which relate to the Nursing Programs and does not take the place of the information concerning college procedures and regulations which you will find in the College Catalog, the El Paso Community College Student Handbook, the College website, or your individual course requirements.

NOTE: At the Student-Faculty meeting you will sign pages that are kept on file each

semester. These pages include the following:

Confidentiality Release of Information

Policy for Social Media and Networking

We hope that the Nursing Student Handbook will be a useful guide as you prepare for your nursing career as a student in a nursing program.

Vision Statement

The El Paso Community College Nursing Program shall be the progressive leader in high-quality, innovative nursing education for student's success in response to the health care needs of a multicultural border community.

Mission Statement

The mission of the nursing discipline is to provide accessible health care education by providing qualified nursing graduates who are prepared to advance the regional workforce in a culturally diverse border community.

EL PASO COUNTY COMMUNITY COLLEGE DISTRICT

STRATEGIC PLAN 2016-2020

Mission - The mission of El Paso Community College is to provide accessible, quality and affordable education that prepares students for academic, professional and personal growth and advance our regional workforce.

Vision - EPCC will be the progressive educational leader providing quality education that facilitates success for students, the community and region through innovative opportunities. Goal 1 Provide Quality Education Maintain a focus on improvement and assessment that is supported by creating a culture of excellence.

Intended Outcomes:

- ✓ Improve College Transitions
- ✓ Prepare Students with Marketable Skills for Gainful
- ✓ Employment
- ✓ Promote Co-Curricular Learning
- ✓ Provide State-of-the-Art Infrastructure
- ✓ Support High Quality Professional Development Opportunities.

Goal 2 Drive Student Success

Provide academic programs and support services that are clear pathways to skill development, timely degree completion and transfer to university or gainful employment.

Intended Outcomes:

- ✓ Engage Students Inside & Outside the Classroom
- ✓ Create a College-Going Culture
- ✓ Focus on Completion Increase Graduates & Graduation Rate
- ✓ Optimize Support Services
- ✓ Improve Productive Transfer & Transfer Mobility

Goal 3 Foster Engagement

Enhance collaboration at all levels within EPCC and the community.

Intended Outcomes:

- ✓ Increase Enrollment
- ✓ Recruit and Retain Qualified & Diverse Employees
- ✓ Promote Innovation, Responsiveness and Accountability
- ✓ Encourage All Employees to Take Personal Responsibility
- ✓ for Student Success & Engagement
- ✓ Promote Equity, Diversity & Inclusion

Goal 4-Build Community & National Awareness & Grow Partnerships Share the many ways EPCC transforms student's lives and impacts the community and region.

Intended Outcomes:

- ✓ Increase Business and Community Partnerships
- ✓ Align with Regional Educational, Economic and
- ✓ Workforce Demands
- ✓ Enhance EPCC Visibility & Brand Presence
- ✓ Strengthen Community Trust and Confidence in EPCC

Goal 5 Sustainability

Be a progressive educational leader through innovation, identifying opportunities for improvement and effectively utilizing resources.

Intended Outcomes:

- ✓ Maintain Fiscal Strength and Accountability
- ✓ Implement the Master Plan
- ✓ Ensure Campus Safety
- ✓ Integrate Planning, Data-Driven Decision Making and Best Practices
- ✓ Create Quality and Effectiveness in All College Operations

NURSING PROGRAM PHILOSOPHY

The nursing faculty of the Career Ladder Nursing Program agrees with the mission, vision and the core values of a learning college ascribed by the El Paso County Community College District. We must provide an opportunity and support services that prepare individuals to improve their personal quality of life and to contribute to their economically and culturally diverse community.

The nursing faculty believes that nursing education can be improved through the implementation of a Career Ladder concept which allows individuals to progress in the educational system by providing multiple educational pathways leading to an entry-level license to practice as a vocational or associate degree nurse. Inherent in our philosophy are our beliefs about the individual, nursing, health, the environment, teaching, learning, nursing education, the roles of the associate degree nurse, and the roles of the vocational nurse within the scope of nursing practice.

Individual

Every individual is unique, of infinite value, and worthy of respect. Each individual is a culturally diverse composite of inter-related biological, psychological, sociological, cultural and communicating needs that influences the individual's perception of their health. The individual is autonomous and has the right to make decisions about his/her own health care. The individual and family are the recipients of nursing care that focuses on meeting their needs.

Nursing

Nursing is a humanistic and a professional health care discipline founded on knowledge from the sciences, humanities and human experience. It is a scholarly profession that utilizes theories from nursing and other disciplines. Nursing employs integrity, accountability, clinical judgment and caring behaviors to guide its practice for health promotion and disease prevention, health maintenance and health restoration. Nursing advocates for the individual and family throughout the life span and in the final stages of life. Through the use of the nursing process, critical thinking and therapeutic interventions which are supported by current evidence-based research, the nurse is able to provide, holistic nursing care for the patient and family across the life span. The nurse must have the ability to utilize a variety of current technologies and nursing informatics to provide safe and effective patient-centered care in a variety of health settings.

Health

Health is a dynamic state that is influenced by each individual's inherited characteristics and life experiences. It is an individual's perception of the satisfaction with their own state of wellbeing. It may or may not be related to the presence or absence of disease, but rather the patient's perception. Humans perceive themselves as healthy or ill as a consequence of the relationship between themselves and their environments. At any given time a person's health status is seen as being at a point on a continuum that extends from wellness to the cessation of life.

Environment

Environment is the domain in which individual and family exist. The interaction between the environment and people affects health, well-being, growth and development and the degree to which individual needs are met throughout the life cycle. The reciprocal relationship between the person and environment is influenced by both internal and external factors. Internal factors include the biological, psychological and spiritual attributes of the person. External factors are comprised of physical, chemical, sociocultural, economic, political, legal, and ethical elements.

Teaching

Teaching is a process, aimed at facilitating the achievement of learning. It is an intentional interaction between the teacher and the learner, requiring a focus on mutual goals. It involves logical, strategic, and instructional activities to facilitate changes in interest, motivation, perception, insights, and behavior in the learner. Teaching should include a variety of instructional methods to meet individual student learning needs. It is most effective when outcomes are stated in measurable behavioral terms, so that the student knows how learning is to be evaluated. The teaching process and the learning process cannot be separated.

Teaching is also a dynamic process which is used by nurses to assist in the education of patients, families and significant others. The nurse is expected to assess the learning needs and to develop, implement, evaluate, and modify teaching plans designed to expand the knowledge base and skills of the patient.

Learning

Learning is an active, internal, and continuing process by which an individual acquires new knowledge through the integration and evaluation of concepts and skills. It is enhanced when the learner assumes responsibility for learning. It is further enhanced by direct application, readiness to learn, relevance to the learner, reinforcement of desired behaviors, use of all the senses, and the learner's prior life and work experience. Learning progresses from simple to complex, from general to specific, and from concrete to abstract.

Nursing Education

The faculty believes that education is based on humanistic approaches that foster critical thinking and promote awareness of social and cultural diversity among individuals. The faculty cares for each student as a unique individual with special talents, abilities, needs and goals. Cultural diversity, varying life experiences, and changing socioeconomic factors affect each student differently. To this end, faculty endeavor to provide an environment that assists students to realize their full potential. The acquisition of professional knowledge, communication skills, clinical competence, and clinical judgment occur through active involvement of the student in the teaching and learning process. Students assume primary responsibility for learning, while faculty provides educational opportunities for knowledge acquisition and professional role development. The faculty mentors, facilitates, motivates, guides, and directs the learning experience. Synergistic exchange between student and mentor encourages a learning environment that embraces excellence. Faculty believes that technology and nursing informatics is imperative in academic teaching and professional/vocational practice.

Education is seen as a continuous, life-long process through which individuals expand learning, enhance practice ability, or qualify for employment positions. The graduates of both the Vocational Nursing Program and the Associate Degree Nursing Program are prepared to function within the roles of the nurse developed by the Texas Board of Nursing (BON DEC 2010). These roles incorporate concepts from current literature, national standards, and research. These competencies provide the foundation for nursing education and practice. The four roles are: Member of the Profession, Provider of Patient-Centered Care, Patient Safety Advocate, and Member of the Health Care Team.

Roles of the Nurse

Upon program completion, the student is expected to exhibit behaviors specified in each role of the nurse as stated by the Texas Board of Nursing in the Differentiated Essential Competencies (DEC's) of Graduates of Texas Nursing Programs.

As a Member of the Profession, 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.

As a Provider of Patient-Centered Care, 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 the ADN educated RNs include individual patients and their families.

As a Patient Safety Advocate, 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.

As a Member of the Health Care Team, 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.

Vocational nursing represents the beginning level of the nursing practice continuum in the roles of the Member of the Profession, Provider of Patient- Centered Care, Patient Safety Advocate and Member of the Health Care Team. The entry level graduate of a vocational nursing program provides nursing care within a directed scope of practice under appropriate supervision. The vocational nurse uses a systematic problem solving process in the care of multiple patients with predictable health care needs to provide individualized goal- directed nursing care. The vocational nurse contributes to the plan of care by collaborating with interdisciplinary team members and the patient's family. The new graduate can readily integrate technical skills and use of computers and equipment into practice.

The primary role of the entry level graduate of an ADN program is to provide direct nursing care or to coordinate care for a limited number of patients in various health care settings. Such patients may have complex multiple needs with predictable or unpredictable outcomes. The entry level competencies reflect the scope of nursing practice for which the student is being prepared.

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EL PASO COMMUNITY COLLEGE NURSING PROGRAM

ORGANIZING FRAMEWORK

The EPCC Nursing Program student learning outcomes are derived from the philosophy and mission and are reflective of the Differentiated Essential Competencies of Graduates of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgment and Behaviors mandated by the Texas Board of Nursing 2010. The Differentiated Essential Competencies (DECs) demonstrate the progression of expectations across the types of nursing programs based upon educational preparation, These competencies were developed using current literature, national standards and research (e.g., the Quality and Safety Education for Nursing for Nurses Competencies, the Institute of Medicine Reports, the Carnegie Report). Safety, advocacy, compassionate patient-centered care, caring, teaching, learning, communication, evidence based practice and informatics are incorporated in the DECs and are evidenced throughout the curriculum.

The curriculum is designed so that students are provided the necessary experiences to develop the knowledge, behaviors, and skills expected of practicing nurses in order to meet the biological, psychological, sociological, cultural, communicating needs of the patient and family. In addition, the clinical judgments of the nurse are guided by personal and professional values. Therefore, ethical principles and cultural diversity are integrated throughout the curriculum as well. Legal concepts are integrated to include BON Rules and Regulations and the Texas Nursing Practice Act. The nurse uses a systematic process to assess, analyze, plan, intervene, and evaluate nursing care while collaborating with the interdisciplinary/multidisciplinary health care team. This process is referred to as the nursing process and is integrated throughout the curriculum.

Each course in the nursing program incorporates the four roles of the Associate Nurse which are required by the Texan BON: Provider of Patient Centered Care; Member of the Health Care Team, Member of the Profession, and Patient Safety Advocate. The objectives for both the theory and the clinical courses are related and demonstrate increasing complexity as the student progresses in the program. In addition, course objectives relate to the student learning outcomes appropriate for each level.

CONCEPT	DEFINITION
ACCOUNTABILITY	It is the obligation to report, explain, or justify something, being responsible or answerable. The nurse could be liable and called to account or to explain.
ACROSS THE LIFE SPAN	The longest period over which the life of any organism or species may extend, such as the longevity of an individual.
ASSOCIATE DEGREE NURSE (A.D.N.)	Is a Graduate of an associate degree nursing program that is responsible for interacting with the patient, family, and the interdisciplinary team as a Provider of Patient-Centered Care, Member of the Health Care Team, Member of the Profession, and Patient Safety Advocate in efforts to assist the patient to meet bio-psycho-social-cultural-communicating needs of the patient.
BEST PRACTICE	Best practice is a generic or general phrase for a process of infusing nursing practice with research-based knowledge. (i.e. evidence based practice)
BIOLOGICAL NEEDS	Requirements to maintain integrity of the patient's body systems.
BIOTERRORISM	Terrorist acts involving the use of harmful agents and products of biological origin, as disease-producing microorganisms or toxins.
CAREER LADDER (MEEP) (Multiple Entry Exit Program)	A multiple entry/exit program (MEEP) in nursing offering a variety of flexible approaches that makes education more appropriate to the individual learner.
CARING	Concept involves accepting and treating individuals as having value, worth and dignity. Caring behaviors include attentive listening, comforting, empathy, honesty, patience, responsibility, providing information so the patient can make an informed self-determined decision; touch; sensitivity; and respect.
CLINICAL JUDGEMENT	The application of information based on actual observation of a patient combined with subjective and objective data that lead to a conclusion the ability to make logical, rational decisions and decide whether a given action is right or wrong; this involves problem solving, decision making, and critical thinking.
COMPASSIONATE	A feeling of deep sympathy and sorrow for another who is stricken by misfortune, accompanied by a strong desire to alleviate the suffering.
COLLABORATION	To work cooperatively with the patient, significant support person(s), peers, other members of the interdisciplinary/multidisciplinary team, and community agencies to bring about solutions that balance differing needs, values, and motivations for the purpose of achieving positive outcomes.
COMMUNICATING NEEDS	Communication is a complex, ongoing, interactive process that forms the basis for building interpersonal relationships; to establish the nurse-patient relationship, to be effective in expressing interest/concern for the patient and family within the environment and their communicating needs.
COMMUNICATION	Process by which information is given from one individual to another individual either directly or indirectly.

CONCEPT	DEFINITION
COMPETENCE	The quality of being competent or capable of performing an allotted or required function; the ability of having knowledge, skills, experience, qualification and judgment necessary to meet professional nursing responsibilities.
COORDINATION OF CARE	Two or more people providing services to an individual or group and keeping all participants informed of their activities.
CRITICAL THINKING	The ability to reason out, in a purposeful and goal-directed manner, the accuracy and logic of information in order to transform that information into applicable knowledge. The nurse's attitudes, knowledge base, and skills determine the level of critical thinking.
CULTURE	The totality of socially transmitted behavior patterns, beliefs, values, customs, lifeways, arts and all other products of human work and thought characteristics of a population of people that guide their worldview and decision-making.
CULTURAL DIVERSITY	Refers to the fact or state of being different. Diversity accounts for many factors: sex, age, culture, ethnicity, socioeconomic status, educational attainment, religious affiliation. Diversity occurs between and within cultural groups.
CULTURAL NEEDS	Requirements of the family unit and of the patient's life style, language, sexual, spiritual, and religious beliefs.
DELEGATON	The assignment of authority and responsibility to another person (normally from a manager to a subordinate) to carry out specific activities. However the person who delegated the work remains accountable for the outcome of the delegated work. Delegation empowers a subordinate to make decisions.
DISASTER PLANNING	A disaster plan is a scheme or method of acting, doing, or proceeding, that is developed in advance of a calamitous event, especially one occurring suddenly and causing great loss of life, damage, or hardship, as a flood, airplane crash, or business failure.
DISEASE PREVENTION	Involves activities aimed at identifying risk factors for disease and measures that prevent disease. Includes environmental programs that can reduce the incidence of disease or disability.
ENVIRONMENTAL SAFETY	Environment is the social and cultural forces that shape the life of a person or a population; Safety minimizes risk of harm, injury, danger, or risk to patients and providers through both system effectiveness and individual performance; careful to avoid danger or controversy.
EVIDENCED BASED PRACTICE	Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care (QSEN); the practice of evidence based nursing means integrating individual clinical expertise with the best available external clinical evidence from systematic research.

CONCEPT	DEFINITION
FACILITATE	To make easier or less difficult; help forward an action, a process; to assist in the progress of something or someone
FAMILY	Social unit which is comprised of two or more persons who interact in a system of roles and relationships; may or may not be a relative or spouse (at times may be referred to as a significant other).
HEALTH CARE SETTINGS	Various health care environments in which the nurse assumes patient care responsibilities. This includes, but is not limited to, acute care facilities, long term care agencies, outpatient/inpatient clinics, and community based agencies, schools.
HEALTH MAINTENANCE	Is the ability to sustain and preserve the present physical, mental and social well-being of an individual.
HEALTH PROMOTION	An active process that assists a person to develop those resources that will maintain or enhance well-being or improve the quality of life.
HEALTH RESTORATION	The process of restoring an individual to a former state of health after any disease or injury that causes mental or physical impairment.
HOLISTIC	Holistic nursing care is defined as a practice that focuses on healing the whole person through the unity of body, mind, emotion, spirit and environment.
INDIVIDUAL	An Individual is an inter-related biological, psychological, sociological, cultural and communicating being who is a recipient of nursing care that focuses on meeting their needs.
LIFE-LONG LEARNING	Process oriented and relates to acquiring knowledge and developing abilities which lead to a permanent change in behavior over time.
NEEDS	A stimuli based on a perceived or actual lack of internal constancy or harmony with the environment; a desire for an improved sense of wellbeing. Can be describing in terms of actual and potential health problems.
NURSE	An Associate Degree or Vocational Nurse
NURSING INFORMATICS	Use information and technology to communicate, manage knowledge, mitigate error, and support decision making. (QSEN)
NURSING PROCESS	A method of critical thinking in which the nurse uses assessment, analysis, planning, interventions/ implementation, and evaluation (to include reassessment) in the delivery of patient care. This process is also referred to a systematic problem solving process, a systematic process, a systematic approach, and systematic problem solving approach.
PATIENT	Recipient of health care services and an active participant in health promotion and disease prevention, health maintenance, and health restoration to meet their bio-psycho-social-cultural and communicating needs. The Associate Degree Nurse defines the patient as the individual and family; whereas, the Vocational Nurse defines the patient as an individual in the context of their family.

CONCEPT	DEFINITION
PATIENT-CENTERED CARE	Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs.
PERCEPTION OF HEALTH	Immediate or intuitive recognition insight or discernment of the general condition of the body or mind with reference to soundness and vigor with freedom from disease or ailment.
PROFESSIONAL NURSE	Professional Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations. The professional nurse assures that he/she stays well educated in the field he/she is working in; must assure that he/she does not cross nurse-patient boundaries; must display empathy without becoming personally involved with patients.
PROMOTING PROFESSIONAL NURSING	To encourage acceptance of Professional Nursing especially through advertising or other publicity; to help or encourage to exist or flourish.
PROFESSIONAL STANDARDS	Standards are professionally developed expressions of the range of acceptable variations from a norm or criterion; that are pre-determined elements against which aspects of the quality of medical service may be compared. Standards may be defined as "Benchmark of achievement which is based on a desired level of excellence; all standards of practice provide a guide to the knowledge, skills, judgment & attitudes that are needed to practice safely.
PROFESSIONAL VALUES	Professional values represent the foundational beliefs from which standards of ethical practice are derived.
PSYCHOLOGICAL NEEDS	Requirements to maintain integrity of the patient's psyche and emotional needs; includes Maslow's hierarchy and Erickson's developmental tasks.
ROLE	Set of expected behaviors that relate to specific position being held.
SAFETY	Minimizes risk of harm to patients and providers through both system effectiveness and individual performance."
SCOPE OF NURSING PRACTICE	The term "scope of practice" is used to define the actions, procedures, etc. that are permitted by law for a specific profession. It is restricted to what the law permits based on specific experience and educational qualifications
SOCIOLOGICAL NEEDS	Dealing with social questions or problems, especially focusing on cultural and environmental factors rather than on psychological or personal characteristics; financial and support system concerns of the patient.
TEACHING PLANS	A nursing patient teaching plan should be centered around the patient and inclusive of the family; patient education improves patient outcomes and quality of life; educating the patient is an integral part of the nurse's role. The student learns that effective patient-centered teaching requires effective communication skills, knowledge of the teaching-learning process and mastery of knowledge to be imparted to patients and families.

CONCEPT	DEFINITION
TEACHING AND LEARNING	Teaching strategies guide the instructional process toward achieving individual student learning outcomes and expected student outcomes. Learning serves as one component of the educational process which involves an intentional act of communicating information to the learner.
TECHNOLOGY	Involves rapidly developing methods for collecting and communicating information and for treatment of disease. Constant change in technology assures that continuous learning is an integral part of nursing
THERAPEUTIC INTERVENTIONS	Nursing actions which provide effective treatment and education to facilitate health promotion and disease prevention, health maintenance, and health restoration.
VOCATIONAL NURSE (V.N.)	A graduate of a one-year nursing program who assists the Registered Nurse in the delivery of health care as a Provider of Patient-Centered Care, Member of the Health Care Team Member of a the Profession, and Patient Safety Advocate. The Vocational Nurse assists the patient to meet bio-psycho-socio-cultural and communicating needs.

*Programs - Vocational Nursing Program and Associate Degree Nursing Program

Revised: August, 2009 Revised, November, 2011 Revised March 2, 2012 Revised: 6-1-12 Reviewed: 8-2014 Reviewed: December, 2015 Reviewed: August 2018

EL PASO COMMUNITY COLLEGE ASSSOCIATE DEGREE NURSING PROGRAM OUTCOMES

PERFORMANCE ON LICENSURE EXAM

For each program option, the three-year mean for the licensure exam pass rate will be at or above the national mean for the same three-year period.

GRADUATE PROGRAM SATISFACTION

80% of graduates, twelve months post-graduation, indicate that they are "Completely Satisfied" or "Satisfied" with the preparation they received in each program option, to perform the Student Learning Outcomes specified on the Graduate Satisfaction Survey, as an entry level nurse.

JOB PLACEMENT RATES

90% of program graduates are employed or pursuing additional education within one (1) year of graduation, as reported by Texas Higher Education Coordinating Board.

EMPLOYER PROGRAM SATISFACTION

80% of employer's indicate that they are "Completely Satisfied" or Satisfied" with the graduate's preparation, as an entry-level nurse to perform each of the Student Learning Outcomes specified on the Employer Satisfaction Survey, twelve months post-graduation.

PROGRAM COMPLETION

- 1. Generic: At least 70% of the generic students complete the ADN program within three (3) years of program admission and reflect the demographics of the group admitted by at least 85%. (Student demographics: age, gender, and ethnicity.)
- 2. LVN to RN and Paramedic to RN: At least 70% of the LVN to RN students complete the ADN program within eighteen (18) months of program admission and reflect the demographics of the group admitted by at least 85%. (Student demographics: age, gender, and ethnicity.)

Voted on 3-20-15

Reviewed: August 2018

VOCATIONAL NURSE PROGRAM OUTCOMES

The graduate of the El Paso Community College Vocational Nursing (VN) Program is prepared to function in various health care settings as a creative, critical-thinking, and self-directed individual. The graduate is able to function in accordance with the Differentiated Essential Competencies (DECs) of Graduates of Texas Nursing Programs Evidence by Knowledge, Clinical Judgments, and Behaviors (2010). Twenty five core competencies are categorized under four (4) main nursing roles:

- Member of the Profession
- Provider of Patient-Centered Care
- Patient Safety Advocate
- Member of the Health Care Team

V.N. Program outcomes are as follows:

- 1. NCLEX-VN* annual pass rate will be at or above the national mean.
- 2. 75% of students graduate within 1½ years of program admission.
- 3. 80% of employers are "satisfied with EPCC graduates" to be evaluated annually, using the EPCC Program Review Report.
- 4. 80% of graduates are satisfied with program (class availability, course helped in occupational area, technology and curriculum) to be evaluated annually, using the EPCC Program Review Report.
- 5. 90% of program graduates are employed, in the military, or pursuing additional education within one year of graduation, as reported on the EPCC Program Review Report.

Revised and Adopted: 9-16-11 Approved by faculty: 9-23-11 *VN=Vocational Nursing

6-07-12

Reviewed: December, 2015 Reviewed: August 2018

STUDENT LEARNING OUTCOMES: ASSOCIATE DEGREE NURSING

Nursing Program Student Learning Outcomes (SLO's) assess the knowledge, skills/abilities, and/or attitudes that display behavioral evidence which the students have attained from their educational experiences. The ongoing assessment of Student Learning Outcomes is specifically linked to the El Paso Community College Mission Statement, Institutional Strategic Goals, Program Review, and the Nursing Mission and Vision statement. Nursing Program Student Learning Outcomes specifically describe the end result of the Nursing program.

	Student Learning Outcomes – SLO's
1.	Integrate teaching-learning principles by developing, presenting, evaluating and modifying teaching plans to meet the needs of patients and their families.
2.	Utilize nursing clinical judgment, communication skills and a systematic process when advocating for safe caring and compassionate patient-centered care to culturally diverse patients and their families acrossthe lifespan in a variety of health care settings.
3.	Assume accountability for the quality of patient-centered nursing care within the legal scope of nursing practice consistent with ethical principles and professional values and standards.
4.	Provide evidence-based nursing care that promotes safety for the patient, family and their environment, while utilizing current technologies and nursing informatics.
5.	Collaborate and co-ordinate with patients, their families and the interdisciplinary/multidisciplinary health care team to implement best practices and to address health promotion and disease prevention, health maintenance and health restoration based on the individual's perception of their health needs.

Revision to SLO's Fall,

2011

Final – 6-7-12 Revised: 09-12 Reviewed: 8-2014

Reviewed: December, 2015

Revised: May 2018

STUDENT LEARNING OUTCOMES: VOCATIONAL NURSING

Nursing Program Student Learning Outcomes (SLO's) assess the knowledge, skills/abilities, and/or attitudes that display behavioral evidence which the students have attained from their educational experiences. The ongoing assessment of Student Learning Outcomes is specifically linked to the El Paso Community College Mission Statement, Institutional Strategic Goals, Program Review, and the Nursing Mission and Vision statement. Nursing Program Student Learning Outcomes specifically describe the end result of the Nursing program.

	Student Learning Outcomes – SLO's
1.	Integrate teaching-learning principles by developing, presenting, evaluating and modifying teaching plans to meet the needs of patients and their families.
2.	Utilize nursing clinical judgment, communication skills and a systematic process when advocating for safe caring and compassionate patient-centered care to culturally diverse patients and their families acrossthe lifespan in a variety of health care settings.
3.	Assume accountability for the quality of patient-centered nursing care within the legal scope of nursing practice consistent with ethical principles and professional values and standards.
4.	Provide evidence-based nursing care that promotes safety for the patient, family and their environment, while utilizing current technologies and nursing informatics.
5.	Collaborate and co-ordinate with patients, their families and the interdisciplinary/multidisciplinary health care team to implement best practices and to address health promotion and disease prevention, health maintenance and health restoration based on the individual's perception of their health needs.

Revision to SLO's Fall,

2011

Final – 6-7-12 Revised: 09-12 Reviewed: 8-2014

Reviewed: December, 2015

Revised: May 2018

STUDENT PARTICIPATION

NURSING PROGRAM COMMITTEES

The nursing program has three standing committees on which nursing students participate. Students volunteer for this participation and serve as representatives of the entire body of nursing students. Meetings are held throughout the semester.

1. **RESOURCES COMMITTEE**

- a. To provide for coordination of learning resources, such as labs, media, and library references for the El Paso Community College Nursing Discipline.
- b. At least one (1) nursing student either selected by his/her peers or by volunteering.

2. **STUDENT COMMITTEE**

- a. To provide input on student procedures for the El Paso Community College Nursing Discipline
- b. At least one (1) nursing student either selected by his/her peers or by volunteering.

3. **PINNING COMMITTEE**

- a. To provide input and plan the pinning ceremony of the completion of either the Associate Degree Nursing (ADN) Program or Vocational Nursing (VN) Program.
- b. Pining committee's will also be formed and be active in each semester.
- c. All graduating ADN or VN students in their respective program are encouraged to be active participants in the pinning.

Reviewed: August, 2008 Reviewed: August, 2009 Revised: June, 2012 Revised: August, 2014 Reviewed: December, 2015 Revised: August 2018

STUDENT NURSE ASSOCIATION (SNA)

The EPCC Student Nurse Association (SNA) is a Student Government Association (SGA) recognized club for all interested nursing and pre-nursing students attending EPCC. This club provides students with opportunities to participate in scholarly and community charitable events (health fairs, fundraising, etc.) and provide nursing administration with constructive feedback about the nursing program. These opportunities enhance the students' acquisition of nursing knowledge, skills, leadership, and sense of professional accountability. SNA board members, elected by current EPCC nursing students and supported by faculty advisor(s), schedule and run the weekly meetings. It is a great way to meet other nursing students in the nursing program. All nursing students are encouraged to be active participants in the club.

All Nursing students in the ADN and VN programs and pre nursing students can be members.



Student Concern Form

NAME:				
Address:	I			
Phone: Home Cell				
I want this to be kept confidential Yes □ Please note that by checking the Yes box, the Dean will party and will be unable to share any of the specifics or to elevate your concern to the Vice President of Instruction will be submitted for the Vice President's office to review	only be able to discuss yo this written form with the tion, that even by checkin	em. Please further note that should you	find no other recourse than	
Notification Made By: Letter Interv	iew Phone cal	l Other		
Subject of Concern:			per may be added as needed.	
TWO OF CONCEDN C 1	4 D I	m i Mai i	0/1	
TYPE OF CONCERN: Grades Test		<u> </u>		
Professor/Staff Name:	Course/Section	: Class Days	11me	
(Students knowingly making false claims will be	subject to disciplinary	action in accordance with the Stude	ent Code of Conduct)	
Has the identified party been contacted?	Yes □ No □	NA 🗆		
Has the faculty coordinator been contacted?	Yes □ No □	NA 🗆		
For Administrative Use Only				
RECOMMENDED ACTION:				
Follow-Up: Faculty/Staff Coording	ator □ Staff Supe	ervisor List Attachmer	nts:	
For Faculty/Staff: I have met with my dean/ RESOLUTION:				
COMMENTS:				
Interviewer's Signature		Additional Documents A	ttached	

DRUG DOSAGE PROCEDURES

PROCEDURE ON PRE-CLINICAL DRUG CALCULATION ASSESSMENT

- 1. Mastery of drug calculations must be demonstrated for all nursing clinical courses. A score of 90% or higher on a preclinical drug calculation assessment examination must be received. Students must receive the 90% score prior to administering medications in the clinical setting. This applies to all students enrolled in a theory or a clinical course to include the first semester.
- 2. All students taking or auditing the theory course with a clinical course as requisite must also take the pre-clinical calculation examination, even if not enrolled in the clinical course. This will validate their knowledge and skills as they prepare to advance to the next course and provide an opportunity for remediation, if appropriate. The first attempt at the calculation examination/math test will be counted as a theory quiz.
- 3. Students who do not receive a 90% on the calculation examination will not administer medications in the clinical area. Points will be deducted in all applicable areas of the A.D.N./VN Competencies (clinical evaluation) and an additional 10-point deduction from the A.D.N./VN Competencies (clinical evaluation) for each day that medications cannot be administered.
- 4. Math exam will be offered once weekly.
- 5. Any student making less than 90% on the calculations examination will receive a written student counseling form and will be expected to comply with remediation recommendations prior to re-testing.
- 6. Starting with the first semester of nursing courses, each unit examination and the comprehensive final examination for the theory nursing courses will contain medication administration and calculation questions to equal ten percent (10%) of each examination.
- 7. Students will be deducted 10 point per each clinical day missed. Since they are not eligible to pass meds until they achieve 90% on the math calculation examination.

Note: Only generic (basic) calculators can be used for the calculation's examinations. No calculators with programming will be allowed for the test. Revised: February, 2004

Reviewed: August, 2004
Reviewed: July, 2005
Revised: July, 2006
Reviewed: Oct., 2007
Reviewed: August, 2008
Reviewed: December, 2015
Reviewed: August, 2008
Reviewed: May 2018

POLICY FOR DRUG DOSAGE CALCULATIONS

PURPOSE: The following procedures will be utilized in the EPCC Nursing Program during theory and clinical instruction, including testing. The procedures were established to avoid confusion among students and instructors in the indicated areas. These guidelines are an adjunct to the math competency statements previously established.

- 1. Instruction in theory, clinical, and lab classes will be based upon dimensional analysis. Ratio and proportion, may be used, but will not be taught.
 - a. Students who have previously learned another method of drug dosage calculations may continue to use that method; however, they are responsible for being able to meet all of the math competencies regardless of method of calculation.
 - b. Individualized tutoring using other methods may be obtained by individual or small group appointments with nursing instructors or developmental studies tutors.
- 2. Students are expected to have the following as entry level skills:
 - a. Basic math skills in addition, subtraction, multiplication and division with whole numbers, decimal numbers, and fractions.
 - b. Utilization and interpretation of percentages.
 - c. Utilization and interpretation of ratio & proportion.
 - d. Utilization and interpretation of roman numerals.
 - e. Ability to set up and solve basic equations solving for X (an unknown).
- 3. Remediation in math skills may be obtained from Developmental Studies tutors, the Retention Action Program tutors, or through enrollment in selected math courses.
- 4. The "Instruction Sheet for all Drug Calculation Exams" will be adhered to when taking Drug Calculation Exams.

Reviewed: August, 2004
Reviewed: July, 2005
Reviewed: July, 2006
Reviewed: Oct., 2007
Reviewed: August, 2008
Reviewed: August, 2009
Reviewed: June, 2012
Reviewed: August, 2014
Reviewed: December, 2015

EL PASO COMMUNITY COLLEGE NURSING PROGRAM PROCEDURES FOR TESTING DRUG DOSAGE CALCULATION COMPETENCIES

The following procedures will be used for testing drug dosage calculation competencies in the nursing program:

<u>Dosage Calculations for Nursing (RNSG 1208) or</u> Essentials of Medication Administration (VNSG 1227):

- 1. The drug dosage competencies will be tested on unit exams and a comprehensive final examination.
- 2. Content includes (but is not limited to) conversions, oral and parenteral calculations, dosages based on body weight, solutions, intravenous infusions, body surface area, and kilocalories.

Foundations for Nursing (RNSG 1413-1260) or Basic Nursing Skills (VNSG 1323-1160) and Applied Nursing Skills I (VNSG 1402-1260).

- 1. Drug dosage calculation questions will be limited to specific objectives within each of the course modules.
- 2. Students will be expected to perform the calculations necessary to meet the medication administration procedures for Foundations or Basic Nursing Skills and Applied Nursing Skills I. (See Medication Administration Procedure).

ALL OTHER NURSING COURSES

- 1. A written diagnostic examination will be given in theory and/or clinical at the beginning of the course. It will also be given in theory only courses that have no clinical. Students will be counseled and/or referred for appropriate remediation.
- 2. Students will be evaluated in clinical administration of medications and appropriate drug dosage calculations on the basis of the clinical competencies and unsafe clinical practice procedures.
- 3. Students will be tested on drug dosage calculations on each unit exam and on the final exam with questions relating to medications associated with patient conditions being tested.

Reviewed: September, 2002
Reviewed: August, 2004
Reviewed: August, 2004
Reviewed: August, 2009
Revised: August, 2004
Reviewed: July, 2005
Reviewed: July, 2006
Reviewed: July, 2006
Reviewed: Oct., 2007
Reviewed: May 2018
Reviewed: May 2018

PROCEDURE ON MEDICATION ADMINISTRATION

- 1. Special affiliate policies and procedures regarding medication administration override the El Paso Community College Nursing Program Procedure.
- 2. ANY insulin injections, anticoagulants, or controlled substances must be verified with the instructor or another Registered Nurse prior to administration or per instructor instructions.
- 3. In addition to the above, the following guidelines are specific to each listed course:

First Semester:

- 1. <u>Foundations for Nursing Practice (RNSG 1413-1260)</u> or Basic Nursing Skills (1323-1160) and Applied Nursing Skills I (VNSG 1402-1260)
- 2. <u>Students shall not administer any medication, in any form, via any route EXCEPT as specifically directed by the instructor</u>. Selected wound and skin care products under direct supervision of a licensed nurse or Instructor is permitted.
- 3. Students shall monitor IV flow rates.
- 4. With supervision, students may discontinue heparin locks and IVs.
- 5. Foundations for Nursing Practice (RNSG 1413-1260) and Applied Skills I (1402-1260)
 - a. <u>With supervision</u>, students shall administer oral, topical, and parenteral medications.
 - b. With supervision, students may change IV site dressings (peripheral only)

Second Semester ADN:

Common Concepts of Adult Health (RNSG 1441-1161) AND Mental Health Nursing (RNSG 2213-2260) Paramedic to RN Option (RNSG 1517-1360)

Second and Third Semester at MDP and LVN Spin Off at RG:

Applied Nursing Skills II (VNSG 2413-1261)
Applied Nursing Skills III (VNSG 2214-1163)
Practicum or field experience LVN Training VNSG 1166
Pediatrics (VNSG 1234-1262) Maternal-Neonatal Nursing (VNSG 1230-1263)

- 1. With supervision, students shall administer oral, topical, and parenteral medications.
- 2. Students shall operate infusion devices, such as controllers and pumps.
- 3. With supervision, students shall change main line peripheral IV tubing and IV piggyback tubing.
- 4. With R.N. Supervision, student may change the IV site dressings (peripheral).
- 5. With R.N. Supervision, students shall flush heparin locks and hang:
 - a. Primary IV fluid bags
 - b. Piggybacks
 - c. Hyper alimentation
 - d. Lipids
- 6. In nursery ALL medication administration shall be supervised by the Instructor or another R.N.

7. Students **SHALL NOT**:

- a. Administer IV push medications
- b. Hang blood, blood products, or plasma expanders
- c. Hang IV solutions which contain anti-coagulants
- d. Hang IV solutions which contain medications to regulate blood pressure or cardiac arrhythmias
- e. Administer chemotherapeutic or experimental drugs
- f. No medication via epidural catheter.

Third Semester ADN:

Care of Children and Families (RNSG 2201-2262) and Maternal/Newborn Nursing and Women's Health (RNSG 2308-2263) Transition to Professional Nursing (RNSG 1327-1262)

Students shall be responsible for all previous skills listed above and additionally:

- 1. <u>With R.N. supervision</u>, students shall monitor IV administration of Pitocin, Magnesium Sulfate, other medications, and may decrease flow rate of these medications.
- 2. In nursery, <u>ALL</u> medication administration shall be supervised by the Instructor or another R.N.
- 3. <u>With R.N. supervision</u>, students may administer IM, PO, IV, SubQ, Interdermal(ID), topicals and medications to neonates.

Fourth Semester ADN:

Complex Concepts of Adult Health (RNSG 1343-2162) and Professional Nursing: Leadership and Management

Students shall be responsible for all previous skills listed above and additionally:

1. <u>With R.N. supervision</u>, students **SHALL**:

- a. Administer IV push medications
- b. Hang blood, blood products, and plasma expanders (or per hospital policy)
- c. Hang IV solutions which contain anti-coagulants or medications to regulate blood pressures and cardiac arrhythmias.
- d. With R.N. supervision, students may administer IV push narcotics

2. Students **SHALL NOT:**

- a. Administer chemotherapeutic or experimental drugs
- b. Adjust or Titrate IV medications used to regulate blood pressure or cardiac arrhythmias.

Reviewed: September, 2002 Revised: August, 2003 Reviewed: August, 2004 July, 2005 Reviewed: July, 2006 Revised: Oct., 2007 Revised: Reviewed: August, 2008 Revised: August, 2009 June, 2012 Revised: August; 2014 Reviewed: Reviewed: December, 2015 Revised: May 2018

INSTRUCTION SHEET FOR ALL DRUG CALCULATION EXAMS

- Simple calculators may be used during exams. Conversion charts, cell phone calculators, and programmable calculators may not be used during examinations.
- The rules for rounding follow mathematical convention. Calculate only to one decimal place beyond the final answer, and then round to the final answer (except in 3rd semester where special instructions will be given.)
- Final answers should be rounded as follows:

Calculation considerations:

- 1. Do not round conversions within the same measurement system.
- 2. In the apothecary system, when converting grains, leave as fractions.
- 3. Round calories to whole numbers.
- 4. Round intravenous rates to whole numbers. There may be exceptions to this policy in specialty areas.

Administration considerations:

- 1. Solid Medications
 - Tablets should be rounded to the nearest whole number unless they are scored.
 - Scored tablets may be rounded to the half or quarter tablet.

2. Liquid Medications

- Household measurements should be left in realistic amounts. (For example ¹/₄ teaspoon)
- Liquids less than 1 milliliter should be measured in a 1 milliliter syringe and rounded to the nearest 100th
- Liquids from 1 to 3 milliliter should be measured in a 3 milliliter syringe and rounded to the nearest 10th
- For infants all medications should be measured in a syringe of the appropriate size.
- For adults if the dosage equals 5 milliliter, 10 milliliters, 15 milliliter, 20 milliliter, 25 milliliter, or 25 milliliter a medication cup may be used.
- Dosages for oral liquids that are between the 5mL intervals on the medication cup should always be measured in an appropriate syringe. (For example 7 milliliter, 12.5 milliliter)

Dosage Considerations

Therapeutic dosage or dosage range refers to the amount of drug and should be in the same decimal given.

- If the therapeutic dose is in whole numbers, then the dosage answer should be rounded to whole numbers. (For example 50 milligrams/kilogram /day)
- If the therapeutic dose is in tenths, then the dosage answer should be in tenths. (For example 3 to 4 milligrams/kilogram/day)
- If the therapeutic dose is in hundredths, then the dosage answer should be in hundredths. (For example 0.01 to 0.02 milligram/kilogram/day)

August 2003 Approved: Reviewed: July, 2005 July, 2006 Reviewed: Oct., 2007 Reviewed: Reviewed: August, 2008 Revised: August, 2009 June, 2012 Reviewed: August, 2014 Reviewed: Reviewed: December, 2015 May 2018 Revised:

EXAMPLES FOR DRUG CALCULATION ROUNDING

Calculation Considerations

Explanation	Example
Do not round conversions in the same system.	252 milliliter = 0.252 L 2857 grams = 2.857 kilogram
T	
Leave grains as fractions	Grains 1/150 [not grains 0.0067]
Round calories to whole numbers	1483.45 kilo calories = 1483 kilo
	calories [not 1484 kilo calories]
Round IV rates to whole numbers [the exceptions may be	14 drops/minute [not 13.7
in the specialty areas see below] **	drops/minute] 83 milliliter/hour [not
	83.33 milliliters/hour]

** IV RATE FOR SPECIALTY AREAS

When the total amount of milliliters to be administered is small the milliliter per hours should not be rounded.

(For example when using a syringe pump]

EXAMPLE

3.5 milliliter of medication in a syringe pump is to infuse in 20 minutes. In this case the nurse inputs 3.5 milliliter and 20 minutes into the pump which will automatically set the rate. Thus:

3.5 milliliter X 60 minutes (1 hour)

20 minutes (Time to infuse) = 3.5 milliliter X X = 10.5 milliliter/hour [Not 11 milliliter/hour]

The syringe pump automatically calculates and sets this rate not the nurse. Therefore, rounding IV rates applies to most non-specialty areas. [For example 83.33 milliliter should be rounded to 83 milliliters for main IV's and IVPBS] In specialty areas where the volume to administer is small not rounding is most appropriate. [For example 10.5 milliliter]

Administration Considerations

Solid medications

- a. Tablets half tablets may be answered in fractions (1 $\frac{1}{2}$) or decimals (1.5)
- b. If applicable, tablets may be rounded to 1/4 tablet
- c. Capsules cannot be split in half.

Liquid medications

- a. Household measurements may be left as ½ teaspoon and 1/4 teaspoon
- b. Less than 1cc should be rounded to hundredths.

Example: Ordered: .75 milligrams Available: 1 milligrams=1 milliliter Give

0.75 milliliter DO NOT ROUND - (Leave as hundredths because

it is less than 1milliliter)

c. Liquids from 1 milliliter to 3 milliliter should be rounded to tenths, if applicable

Example: 3.0 milliliter can be written as 3 milliliter

Example: 1.4 milliliter is not rounded

Example: 1.75 milliliter is rounded to 1.8 milliliter

(**Note**: For administration purposes, injections that are 3 milliliter may be drawn up in a 5 milliliter syringe for ease of aspiration. This is not required for oral medications)

<u>Dosage Considerations</u> Therapeutic dosages and dosage ranges refer to the amount of drug to be administered. The medication itself may be administered in a liquid, solid or other form. These rounding rules apply to the dosages - not the administration amount.

Ordered: 15 milligram every 6 hours

Therapeutic: 5-7 milligram per kilogram per day in 4 doses, 24 pounds

Pt. weighs: 24 pounds

Amt ordered per day: $\frac{milligrams}{day} = \frac{15milligrams}{1dose} \times \frac{4doses}{1day} = 60$

Therapeutic: LO $\frac{milligrams}{day} = \frac{5milligrams}{ki\log ramday} \times \frac{1ki\log ram}{2.2 pounds} \times \frac{24 pounds}{1} = 54,5454*$

HI $\frac{milligrams}{day} = \frac{7milligrams}{ki\log ramday} \times \frac{1ki\log ram}{2.2 pounds} \times \frac{24 pounds}{1} = 76,3636*$

CORRECT ROUNDED ANSWER: 55-76 milligram/day.

Since the therapeutic amount is in whole numbers, the answer must be in whole numbers.

However, other times, need to round to tenths or hundredths depending on the Therapeutic amounts.

If the therapeutic amount is listed as .1-.2 milligram per kilogram per dose (.1-.2 milligram/kilogram/dose), then for a 12 kilogram person the answer stays in tenths (1.2 milligram - 2.4 milligram)

If the therapeutic amount is tested as .06 - .12 milligram/kilogram/day, then for a 43.8 kilogram (2.63-5.26) person the answer stays in hundredths (2.63 - 5.26)

EL PASO COMMUNITY COLLEGE

DEFINITIONS FOR IV AND IV PUSH MEDICATIONS

- 1. IV Piggy-back: Or Intermittent administration of an intravenous drug by drip method through an existing intravenous infusion. The drug is mixed in a specified volume and administered in a specified period of time.
- 2. IV Drip: Or Continuous administration by infusion in a large volume (greater than 100 milliliters). A drug is mixed in a specific amount of fluid and administered over a specified period of time.
- 3. IV Push: The medication is administered diluted or undiluted at a specific rate directly into the vein by direct venipuncture or through an administration site of an existing intravenous infusion.
- 4. IV Retrograde: The medication is injected into the intravenous tubing by displacing IV fluid into an empty syringe. This method is useful when the child is small and/or has a slow drip rate.
- 5. IV Bolus: Medication put in a solution e.g. 50 or 100 milliliters and administered over a period of 30 minutes to 2 hours or as per physician orders.

The above routes may be used for administration by the Intermediate/Advanced Level Nursing students starting in Common Concepts Clinical RNSG 1261, UNDER THE SUPERVISION OF THE CLINICAL INSTRUCTOR OR RN DESIGNEE. At the Instructor's discretion, selected licensed personnel may supervise those students who have previously demonstrated competency. Only those medications approved by the hospital administration as safe for a Registered Nurse to give may be administered by the student. (excludes chemotherapy, experimental drugs, and adjust or titrate medications used to regulate blood pressure or cardiac arrhythmias.)

Reviewed: August, 2004
Reviewed: July, 2005
Revised: July, 2006
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Reviewed: August, 2008
Reviewed: August, 2009
Reviewed: June, 2012
Reviewed: August, 2014
Reviewed: December, 2015

EL PASO COMMUNITY COLLEGE

MEDICATION ERROR GUIDELINES

The Nursing Program medication error policy is as follows:

- 1. The student must immediately inform his/her RN assigned and the Charge Nurse of the medication error.
- 2. The student must complete an incident report for the Nurse Manager of the unit, Nursing Faculty.
- 3. The student must submit a drug card on the medication in question to the Nursing Faculty member.
- 4. A student counseling form will be completed by the Nursing Instructor with recommendations for follow-up.
- 5. A counseling form and the drug card will become a part of the student's permanent record.
- 6. A serious medication error <u>may</u> result in immediate course failure and/or dismissal from the Program for unsafe clinical practice.

Reviewed: August, 2004 Reviewed: July, 2005 Revised: July, 2006 Oct., 2007 Reviewed: Reviewed: August, 2008 Reviewed: August, 2009 June, 2012 Reviewed: Reviewed: August, 2014 Reviewed: December, 2015 Revised: May 2018

GENERAL NURSING PROCEDURES

EL PASO COMMUNITY COLLEGE

PROGRESSION IN THE NURSING PROGRAM

- 1. All generic students entering the Associate Degree Nursing Program or the Vocational Nursing Program are admitted via College procedure 7.02.01.10, "Specialized Admission Requirements for Programs in Health Careers and Nursing."
- 2. Ranking for students admitted for the Spring and Fall semester will be done according to the ranking procedure listed above.
- 3. Students on Academic Suspension with the college cannot be ranked for a nursing program. Students with an incomplete (I) cannot be ranked for a nursing program.
- 4. Students must have a 2.5 GPA to rank for a Nursing Program.
- 5. Generic students will follow the catalog degree plan for the year under which they were admitted. The catalog degree plan for the Associate Degree Nursing Student and/or the Vocational Nursing Student will be followed in sequential order. Re-entry students: See re-entry policy Reentry into a Nursing Program is by space availability. (7.02.01.26)
- 6. Non-Generic students that are defined as advanced placement, transfer, transferring program students, foreign students, nurses with Board orders, or reentry students will follow the catalog degree plan in sequential order for the year under which they were admitted/readmitted.
- 7. All nursing students must adhere to a Nursing degree plan as specified in the EPCC College Catalog for the semester/year that entry/reentry is sought. If a degree plan is different than the original one under which the student was admitted or if it comes from another institution, it is the students' responsibility to meet the new requirements, if any, and initiate a revised degree plan with a nursing counselor.
- 8. If a student is unsuccessful in the nursing program or withdraws from the program, it is the students responsibility to initiate the reentry process. All students desiring to reenter a nursing program are referred to EPCC policy "Student Reentry into the Nursing Program" (7.02.01.26)
- 9. All nursing students are expected to follow the policies and procedures as listed in the EL Paso Community College Catalog and Nursing Student Handbook.
- 10. All nursing students are expected to follow the policies and procedures in the Nursing Student Handbook.

Reviewed: July, 2005 Reviewed: August, 2008 Reviewed: June, 2012 Revised: August, 2018

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Revised: July, 2006 Reviewed August, 2004 Reviewed: Oct., 2007 Revised: August, 2009 Reviewed: December, 2015

EL PASO COMMUNITY COLLEGE

PROCEDURES FOR WRITTEN EXAMINATIONS, QUIZZES, AND CLINICAL

- 1. Unit examinations will be given at announced dates and times.
- 2. There will be **NO** retake examinations.
- 3. The unit examination grade, which may be computed on a percentage basis, will be averaged into the final grade for the course according to the published course grading scale. The ATI exam in each course will be averaged into the unit exam grade.
- 4. If a comprehensive examination is part of the course, the comprehensive examination grade will be a percent of the final grade for the course according to the published course grading scale.
- 5. The student must notify the instructor of an absence PRIOR to the time of the scheduled examination. If the student does not contact the instructor PRIOR to the time of the scheduled examination, a grade of zero (0) will be assigned.
 - Five points will be deducted from examinations not taken on the scheduled date and time. The student **MUST** take the examination within one week (7 days) unless special arrangements have been coordinated and approved with the instructor. Failure to follow this procedure or failure to take the examination at the designated time established by the instructor will result in a grade of zero (0) for the examination. It is the student's responsibility to contact the instructor and to keep the lines of communication open.
- 6. Students arriving late to take an examination will have to complete the examination in the time left. Extensions in exam time will not be allowed except for a directive received from the counselor with the "Center for Students with Disabilities" (CSD).
- 7. Extensions in time for exams must be done with a directive received from the counselor with the Center for Students with Disabilities (CSD). Request for time extensions received from other counselors or faculty will not be considered. Requests must be send through the CSD.
- 8. The student must have a final grade of 78% or higher to pass the course; this is necessary to progress to the next course, based on the EPCC catalog nursing degree plan to which the student is currently aligned.
- 9. At the instructor's discretion according to course syllabi, the lowest quiz grade may be dropped in the calculation of the course grade. There will be no exam grades dropped in the calculation of the course grade.

- 10. The instructor has the option of specifying seating arraignment, movement, what articles to bring to the exam and leaving the room during classes and examinations.
- 11. All books, notebooks, and personal belongings will be placed at the front of the classroom or other designated area i.e., left in car before entering a testing situation.
- 12. All individual nursing clinical courses must have a final grade of 78% or higher to pass the individual nursing clinical course. This standard is required before the student is allowed to continue on to the next individual nursing clinical course. This standard is based on the EPCC catalog nursing degree plan to which the student is currently aligned.
- 13. See individual course syllabi for other requirements related to Written Examinations, Quizzes, Clinical, and other graded materials.

Reviewed: February, 2004
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Revised: December, 2015 Reviewed: August, 2018

EL PASO COMMUNITY COLLEGE

PROCEDURE ON ROUNDING OF GRADES

The process of rounding course grades to be used throughout the Nursing Program will follow common mathematical convention:

- 1. Scores on each examination, assignment or clinical evaluation <u>will be rounded and</u> recorded to the closest whole number.
- 2. Rounding rule: All grades except for Final Course grade will be rounded.
- 3. **Final Course grades will NOT be rounded to the closest whole number.** A 78.00% is needed to pass the course with no rounding (i.e. 77.7 would be recorded as 77.7 and not rounded up to 78; 89.9 stays 89.9 and would not be rounded up to 90).
- 4. Grading Scale

$$A = 90 - 100$$

$$B = 80 - 89$$

$$C = 78 - 79$$

$$D = 70 - 77$$

F = 69 and below

D is <u>not</u> a passing grade in either Nursing Program. Minimum passing grade in all Nursing or Vocational Nursing courses is a C = 78.

8-22-13: Revised: 10-26-15

Starts: Spring 2016 Revised: August 2018

EL PASO COMMUNITY COLLEGE NURSING PROGRAM

PROCEDURE ON STANDARDIZED TESTING

The nursing program will utilize the "Comprehensive Assessment and Review Program" (CARP) offered by Assessment Technologies Institute, LLC (ATI). CARP prepares students for the NCLEX and their career by strengthening their knowledge base through focused remediation. It is a comprehensive learning solution that goes beyond testing by offering unique and proprietary remediation on each test, practice or proctored, and it ties directly back to the NCLEX. To address diverse learning styles, CARP includes multiple remediation sources such as online and traditional reading materials, videos, practice assessments and internet sources. The CARP package includes the following:

Entrance/Orientation

- Self-Assessment Inventory
- Critical Thinking Entrance Assessment
- Quest for Academic Success Review Guide
- Nurse Logic

Content Mastery Series

- Proctored Assessments
- Specialty-Specific Review Modules
- Learning System—Practice tests and Finals
- Skills Modules

NCLEX Preparation/Exit

- Comprehensive Predictor Assessments
- Online Practice Comprehensive Assessments
- Ready-Set RN/PN Review Guides
- Critical Thinking Exit Assessment

Each nursing course may have one or more proctored ATI assessments scheduled for completion during the course. These Proctored Assessments are identified in the Nursing Program's Standardized Testing Plan. With the exception of RNSG 2130 and VNSG 1219, students are required for course completion to take the Proctored ATI Assessment as scheduled, or they will receive a grade of "I" incomplete for the course. It is mandatory to take the Proctored ATI Assessment at the end of the specific courses. It will be counted as a unit exam grade in all courses except RNSG 1115, 1301, 1208, 1144 and VNSG 1227, 1323, and all clinical courses.

The Proctored Assessment must be taken as scheduled. If not taken as scheduled, zero points will be awarded.

For students enrolled in RNSG 2130 in the 4th semester of the ADN program and VNSG 1219 in the 3rd semester of the VN program, the ATI Comprehensive Predictor Assessment may be taken 2 times for successful course completion.

Prior to taking the Proctored Assessments, the student must score at least an 85% on the <u>practice</u> assessments. The practice test may be taken on any computer at any time and may be retaken until the student scores at least an 85% (although 24 hours must pass prior to retesting).

However, students must complete a focused review on the practice assessments on any items missed prior to retesting and before talking the Proctored Assessment. Students who would otherwise pass the course but (a) cannot take the proctored test on its scheduled date/time secondary to not scoring at least 85% on the practice test, or not completing the required focus review** or (b) do not take the proctored test on its scheduled date/time or (c) do not obtain a 90% predictability*** on either the mid-term or the final will receive an "Incomplete" in the course. Incomplete grades will be resolved at the instructor's convenience. (Note: Students who arrive late to the proctored test will not be allowed to take it).

The proctored assessment may be taken only once, with the exception of the Comprehensive Predictor Assessment which will be taken twice.

**Students, who do not take the ATI assessment at the scheduled time/date or have not completed the required remediation, will receive an incomplete grade for the class.

A Practice Assessment cannot be repeated until the course instructor has received the documentation of remediation for the previous Practice Assessment. In order to complete the remediation, students must print out the completed ATI individual Performance Profile (results), following completion of the Practice Assessment. On the ATI individual performance Profile, students must refer to the content areas and topics for review as identified on the profile. They must create and complete a focused review for the practice assessment. Then completed proof of the remediation must be submitted to the course instructor per course requirements.

***Students who do not receive a 90% on the Proctored Comprehensive Predictor

Assessment (probability that they will pass the NCLEX the first time) will receive an incomplete for the class. The students will take this test two times during the semester once counts as the mid-term and the 2nd time counts as the final.

If the student does not get 90% on the predictor the first or second time taken, the student's name will be sent to the Dean. A contract will be done between the Student and the Dean regarding remediation requirements that must be met before AOG is signed. Remediation may vary, but it will typically be an NCLEX review course and ATI remediation. After the contract has been met, the student will be allowed to sit for the third ATI Predictor. If the third ATI is not passed with a 90% a new contact will be made between the student and the Dean. When the ATI predictor is passed, the Dean will sign the AOG.

Students who receive an "I" for the course, must take the Proctored Assessment within the timeliness specified by the College Procedure for Incomplete Grades (see current El Paso Community College Catalog), or the course grade will revert to a grade of "F". Students receiving an "I" must make arrangements with the course instructor to complete the course requirements. These specifications will be put into the form of a contract/agreement which both the instructor and the student will sign and date. The student will receive a copy of this agreement. These arrangements will be at the discretion or availability of the Instructor.

The third ATI Comprehensive Predictor Assessment or any subsequent Comprehensive Predictor Assessment will be at the student expense. A Testing Center fee may also apply.

Students will receive an Exam Grade according to their achievement levels on the Fundamentals, Pharmacology, Mental Health, Adult Medical Surgical, Nursing Care of Children, Maternal Newborn, Leadership, Nutrition, Gerontology, and Community Proctored Assessments. An average Level of 3 will be 90, an average level 2 will be 85, and average level 1 will be 77, and an average level below 1 will be 69.

EL PASO COMMUNITY COLLEGE NURSING PROGRAM TOTAL TESTING PROGRAM – ASSOCIATE DEGREE 2018

Course Name	Proctored ATI Assessment
Dosage Calculations for Nursing RNSG 1208	Critical Thinking Assessment Entrance
Foundations for Nursing Practice RNSG 1413	RN Pharmacology
Common Concepts of Adult Health RNSG 1441	RN Fundamentals
Mental Health Nursing RNSG 2213	RN Mental Health
Concepts of Professional Nursing Practice I for Articulating Students RNSG 1517	Critical Thinking Assessment Entrance RN Fundamentals RN Mental Health
Care of Children and Families RNSG 2201	RN Nursing Care of Children
Maternal/Newborn Nursing and Women's Health RNSG 2308	RN Maternal Newborn
Concepts of Clinical Decision-Making RNSG 1347	Critical Thinking Assessment Entrance Medical-Surgical I (1MS1)
Transition to Professional Nursing RNSG 1327	RN Nursing Care of Children RN Maternal Newborn RN Mental Health
Complex Concepts of Adult Health RNSG 1343	RN Adult Medical Surgical
Professional Nursing: Leadership and Management RNSG 2221	RN Leadership Critical Thinking Assessment Exit
Professional Nursing Review and Licensure Preparation RNSG 2130	RN Comprehensive Predictor RN Community Health Nursing RN Pharmacology RN Nutrition

Revised: December, 2015 Reviewed: August 2018

EL PASO COMMUNITY COLLEGE NURSING PROGRAM TOTAL TESTING PROGRAM – VOCATIONAL NURSING 2018

Course Name	Proctored ATI Assessment
Basic Nursing Skills	Critical Thinking Assessment Entrance
VNSG 1323	
Applied Nursing Skills I	PN Fundamentals
VNSG 1402	
Applied Nursing Skills II	PN Mental Health
VNSG 2413	PN Pharmacology
Applied Nursing Skills III	PN Adult Medical-Surgical
VNSG 2214	
Pediatric Nursing	PN Nursing Care of Children
VNSG 1234	
Maternal-Neonatal Nursing	PN Maternal Newborn
VNSG 1230	Critical Thinking Assessment-Exit
Leadership and Professional Development	PN Management
VNSG 1219	PN Comprehensive Predictor

Revised: June 20, 2012 Reviewed: August, 2014 Revised: December, 2015 Reviewed: August, 2018

COURSE EXPECTATIONS

STUDENT COUNSELING/CONTRACTS

- 1. A student must consistently meet course/program expectations (i.e., attendance, professional ethics, safe practice, etc.). Any student who does not meet course/program expectations may be counseled either verbally or in writing by a nursing faculty member, nursing coordinator, or Dean.
- 2. If a student repeatedly does not meet course/program expectations a written contract will be outlined specifying the expectation, recommendations for improvement and a deadline by which the recommendations should be met.
- 3. Failure to demonstrate the behaviors specified in the contract may result in
 - a. Failure to complete Assignment/Quiz/Test could result in a zero (0) or F
 - b. Student can be dismissed from the course with a 0 or F
 - c. Student could be dismissed from the program with a 0 or F.
- 4. Students who have exited due to documented incidents of unsafe practice may not be considered for readmission regardless of the level of the course. This statement is included in the document "Student Reentry into the Nursing Program".

Reviewed: August, 1999
Reviewed: February, 2004
Revised: October, 2002
Reviewed: August, 2004
Revised: July 2005
Revised: July, 2006
Revised: Oct., 2007
Reviewed: August, 2008
Reviewed: August, 2009
Reviewed: June, 2012

Reviewed: August, 2014 Reviewed: December, 2015



EL PASO COMMUNITY COLLEGE PROCEDURE

For information, contact Institutional Effectiveness: (915) 831-2614

7.02.01.14 Physical and Technical Standards for Students in

Health Career Programs

APPROVED: April 16, 1991 **REVISED**: June 8, 2012

Year of last review: 2012

AUTHORIZING BOARD POLICY: 7.02.01

Designated contact: Vice President of Instruction

OBJECTIVE: To establish guidelines for determining physical/technical ability/eligibility for enrollment in the health career programs.

ROCEDURE:

- I. Documentation of Medical History and Physical Examination
 - A. Students entering health career programs will be required to submit evidence of a medical history and current physical examination. Initial review of these documents will be completed by the appropriate program coordinator. The program coordinator will refer any questionable documents or physical recommendations to the Dean, Health Careers, Dean of Nursing, or Director, CE Health.
 - B. Prior to entering the first clinical course, students will sign a statement relating to their ability to perform the competencies as stated in section II of this procedure. (See attached form). Students who declare any limitations on this form will be required to follow the process in section III of this procedure.
 - C. With a reported change in the physical or mental status of a student, the student may be required to obtain a recommendation for program continuation from a physician.

II. Assumptions

An applicant or a student enrolled in health career programs in El Paso County Community College District will be able to perform the following competencies:

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

Rationale:

The student must be able to observe a patient accurately at a distance and close at hand to determine patient status. Observation necessitates the functional use of the

sense of vision and somatic sensation. It is enhanced by the functional use of the sense of smell.

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

Rationale:

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

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

Rationale:

The student must be able to communicate with patients, staff, and others effectively and with sensitivity. Communication includes not only speech but also reading and writing. The applicant must be able to communicate effectively in oral and written form with all members of the health care team. EPCC does not discriminate on the basis of race, color, national origin, religion, gender, age, disability, veteran status, sexual orientation, or gender identity.

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

Rationale:

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

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

Rationale:

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

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

Rationale:

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

G. Lift and safely move up to 50 pounds while utilizing safe body mechanics.

Rationale:

- 1. Moving patients and equipment from one location to another location (to the floor, to a bed, between chairs), without the assistance of a second person, or the patients themselves, is a daily activity that occurs many times within the work day.
- 2. Movement of more than 50 pounds usually requires another person or use of assistive devices.

III. Exceptions

- A. An applicant or current enrollee with verifiable mental or physical disabilities, who may be unable to meet these program requirements, may request individual consideration for admission or retention.
- B. A petition for special consideration must be initiated by the student through either the Center for Students with Disabilities or the Dean, Health Careers, Dean of Nursing, or Director, CE Health. The petition must include:
 - 1. The program for which the student is applying or is enrolled.
 - 2. An explanation of physical or mental limitations.
 - 3. A statement of adaptations to be made by the student.
 - 4. Any adaptations requested to be made by the District.
- C. A joint recommendation will be made by the Director of the Center for Students with Disabilities and by the Dean of Health Careers, Dean of Nursing, or Director, CE Health.
- D. A written accommodation plan will be developed by the Center for Students with Disabilities as appropriate for each course in which the student is enrolled that requires accommodation. Copies of this documentation will be maintained in both the program files and the Center for Students with Disabilities files. If the student should request accommodation for licensure or certification examinations, copies

- of the accommodations plans approved during the program of study may be requested by the licensing or certifying agency.
- E. Appeals may be made in writing to the Vice President of Student Services and the Vice President of Instruction, who will jointly review the grievance.



EL PASO COMMUNITY COLLEGE STUDENT DECLARATION PHYSICAL/TECHNICAL COMPETENCIES FOR HEALTH CAREER PROGRAMS

An applicant or a student enrolled in health career programs in the El Paso County Community College District will be able to perform the following competencies:

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

Rationale:

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

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

Rationale:

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

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

Rationale:

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

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

Rationale:

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

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

Rationale:

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

Tolerate physically taxing workloads and function effectively under stress.

Rationale:

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

Lift and safely move 50 pounds while utilizing safe body mechanics

Rationale:

Moving patients and equipment from one location to another location (to the floor, to a bed, between chairs), without the assistance of a second person, or the patients themselves, is a daily activity that occurs many times within the work day. Movement of more than 50 pounds usually requires another person or use of assistive devices.

Student Declaration:
I am able to meet all of the above, stated physical/technical competencies without any special accommodations.
I am able to meet all of the above, stated physical/technical competencies without special accommodations,
EXCEPT the following: Describe limitation and accommodations needed:
Student Name (Print)
Student SignatureDate:
RETURN TO PROGRAM INSTRUCTOR/COORDINATOR.
TO BE COMPLETED BY COLLEGE STAFF Actions Recommended: Comments: No action requiredAccommodation Plan NeededOtherCoordinator's Signature
FORWARD TO DEAN/DIRECTOR FOR REVIEW.
Actions Recommended: Comments: No action requiredAccommodation Plan NeededOther
Reviewed by: Dean's/Director's Signature
FORWARD TO CENTER FOR STUDENTS WITH DISABILITIES IF NECESSARY. COPY TO STUDENT FILE.
Actions Recommended: Comments: No action requiredAccommodation Plan Completed (copy attached)Other
Reviewed by: Signature of Director of Center for Students with Disabilities

PLEASE RETURN COPY TO DEAN/DIRECTOR AND COORDINATOR LISTED ABOVE.

EL PASO COMMUNITY COLLEGE HEALTH OCCUPATION, MATH AND SCIENCE/NURSING DIVISIONS GUIDELINES FOR STUDENTS WITH DISABILITIES

Students with permanent or temporary verified disabilities are invited to register with the Center for Students with Disabilities where counseling, registration assistance, adaptive equipment and a variety of support services are available. Support services can be arranged for all campus locations. For more information, refer to the College Catalog.

If accommodations are needed to complete program competencies (see El Paso Community College Procedure 7.02.01.14 Physical and Technical Standards for Students in Health Occupations Programs), a plan will be developed to assist students to meet course/program competencies whenever possible. An individualized learning plan will be jointly developed between the student, the faculty member, and a representative from the Center for Students with Disabilities. To initiate this process, please contact any of the following individuals: a Health Occupations Counselor, the Instructional/Program Coordinator, a representative of the Center for Students with Disabilities, or the Dean for Nursing. YOU must initiate the request for accommodations! Accommodations requested and approved must allow you to meet the same course outcomes as students with no accommodations.

Accommodations for Licensing, Certification, or Registry Examinations:

Most agencies which license, certify, or register health care professionals also have established guidelines for the examinations for graduates of health occupations programs. These guidelines usually describe testing modifications during the licensing examination for candidates with disabilities. A candidate must be accommodated in the Nursing Program to be allowed accommodation to take the licensure exam. The following outlines a typical guideline:

1. Candidate must submit a request for testing modification directly to the appropriate licensing, certification, or registry agency. Examples of supporting documentation would include:

Letter from candidate

Letter from medical professional documenting disability and requested modification Letter from program coordinator identifying modifications granted by the program

- 2. The agency will review the request and supporting documentation for completeness, fairness, security, and impact. Information will also be provided to the testing service.
- 3. An approval letter will be mailed to the candidate from the agency and will include:

The accommodations approved.

The test center that was notified of the request for the accommodations. Information for the candidate if changes are needed in the test center location.

4. Cost of accommodations will be the responsibility of the testing service.

5. If assistive personnel (e.g. readers, recorders, signers) are needed at the testing site, an approved list of readers will have previously been identified by the agency. The testing service will identify the reader.

For more information contact the specific agency which will issue your license, certification, or registry.

<u>Equal Educational Opportunity.</u> No Student or Prospective Student of the College Shall Be Discriminated Against Because of Race, Color, Religion, Gender, National Origin, Age, or Handicap. Students Who Feel Aggrieved on the Basis of Race, Gender, Color, National Origin, Disability, Creed, or Age May File a Written Grievance. See college catalog for specific procedures.

Revised: April, 2005
Reviewed: October, 2005
Reviewed: June, 2006
Reviewed: October, 2006
Reviewed: June, 2007
Reviewed: October, 2007
Revised: August, 2008
Reviewed: August, 2009
Revised: June, 2012
Reviewed: August, 2014
Reviewed: December, 2015
Reviewed: August 2018



EL PASO COMMUNITY COLLEGE PROCEDURE

For information, contact Institutional Effectiveness: (915) 831-6740

7.02.01.26 **Student Re-entry into the Nursing Program**

APPROVED: March 11, 2005

REVISED: October 20, 2017

Year of last review: 2017

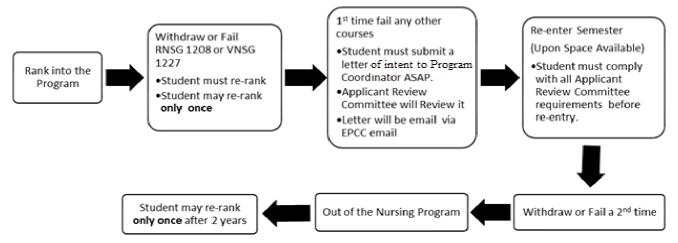
AUTHORIZING BOARD POLICY: 7.02.01

Designated Contact: Dean of Nursing

OBJECTIVE: To provide a system for re-entry into a Nursing program of a student whose program of study has been

interrupted.

PROCEDURE:



I. **General Provisions**

Definitions A.

- 1. Re-entry -- the process by which a student who has failed a Nursing course can continue in the Nursing program.
- 2. Re-entry student -- a student requesting to continue in the Nursing program who was previously accepted and either failed a course or withdrew from a course.
- 3. Generic (traditional) student -- A student who starts one of the programs in the beginning semester.
- 4. Non-generic (non-traditional) student -- A student who does not start the program in the first semester. (advanced placement/transfer student)

В. Re-entry Policy Statements that Apply to all Re-entry Students

All six of the following statements apply to all re-entry students. (Entry/Re-entry is on a space available basis.)

- 1. Students may be allowed re-entry into the Nursing program for a total of one time.
- 2. There are specific procedures to be followed when a course failure or withdrawal occurs.

See "Entry/Reentry" under section II. "Process" that follows below for specific information.

3. Temporary leave of absence

A temporary leave of absence for one (1) semester from a nursing program is an option to a student in good standing, i.e. passing theory and clinical, with proper documentation. These students are eligible to request a temporary leave of absence for the following reasons: birth of a child, the student's own health condition or stressful event, or to provide care to a family member (spouse, child or parent) with a serious health condition. Guidelines:

- a. Re-entry into the Nursing program is dependent on space availability.
- b. A temporary leave of absence may be granted only once.
- c. Requests must be submitted in writing with supporting documentation and will be reviewed by the Nursing Applicant Review Committee.
- d. Extenuating circumstances will be considered on an individual basis.

4. Unsafe practice

Students who fail a course due to unsafe practice will be evaluated for re-entry by the Nursing Applicant Review Committee with final recommendations forwarded to the Dean of Nursing.

- 5. Requests for re-entry must be in writing.
 - a. The letter should be submitted to the Nursing Applicant Review Committee.
 - b. The letter must include a date and signature, the preferred date of re-entry, the course requested, student's identification number, current phone number(s) and email address.
 - Documentation must be provided showing the student has completed re-entry requirements from the Nursing Applicant Review Committee.
- 6. Re-entry is based on space availability in the requested course

II. Process

To provide a system for entry or re-entry into a Nursing Program for generic and non-generic students who are defined as advanced placement, foreign, transfer, or transferring program students. The process will apply to re-entry of all generic students that enter the program via College Procedure 7.02.01.10, *Specialized Admission Requirements for Programs in Health Careers and Nursing*. All students seeking entry/re-entry into a Nursing program, must follow this procedure, 7.02.01.26. This procedure includes entry/re-entry of non-generic students. Students must comply with College Procedure 7.04.03.14, *Scholastic Standards and Academic Progress*.

A. Definitions

- 1. Types of students eligible to seek placement into the Nursing program:
 - a. Generic students seeking re-entry
 - b. Students requesting advanced placement/transfer
 - c. Foreign graduates who need course work prior to NCLEX testing

- Licensed nurses who have disciplinary action or requirements from the Texas Board of Nursing
- e. Nursing Graduates needing reeducation (BON Rule 217)

2. Withdrawal from the Nursing Program

- a. A student will be required to withdraw or will be administratively withdrawn from the Nursing program if the student does not maintain a cumulative **GPA of 2.0.**
- b. Theory and clinical courses are concurrent.
 - (1) If a student drops or is a withdrawal/failing student from a theory course, then the student must also withdraw from the clinical course.
 - (2) If a student is failing or is a withdrawal/failing from a clinical course, that student must also withdraw from the theory course.
 - (3) If a student passes clinical and fails the theory course, the theory course must be repeated by itself.
 - (4) A student who repeats a clinical course and has passed the theory course must audit the theory course in the same semester in which his/her clinical course is repeated.
 - (5) When the theory and clinical courses are dropped, only the course that was a failure or withdrawal failing will count against the student. Both courses will not count as failures unless both courses are failed or withdrawn failing.
- Students may be withdrawn permanently from the Nursing program with no readmission/reentry allowed for:
 - (1) Documented incidents of unsafe practice as defined in the Nursing Student Handbook
 - (2) Academic dishonesty (See College *Catalog*, Student Responsibilities and Code of Conduct)
 - (3) Administrative Reasons
- d. A student withdrawal from the Nursing Program due to an approved temporary leave of absence (refer to Section I.B.3, of this procedure, 7.02.01.26 *Student Re-entry into the Nursing Program.*)
- 3. A cumulative Grade Point Average is the calculation of the average of all the student's grades for all semesters and courses completed up to a given academic term, for courses taken at El Paso Community College.
- 4. An Adjusted Grade Point Average is the combination of the grade point average from other schools plus the grade point average from El Paso Community College.

B. Re-entry to the Nursing Program following withdrawal

 Re-entry pertains to students re-entering the Associate Degree Nursing (A.D.N.) OR Vocational Nursing (VN) program after successful completion of at least one core nursing course (excluding RNSG 1301 Pharmacology or RNSG 1115 Health Assessment).

- 2. Students who fail a course due to unsafe practice will be evaluated for re-entry by the Nursing Applicant Review Committee with final recommendations forwarded to the Dean of Nursing.
- 3. A student who has been out of the Nursing program for two (2) years or more will be required to reapply as a beginning student, which will require that the student be ranked and accepted and adhere to the specialized admission criteria (see College Procedure 7.02.01.10, *Specialized Admission Requirements for Programs in Health Careers and Nursing*). No credit will be awarded for previous Nursing courses completed.

C. Entry/Re-entry based on course failures or withdrawal

- 1. All generic students seeking re-entry into the A.D.N. Program or the VN Program will do so under the requirements in Section II, "Process" of this College Procedure (7.02.01.26).
- 2. All other qualified students seeking entry into the Nursing program will do so through the appropriate procedure(s). Advanced placement/transfer students transferring Nursing courses and requesting credit for courses
 - a. Nursing courses cannot be older than 2 (two) years old.
 - b. Lab Science and Pharmacology courses cannot be more than 10 (ten) years old.
 - c. All specialized admission requirements must be completed.
- 3. Students can be re-entered into a Nursing program for a total of one time under the following guidelines:
 - a. First failure and/or withdrawal of a theory or clinical course:
 - (1) Students may be granted re-entry based on space availability with or without remediation and/or re-entry requirements.
 - (2) Requests for re-entry must be in writing and submitted to the Nursing Applicant Review Committee.
 - (3) Ranking for re-entry into a specific course(s) is based on space availability. Students seeking entry/re-entry will be ranked based on categories and cumulative GPA.
 - b. First semester student with a course failure and/or withdrawal:
 - (1) Students who fail and/or withdraw from these first semester courses:

 Students in either the Associate Degree Nursing or Vocational Nursing Program courses, RNSG 1208 or VNSG 1227, will re-rank into a Nursing Program. The failure will not count when the student gets back into the program. A student can only re-rank for a Nursing Program one (1) time after the two (2) years waiting period has passed.
 - (2) Students who fail and/or withdraw from these first semester courses in theory and clinical: Students in either the Associate Degree Nursing or Vocational Nursing Program courses RNSG 1260, RNSG 1413, VNSG 1323, VNSG 1160, VNSG 1402, or VNSG 1260 must apply to the Nursing Applicant Review Committee for reentry through College Procedure 7.02.01.10, Specialized Admission Requirements for Programs in

Health Careers and Nursing

c. Second theory or clinical course failure and/or withdrawal:

At the time of the second (2^{nd}) failure and/or withdrawal of any Nursing course, the student will not be granted readmission for a period of two (2) years at which time the student must re-rank.

A student can only re-rank and be accepted one time for a Nursing Program. A student cannot qualify for ranking until the two (2) year time period is fully completed. A student can only rerank for a Nursing Program one (1) time after the two (2) year waiting period has passed.

- d. A.D.N. Students are REQUIRED to complete the program within four (4) calendar years. VN students are REQUIRED to complete the program within 3 calendar years.
- e. A.D.N. students that request transfer to the VN program after a course failure will take their course failure history with them; this includes the VN spin-off in summer. Prior to transfer, recommendations/requirements from the Nursing Applicant Review Committee (if any) must be completed. Transfer is on a space available basis. A student must submit a letter to the Nursing Applicant Review Committee requesting the transfer. Current VN students have priority for reentry into the VN program over students transferring from the A.D.N. program.

D. Student Application Process and Criteria to apply for entry/re-entry

1. Students seeking re-entry into a Nursing program after exiting a Nursing course for any reason must complete a *Student Exit Data Form* with the course coordinator, instructor or Program Coordinator. The form will be submitted to the Chair of the Nursing Applicant Review Committee and/or the Program Coordinator who will forward a copy of the form to the Dean of Nursing. The student will receive a copy of the form at the time it is completed.

If a student is not present to sign the *Student Exit Data Form* at the time it is completed the form will be completed by the course instructor with the original forwarded to the Program Coordinator or Chair of the Nursing Applicant Review Committee. A copy of the Student Data Exit Form will be retained with the course coordinator, and/or student file.

- 2. Non-generic students seeking entry into the Nursing program must do so through the Nursing Counselor, who, in turn, works with the Nursing Applicant Review Committee and/or Program Coordinator for their placement into a Nursing program in the 2nd, 3rd, or 4th semester, based on space availability.
- 3. Students must submit a letter requesting re-entry into the specific program, to the program coordinator or the Chair of the Nursing Applicant Review Committee after the minimester/semester in which the student has exited the program. It is the students' responsibility to meet degree plan requirements.
- 4. Students must adhere to the Nursing degree plan as specified in the EPCC *College Catalog* for the semester/year that entry/re-entry is sought. If the degree plan is different from the original one under which the student was admitted or if it comes from another institution, it is the student's responsibility to meet the new requirements, and meet with the Nursing Counselor.
- 5. Once the Nursing Applicant Review Committee receives the following materials, a meeting will be scheduled to evaluate all files of the students requesting entry/re-entry. The committee meets two to three times per year or as needed. The files will include:
 - a. Student Exit Data Form or Advanced Placement Form
 - b. Letter requesting re-entry and/or non-generic student requests for placement into a Nursing program.
 - c. Course history obtained from Counseling

- d. Transcripts, as appropriate
- 6. After deliberation, re-entry students will be notified by mail as appropriate, College email, or telephonically of any requirements/recommendations made by the Committee that need to be completed prior to re-entry. The student will provide the Nursing Applicant Review Committee with documentation on completed requirements and of the desire to re-enter the Nursing program.
- 7. After ascertaining that the applicants are qualified, by satisfactorily completing the requirements, the Committee will place students within each category by their current cumulative GPA. If more than one candidate has the same cumulative GPA, the date on which their paperwork/coursework was completed will be used to determine placement. An adjusted GPA will be used for advanced placement students as appropriate. Students re-entering the program will be notified by mail, if needed, College email, or telephonically when a space is available. A non-generic student's entry will be considered upon completion of prerequisites and space availability.
- **8.** It is student's responsibility to keep all contact information current at the admissions/registrar's office and with the Nursing Clinical Compliance Coordinator, Lab/Supervisor, or designee.

E. Placement into the Nursing Program

1. Entry/Re-entry

 A non-generic student's entry will be based on the completion of the prerequisites for the program/course, adjusted GPA, and on whether the student is in good standing with the College.

Non-generic students:

- (1) Nursing courses cannot be older than 2 (two) years old to transfer into a Nursing Program at EPCC.
- (2) Lab Science and Pharmacology courses cannot be more than ten (10) years old.
- (3) All specialized admission requirements must be completed.
- b. Re-entry priority will be based on the student's reasons for leaving the program/course, cumulative GPA, and the conditions specified for re-entry.
- c. The following priority guidelines are used to determine an applicant's placement for available openings within specific courses:

(1) CATEGORY I

A student withdrawal from the Nursing program due to an approved temporary leave of absence. (Refer to Section I.B.3, of this College procedure, 7.02.01.26 *Student Reentry into the Nursing Program*.)

(2) CATEGORY II

a) Advanced Placement/transfer applicants passing with a minimum grade of "C" in all nursing courses when leaving his/her former program. An adjusted GPA will be used for advanced placement/transfer students. In addition, advanced placement/transfer students must submit a letter(s) of good standing from the Nursing Program with original signature on institutional letterhead from the former program.

- b) Generic student that left the program for an extended period of time, but fewer than two (2) years, with no previous course failures. A student must have completed any recommendations/requirements prior to re-entry. The students must meet all admission criteria and academic requirements.
- c) Graduates of a foreign nursing program.
- d) Foreign graduate nurses requiring courses specified by the Texas Board of Nursing (BON) including reeducation.
- e) Registered Nurses or Vocational Nurses who have received Board Orders for disciplinary action from the Texas BON.
- f) Students requesting reeducation per BON.

(3) CATEGORY III

- a) Generic course failures or withdrawal
- b) Student who has entered the Nursing program from category I or II and then failed or withdrew a Nursing course.

(4) CATEGORY IV

Advanced Placement/transfer applicants who have failed any Nursing course that they were enrolled in before leaving his/her former program (transfer failing student). Advanced placement/transfer students must submit a letter of good standing from the Nursing Program with original signatures on institutional letterhead from the former program. Entry to the program is based on space and faculty availability. Advanced placement/transfer students transferring nursing courses and requesting credit for them, must adhere to the following:

- a) Nursing credits cannot be over two (2) years old.
- b) Lab Sciences and Pharmacology courses cannot be more than ten (10) years
- All specialized admission requirements must be completed.
 The Nursing Applicant Review Committee will review all files of applicants requesting re-entry into a Nursing Program.

F. Appeals Process

- 1. The student may appeal any requirements/recommendations of the Nursing Applicant Review Committee or any denials or delays in re-entry to the Nursing Applicant Review Committee.
 - a. Appeals regarding the terms of the requirements given by the Nursing Applicant Review Committee for re-entry or advanced placement/transfer student must be made in writing to the Nursing Applicant Review Committee within 30 days of the receipt of the letter or College email with the requirements for entry/re-entry.
 - b. Appeals regarding the denial or delay of re-entry must be made in writing to the Nursing Applicant Review Committee within 30 days of the notification.
- 2. If the student feels there is not a satisfactory resolution by the Nursing Applicant Review Committee, the student may appeal to the Dean of Nursing.

- a. If a satisfactory conclusion is not reached, the student can appeal to the Dean of Nursing within 15 days of the receipt of notification.
- b. The Dean of Nursing or designee will discuss the appeal with the Nursing Applicant Review Committee. The Dean will either affirm or reverse the recommendation of the Nursing Applicant Review Committee. The student will be notified of the decision by the Dean by mail, College email, or appointment.
- c. Appeals regarding the Dean's decision must be made in writing to the Vice President of Instruction and Workforce Education, within 14 days of receipt of the Dean's decision. The Vice President of Instruction and Workforce Education, upon review of all documentation, will either affirm or reverse the decision of the Dean. The decision of the Vice President of Instruction and Workforce Education will be final.

LABORATORY SAFETY GUIDELINES

NURSING PROGRAM

<u>Title of Procedure:</u>

NURSING LABORATORY GUIDELINES

Mission of the Nursing Lab:

The mission of the Nursing Lab is to provide the nursing students and faculty with a variety of support services which facilitate an optimal learning and teaching environment, thereby assisting them in meeting the health care needs of our community.

Purpose of the Nursing Lab is to provide:

- 1. Selected instructional materials/equipment for the classroom and for independent study.
- 2. An area where students can receive assistance in the practice and demonstration of psychomotor skills.
- 3. Computerized tutorial services. (Health Computer Lab, H217)
- 4. Individualized or group supervised skill instruction when necessary.

Procedures and Services Provided in the Health Computer Lab (H217):

- 1. The hours of operation of the lab may vary depending upon the needs of students and faculty and personnel working in the area. Hours of operation are posted outside the lab.
- 2. Any lab to be scheduled should be done with the personnel working in the lab.
- 3. Assistance is provided by the Laboratory personnel or faculty or designee.
- 4. Students need to sign in each time they use the laboratory.

Revised: August, 1999 Reviewed: July, 2000 Reviewed: February, 2004

Revised July 2005
Revised: July, 2006
Reviewed: Nov., 2007
Reviewed: August, 2008
Reviewed: August, 2009
Reviewed: June, 2012
Reviewed: August, 2014
Reviewed: December, 2015
Reviewed: August 2018

EL PASO COMMUNITY COLLEGE LABORATORY SAFETY GUIDELINES

In an effort to maintain the health and welfare of all persons entering the nursing labs, all nursing faculty, laboratory personnel and students will be expected to adhere to the established guidelines.

When exposure to blood or other body fluids exists, the Needle, Blood and Body Substance Precautions procedure must be followed. This procedure is posted in each nursing lab and can also be found in the Nursing Student Handbook.

- A. Broken glass must be placed in the SHARPS container. If the pieces are too large for the SHARPS container Housekeeping should be notified for disposal. Broken glass should never be disposed of in the regular trash containers.
- B. All non-hazardous spills should be wiped up immediately.
- C. Before wiping up any type of chemical spill, this includes mercury, you should:
 - 1. Review the Material Safety Data Sheet (MSDS) on the chemical involved. (The MSDS's on all chemicals used in the nursing labs are located in the red Safety Notebooks located by the fire extinguishers in each lab.)
 - 2. Determine both the physical and health hazards of the chemical and take appropriate precautions to avoid exposure.
 - 3. If exposure occurs, first aid must be administered as specified on the MSDS and the EPCC Police Department must be contacted. In addition, The Dean of Nursing and the Nursing Coordinator must be notified. An incident report must be completed by the EPCC Police Department and recorded.
 - 4. Adhere to the precautions listed for the clean up of the chemical. For mercury spills, follow the Emergency Action Procedure for Mercury Spills that is posted in all labs and contact the Police Department for clean- up.
 - 5. Contact the Nursing Lab Assistant and/or the EPCC Police Department if there are any questions or concerns.
 - 6. All hazardous chemical spills must be reported to the Nursing Office, the EPCC Police Department, the Nursing Coordinator and the Nursing Lab Assistant.
- D. When needles, lancets and IV cannulas are being used in the nursing labs, the Needle, Blood and Body Substance Precautions procedure must be followed. This procedure is posted in each nursing lab and can also be found in the Nursing Student Handbook.
- E. Students will not be allowed to use the labs without a staff or faculty person present.

- F. Children will not be allowed in the nursing labs unless they are participating in an approved activity.
- G. When a piece of equipment or furniture is found not to be safe, the Nursing Lab Assistant must be notified immediately.
- H. The Nursing Lab Assistant will be responsible for the following activities at both the Rio Grande and Mission del Paso Campuses:
 - 1. Inspecting the nursing lab equipment and furniture for functional safety at least annually. Inspection will be documented on an Equipment Safety Inventory.
 - 2. Labeling unsafe equipment and furniture and requesting that safety repairs be completed before it is again used.
 - 3. Validating, semi-annually, that the fire extinguishers in each lab have been checked by the EPCC Safety Department and/or the El Paso Fire Department.
 - 4. Maintaining First Aid Kits in the nursing labs.
 - 5. Assessing semi-annually that the eye wash stations function properly.
 - 6. Notifying the Nursing Coordinator of injuries that occur in the nursing labs.
 - 7. Keeping needles, syringes and IV cannulas in locked storage cabinets when not being used by students who are being directly supervised by an instructor.
 - 8. Contracting with a hazardous materials disposal company for the disposal of the SHARPS containers and other contaminated materials placed in the Bio-Hazard containers.
 - 9. Obtaining/maintaining the MSDS on all chemicals in the nursing labs.
 - 10. Validating that all containers are accurately labeled.

Reviewed: August, 2004 Revised July 2005 Revised: July, 2006 Revised: Nov., 2007 Reviewed: August, 2008 Reviewed: August, 2009 Revised: June, 2012 Reviewed: August, 2014 Reviewed: December, 2015

Reviewed: August 2018

TITLE OF PROCEDURE

NEEDLE, BLOOD AND BODY SUBSTANCE PRECAUTIONS

RATIONALE

The procedure reflects concerns regarding exposure to communicable diseases, including AIDS. This nursing discipline procedure is developed to address needle, blood and body substances precautions to be followed by students and faculty in both health care facilities and the EPCC nursing laboratory.

OBJECTIVE OF PROCEDURE

- A. Protection of students, faculty, laboratory assistants and workstudy students from preventable exposure to infectious diseases in the EPCC nursing laboratory.
- B. Protection of students, faculty, other health care personnel and clients from preventable exposure to infectious diseases in a health care facility.

PROCEDURE STATEMENTS

- C. Students, faculty, laboratory assistants and workstudy students will be required to follow the guidelines established in this procedure while in the nursing laboratory setting.
- D. When the infection control policies of a health care facility are at least as stringent as the guidelines established by this procedure, the institutional policies will take precedence over this procedure; otherwise, students and faculty will follow these guidelines while in a health care facility.

E. Specific Guidelines:

- 1. All people, whether a fellow student or faculty member in the lab or a client in a health care facility, will be treated as though they could transmit an infectious disease.
- 2. Protective apparel such as gloves, mask, gown and eye goggles will be worn when the potential for exposure to blood or other body substances is present.
- 3. Needles, lancets, IV cannulas and all other instruments used to penetrate soft tissue must never be reused. This guideline applies to practice sessions in the nursing lab.
- 4. Needles must not be recapped after contamination.

- 5. Needles, lancets, IV cannulas and all other instruments used to penetrate soft tissue must be discarded immediately after use, in a puncture-resistant container (SHARPS).
- 6. Puncture-resistant containers must be replaced before becoming full or as indicated by the container.
- 7. Injection vials that become contaminated must be discarded. If the vial is a Practi-Vial from the EPCC nursing lab, it may be discarded in the plastic trash containers in the lab. Broken vials must be discarded in the SHARPS containers. If a vial becomes contaminated while in the clinical setting, the facility's policy for disposal of the vial must be followed.
- 8. Any material contaminated with blood or body substances must be placed in a plastic bag and then placed in a Bio-Hazard container.
- 9. Surfaces contaminated with blood or body substances must be cleaned with a solution of Lysol IC Phenolic Disinfectant Cleaner or an equivalent cleaning solution.
- 10. In the event a person is pricked with a needle, the needle must be discarded immediately in a puncture-resistant container, the nursing instructor must be notified and an incident report must be completed. If the incident occurs in the nursing lab, an EPCC police officer must be contacted to complete the report. In addition, the Nursing Coordinator must be contacted so that the incident can be documented. If the incident occurs while in a health care facility, the facility procedure for completion of the incident report will be followed.
- 11. After removing contaminated gloves, hands must be washed with an antibacterial soap.
- 12. Students and faculty in high risk groups should not be allowed to care for clients with AIDS. Such groups include those who are pregnant, have a depressed immune system or who have an active infection.

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Reviewed February, 2004
Reviewed: August, 2004
Reviewed: July, 2005
Revised: July, 2006
Revised: Nov., 2007
Reviewed: August, 2008
Reviewed: August, 2009
Reviewed: June 2012
Reviewed: August, 2014
Reviewed: December, 2015
Reviewed: August 2018

COMPUTER USE POLICY

REQUIREMENTS:

Priority use by EPCC Nursing Students, Faculty and Staff

ALL USERS MUST PRESENT A CURRENT PHOTO I.D.

USER MINIMUM AGE: 17 (except for high school vocational nursing students)

TYPE OF I.D. DETERMINES USER PRIORITY AND PRIVILEGES.

If a user with higher priority is waiting to use a computer, we may ask you to give up your computer station.

GUIDELINES:

Users must be familiar with the application they are running.

In order to save your documents, please save to a flash drive provided by the user. All flash drives MUST be virus-checked EVERY TIME you use computers. THE PROGRAM CANNOT GUARANTEE A VIRUS-FREE ENVIRONMENT and WILL NOT be responsible for loss of documents.

If the computer area becomes too busy we reserve the right to limit your computer use time.

NO RECREATIONAL CHAT LINES or GAME PLAYING.

There will be no printing of; course packets, nursing student handbook, or other documents greater than 30 pages.

All work and printing must be completed 30 minutes before closing.

Revised: July, 2000 Revised: July 2005 Reviewed: August, 2008 Reviewed: August, 2014 Reviewed: February, 2004 Revised: July, 2006 Reviewed: August, 2009 Revised: July, 2006 Revised: July, 2007 Revised: June, 2012 Reviewed: August, 2018

PROCEDURES FOR RESPONSIBLE COMPUTING AT EL PASO COMMUNITY COLLEGE

In support of its mission of teaching, research, and public service, El Paso Community College provides access to computing and information resources for students, faculty, staff and community users, within institutional priorities and financial capabilities.

All who use the College's computing and information resources must act responsibly. Every user is responsible for the integrity of these resources. All users of College-owned or College-leased computing systems must respect the rights of other computing users, respect the integrity of the physical facilities and controls, and respect all pertinent license and contractual agreements. It is the policy of El Paso Community College that all members of its community act in accordance with these responsibilities, relevant laws and contractual obligations, and the highest standard of ethics.

Misuse of Computing and Information Resource Privileges

Examples may include but not be limited to:

- Accessing computers, computer software, computer data or information, or networks without proper authorization, regardless of whether the computer, software, data, information, or network in question is owned by the College. (That is, if you abuse the networks to which the College belongs or the computers at other sites connected to those networks, the College will treat this matter as an abuse of your El Paso County Community College computing privileges.)
- Using computing facilities, computer accounts, or computer data for purposes other than those for which they were intended or authorized.
- encroaching on others'--use of the College's computers (e.g., disrupting others' computer use by game playing; by sending excessive messages, either locally or off-campus [including, but not limited to electronic chain letters]; printing excessive copies of documents, files, data, or programs; modifying system facilities, operating systems, or disk partitions; attempting to crash or tie up a College computer; damaging or vandalizing College computing facilities, equipment, software, or computer files).
- Printing Nursing Student Handbook, Course packets or any large document > 30 pages.

Violations of these procedures may result in administrative and/or criminal actions. Such Administrative action may include, but not be limited to:

- inspect any files or programs in question.
- suspend or restrict the computing privileges of the violator.

It should be understood that nothing in these guidelines precludes enforcement under the laws and regulations of the State of Texas, any municipality or county therein, and/or the United States of America. THANK YOU FOR YOUR COOPERATION.

Reviewed: February, 2004 Reviewed: August, 2004 Revised: July, 2005 Revised, July, 2006 Revised: Nov., 2007 Reviewed: August, 2008 Reviewed: August, 2009 Reviewed: June, 2012

Note: See EPCC College Procedure for Computer Use. (2.05.01-2.05.01.66; 2.05.02-2.05.03.18)

Reviewed: August, 2014 Reviewed: December, 2015 Reviewed: August 2018

NURSING INFORMATION FOR CLASS/CLINICAL

NURSING PROCEDURE

Title of Procedure:

CLINICAL ASSIGNMENT

Unless otherwise stated in the Course Syllabus, students must adhere to the following guidelines for successful completion of the clinical components.

- A. The student is required to select the clients the day before the clinical experience and prepare a plan of care unless otherwise instructed by the clinical instructor.
- B. Each student must be prepared with daily care plan and/or paperwork the first thing in the morning of each clinical day or as directed by instructor.
- C. Students who are unprepared for the clinical day (no daily care plan, inappropriate dress, etc.) may be sent home for the day at the clinical instructor's discretion. An unexcused absence will be recorded for that day and a student counseling form completed. There will be a 10 point loss from the clinical rotation evaluation for an unexcused absence. (See Clinical Absence Policy). Each day the student has not passed the math exam to pass meds in clinical, there will be a 10 point deduction for each clinical day medications are not passed.
- D. Students should follow the guidelines listed below for visits to the clinical area for the client section:
 - 1. Lab coat with EPCC patch and appropriate attire are required i.e., uniform, or khaki pants & black polo. Wear EPCC student ID with picture, student nurse name tag (teal) and Hospital Specific name tag (if appropriate). (See Dress Code).
 - 2. When arriving on the unit, identify yourself to nurse manager or charge nurse and state your business.
 - 3. Use common courtesy when requesting and using charts and computer printouts. **DO NOT** remove them from the unit.
 - 4. Review the charts/computer printouts for data to select a client. The nurse manager or charge nurse may be able to help you with this selection. Some hints include:
 - a. Select a diagnosis that meets clinical criteria for the course.
 - b. Assess the nursing care required by the client.
 - c. Select a client with skills that you have completed or skills that you will be learning this semester. Remember that the only way to learn is with a challenge. Please select a client that provides a good learning experience for you.
 - d. Verify your selection with a nurse that is familiar with the client.

- e. Write your client selection on the clinical assignment form as directed by your clinical instructor.
- f. Obtain permission from the client or family for care
- g. **DO NOT**_record patient name on any student data forms. Only patient initials may be used.
- h. DO NOT remove any hospital computer printouts from the premises.
- E. Client selection is subject to review and change by the clinical faculty and /or the charge nurse.
- F. Students may not go to the clinical site to select clients after 11:00 p.m. or before 5:00 a.m. or at the change of shift.
- G. Clinical Absence See specific policy in the Nursing Student Handbook.
- H. Tardy to Clinical See course syllabus for specific tardy policies.
- I. Students must have completed, by check-off, basic skills for client care and medication administration as stated in the course syllabus and packet prior to going to clinical. If not successfully completed they will not be allowed to go to clinical. Courses specifically affected are Foundations, Common Concepts and Complex Concepts in ADN program, and Basic Skills, and Applied Skills I, II and III in the VN program.

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Clinical Rotations

Students may be required to do clinical rotations on weekends, evenings or nights upon occasion which is off cycle from the regular clinical schedule of Monday and Tuesday. The off cycle clinical rotations may be necessary to optimize student learning and facilitate faculty and clinical site availability.

Clinical days are usually Monday and Tuesday, but could be any other days of the week depending on the health care facility. Clinical can be days, evenings, nights or weekends. Clinicals are at times extended into the winter break or into the summer break depending on the number of students, and Clinical Affiliations available for use during the semester.

The RNSG 2261 Preceptor slip will be done during the semester and may require extended clinicals into the winter or summer break, again depending on student numbers, preceptor numbers and clinical facilities available.

Transportation

Students are responsible for transportation to and from the college and health care agencies used for clinical experiences to include clinics, community agencies and schools. It is important that each student make his/her own transportation arrangements as car pool assignments are not guaranteed.

Military

Students Called to Active Military Service

In the event that students enrolled at El Paso Community College Nursing Program are called to active military service, the administration and faculty will consider each student's academic status individually.

The student's academic standing will be evaluated based on the period of time into the course(s) in which he/she is enrolled and the progress or achievement made toward meeting and maintaining the course objectives.

A copy of the orders must be presented to the Dean of the Nursing Program or Nursing Coordinator prior to any action.

Student Nurse Supply Kits

<u>Student Nurse Supply Kits are required for specific courses</u>. They must be purchased from the approved vendor at the student's expense. They are part of the course/textbook/equipment requirements of the nursing programs. Students must purchase the supply kits or will not be allowed to practice or check off skills without their kit.

ATI- Assessment Technologies Institute, Standardized Testing LLC Standardized Testing

There is a fee for the ATI Standardized Testing. It will be assessed to each student, one (1) time each semester for each student in the Associate Degree Nursing (ADN) and Vocational Nursing (VN) Program. If the student drops a semester course, the fee is non-refundable.

Reviewed: February, 2004 Reviewed: August, 2008 Revised: August, 2018

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Reviewed: July 2005
Revised: July, 2006
Reviewed: Nov., 2007
Reviewed: August, 2009
Reviewed: June, 2012
Reviewed: August, 2014
Reviewed: December, 2015

COMMUNITY-WIDE ORIENTATION

In accordance with the standards outlined by the Joint Commission (JC), all hospital personnel must be oriented to their role in the hospital's infection control program, safety management program, and other topics designated by the Nursing Department. Therefore, all nursing students are required to complete a nursing orientation during a twelve (12) months period.

The Community Wide Orientation is computerized and must be completed prior to registration and attending clinical rotations. A certificate of completion will be provided at the end of the computer course. This certificate must be turned in to the designated person at the Rio Grande campuses. Instructions will be provided by nursing coordinators or nursing lab personnel.

Failure to complete the above computer course will result in the student not being allowed to register for the program. All students must provide documented proof of completion to the lab supervisor assistant or designee as requested in room H 221, at RG or as directed.

AFFILIATE COMPUTER ORIENTATIONS

Students assigned to various clinical affiliates may be required to participate in special computer system orientations. These classes may be scheduled on campus or at the clinical affiliate. Classes may be scheduled during class time, clinical time, or at other times as facilities are available.

AFFILIATE COMPUTER CODES

Students may be assigned special computer codes for use at clinical learning experiences. Students MUST NEVER use these codes when not at clinical in a student role or provide the code to others for their own use. Students who are also employed by the affiliate should not use their employee code when in the agency as a student.

HIPAA CONFIDENTIALITY

In accordance with the standards outlined for Electronic medical records and confidentiality, the Health Information Portability and Accountability Act (HIPAA) Orientation must be completed on line prior to registration. This enables students to work in health care areas. Some health care facilities will have additional HIPAA requirements.

HOSPITAL ORIENTATIONS

Special orientations may be required at some clinical facilities. Additional paper-work may also be required.

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Revised: June, 2012
Revised: Nov., 2007
Revised: August, 2008
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Revised: August, 2009
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CRIMINAL BACKGROUND CHECK

1st Background Check & Drug Screen

State Regulations mandate that criminal background checks and drug screens be conducted on all persons who work in or, in this case, rotate through day care centers, public schools, nursing homes, mental health facilities, and/or other health care settings. Joint Commission (JC) also mandates that dated background checks and drug screens be provided to participating health care agencies. Once a student has been accepted into the nursing program the prospective student must be aware that they will have to complete a background check and drug screen thru American Data Bank. The approved agencies will be provided to the student.

Other than direct implications on completing specific course objectives, the results of the criminal background check and drug screen could affect student entry and progress in the Nursing Program. Students with prior convictions or positive drug screens may be prevented from registering for classes and from going to clinical and by other regulations, from participating in course and/or clinical objectives. This may affect course grades if there are no alternatives for meeting those course or clinical objectives.

Completing a Nursing Program of study does not guarantee that the student will be able to sit for an NCLEX licensing exam, become a Registered Nurse or a Licensed Vocational Nurse. A positive background check or drug screen may prevent a student from entering a nursing program as the student will not be able to attend clinical at any health care facility or clinical affiliate. .

2nd Background Check

Upon admission to the program students will have to get finger prints taken and submitted to The Texas Board of Nursing (BON) or to the State where the licensing exam is to be taken. The Texas Board of Nursing will submit the fingerprints to the FBI for a criminal background check. If the background check is negative, the BON will send a blue card to the student. A copy must be turned in to the lab Supervisor to put in the student's file. The student will be notified of a positive criminal background check, and will be given information on how to proceed by the Texas BON. Copies of all court documents and communication with the BON must be turned in to the program coordinator to be kept in the student's file after review.

All students are encouraged to complete the Declaratory Order if a criminal history and/or a positive drug screen exists. This should be done prior to completing a program of study to ensure the ability to take the state licensing exam. Failure to complete a Declaratory Order may prevent the student from taking a licensure exam. The Declaratory Order information is included in the Nursing Student Handbook, and may be in a timely fashion or at all obtained from the Texas Board of Nursing website http://www.bne.state.tx.us/ applications and forms.

Revised: July 2005 Revised: August, 2008 Revised: August, 2014 Revised: July, 2006 Revised: August, 2009 Revised: December, 2015 Revised: Nov., 2007 Revised: June, 2012 Revised: August 2018

EL PASO COMMUNITY COLLEGE STUDENT INFORMATION FOR BACKGROUND CHECK AND SUBSTANCE ABUSE TESTING

In order to ensure that health care facilities are in compliance with their accreditation guidelines, all students enrolled in specified health-related educational courses and programs are required to undergo a background clearance and substance abuse screening. Students who fail to obtain clearance will be prohibited from admission or enrollment in specified programs/courses for a period of one-year.

NOTE: <u>Substance Abuse Screening should be completed no more than 3 months (90 days)</u> <u>prior to beginning clinical.</u>

NOTE: <u>Students who withdraw from health-related coursework for one semester or longer</u>, are required to repeat substance abuse screening and/or background checks testing upon reenrolling in health-related courses/programs.

NOTE: <u>Students are responsible for all costs associated with substance abuse screening and background checks, including any required repeat checks.</u>

To initiate your background and substance abuse screen clearance, go to www.elpasoex.com (America Databank) and follow the process listed on the web page. Make sure you select only the option(s) that you need at that time-it will affect your cost. Your clearances will be sent directly to the dean/director, coordinator of your program at the college. Only background and substance abuse testing from this approved vendor will be accepted.

There are two levels of background screening - Level I is required for all students, while Level II is only required for students already licensed or certified in any area.

Level I checks the following items: Cost varies and is on the web site. Cost is \$30 - 50 approximate.

- 1. Social Security Number Verification
- 2. Criminal Search (7 years or up to 5 criminal searches
- 3. Employment Verification (Include reason for separation and eligibility for re-hire for each employer)
- 4. Violent Sexual Offender and Predator Registry Search
- 5. OIG List of Excluded Individuals/Entities
- 6. GSA List of Parties Excluded from Federal Programs
- 7. US Treasury, Office of Foreign Assets Control (OFAC), List of Specially Designated Nationals (SDN)
- 8. State Exclusion List (http://www.hhsc.state.tx.us/OIE/exclusionlist/exclusion.asp)

NOTE: If you do not have a Social Security Card, use all zeros (example: 000-00-000). You will then need to bring a photo ID to finalize your background clearance.

Level II checks the following items: Cost is \$30 - 50 (more if student has lived in multiple states) approximate.

- 1. All of Level I elements
- 2. Employment Verification (Includes reason for separation and eligibility for re-hire for each employer)
- 3. License/certification verification

Background checks must be completed prior to registration.

The following findings on the background screening will prevent your participation in clinical courses:

- 1. Identification on the list of ineligible persons
- 2. Any criminal conviction identified as exclusion by the affiliates. Incident listed on the Exclusion Guidelines.

Substance Abuse Testing: Cost is \$25 - 30 approximate.

- 1. An email will be sent to you with a COC number after payment has been made. The information on the email will include the COC number and information on the approved laboratories as to where to go take your substance abuse test. From the day you receive your email you have only five (5) days to take your test. If you go beyond the five (5) days, you will have to re-pay and re-take the test again to be cleared for clinical.
- 2. Your results will be sent to the Dean/Director, Coordinator, or designee of your program.

Upon review of your background check and/or substance abuse test results, you will receive a letter of clearance or non-clearance, which you will submit to your program director/coordinator. A copy must also be turned into the program director/dean/coordinator.

You must also complete a substance abuse test within ninety (90) days of starting your clinical course. Check with your program coordinator to verify timelines so you do not repeat taking the test too soon. This must be done prior to registration.

Deadlines: There are different enrollments or ranking dates for each of the health programs/courses. Please check with the information in the catalog as well as with your health career counselor, program coordinator, dean or director to make sure you have completed all requirements. Normal processing can take place in a few days, but sometimes verification requirements may take even a few months to complete some background check follow-up requirements. If you do not order your background check or substance abuse screening timely, then you may miss your deadline.

Health care facilities will not allow any person with a felony record in their background to do clinical at the facility.

If you have any questions, contact the Nursing Program Coordinator (915) 831-4093, Dean of Nursing at (915) 831-4530, or Lab Supervisor at (915) 831-4010 or by e-mail.

Revised: August, 2014 Revised: December, 2015

EXPENSES

- 1. The student is responsible for all expenses incurred in the preparation for admission, readmission, and/or advance placement into the nursing programs.
- 2. In addition to the usual college tuition and fees the nursing program requires liability insurance, which is included in college fees. The nursing program also requires uniforms, books, nursing supply kits for some courses, immunizations, and titers, physical exam, first aid, CPR certification, 2 background checks and substance abuse screen. If a student is out of the program for one (1) full semester or more, the background check and substance abuse screen will need to be repeated. ATI fee (Assessment Technologies Institute) Standardized Testing fee. Other fees/costs may be assessed as needed.
- 3. The student is financially responsible for emergency care which might be received as a result of an illness or injury while assigned to a clinical affiliate of El Paso Community College.
- 4. Nursing Student Supply Kits must be purchased for each lass that requires a supply kit as listed in the Course Syllabus. Order blanks will be provided to the student on the Nursing Facebook page or from the instructor.
- 5. ATI Standardized Testing. The fee for testing is automatically added to the fees paid at registration, the amounts will vary.
- 6. **Attention:** Some clinical affiliates are now requiring health insurance for all students utilizing the facility. You may be required to supply health insurance to attend clinical.

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Revised: October, 2002
Reviewed: July, 2005
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Revised: August 2018

EL PASO COMMUNITY COLLEGE NURSING PROGRAM CLINICAL AFFILIATION UNIFORM CODE, NURSING SKILLS LAB DRESS CODE AND CLASSROOM DRESS CODE

The student is a representative of the EPCC Nursing Program and as such, his/her appearance reflects on the nursing program and the student as an individual. **A PROFESSIONAL APPEARANCE IS EXPECTED AT ALL TIMES.**

I. CLINICAL AFFILIATE UNIFORM CODE:

A. General:

Hospital uniforms are scrubs that will be worn during clinical rotations as the uniform. However, professional dress, scrubs, or black polo shirt and khakis with a lab coat may be worn on some rotations (clinics, day care, Mental Health, etc.). Other times, hospital issued scrubs may be necessary (labor and delivery, operating room, etc.), which are provided by the hospital. Check with the instructor as to whether the hospital scrubs or professional dress need to be worn to the facility. It is important that the student follow the specific hospital policy if it is more stringent. No partial uniforms allowed for any area.

II. UNIFORM STANDARDS FOR CLINICAL AND LAB

- 1. <u>Name Tags</u>: All students will wear a white and teal green name pin on uniform/scrubs and long sleeve lab jacket. Name tags should be worn by students when in the lab areas. In the hospital, the students will also wear the EPCC picture identification card.
- 2. <u>School Patch</u>: The EPCC school patch will be worn on the upper left sleeve of lab coats, and long sleeve long jacket and uniform/scrubs for all students approximately one (1) inch below the seam. Patches should also be worn on other types of scrubs used in the lab area. Patch should be permanently secured and not put on by safety pins, tape, velcro, staples or glue.
- 3. <u>Lab Coat</u>: A white lab coat ³/₄ length (preferred) is required by all students. Lab coats should be worn for warmth in place of sweaters or long sleeve lab jacket in the Lab areas.
- 4. <u>Hair</u>: Hair should be worn in a style to provide for safety and protection from infection of the patient in healthcare facilities/clinical area and all labs where skills are required. Hair must be up off the shoulders and secured for all students. Plain bobby pins or plain metal barrettes are permitted to fasten long hair securely. Head and facial hair must be trimmed in such a manner as to allow the proper fit of N-95 TB masks, and long hair must be tied back and up anytime the

student is in uniform/scrubs. (Covers of facial hair may be required by some facilities or some areas).

All hair must be of a "natural" color. Hair that is of an "unnatural" color such as blue, green, yellow, florescent, purple etc. and/or that is colored in patterns, streaks or cut in stencils will not be allowed. Hair styling must be conservative and professional in appearance. Haircuts should not have patterns. During Nursing Skills labs practice, check offs, and simulation lab, hair must be kept up and not hanging free. Students with beards or mustaches must keep their facial hair neat and trimmed.

- 5. **Body Art:** All students with body art (tattoos, brandings, or piercings) must have it completely covered with gloves or removed anytime they are in uniform/scrubs and/or in the healthcare facility/clinical area, i.e., If body art is on one arm, both arms should be covered. Body Art tattoos must be covered with make-up. No band aides or bandages allowed.
- 6. <u>Affiliates</u>: Students are required to adhere to all policies and procedures of the affiliate healthcare facilities/clinical areas.
- 7. Nails: Fingernails (natural) should be clean and short in length (1/4 inch). Subdued nail polish is permitted as long as it is not chipped or cracked if permitted by the health care facility. NO ARTIFICIAL NAILS ARE ALLOWED, no nail wraps, decorations or other artificial additions to natural nails in the affiliate Healthcare facilities or Clinical areas. No Gel polish. Follow affiliate policy for nails if different from EPCC.
- 8. <u>Make-Up/ Perfume/Aftershave</u>: Use of heavy make-up and perfume/cologne/aftershave for female and male students are not permitted.
- 9. <u>Watch</u>: A watch with a second hand must be worn whenever in uniform/scrubs in the healthcare facility or clinical area.
- 10. <u>Scissors</u>: Scissors are needed when in the healthcare facility /clinical area, in Lab practice, check offs and simulation.
- 11. **Jewelry:** Any visible jewelry will be conservative and in good taste.
 - 1 Plain ring without raised stones or designs will be allowed in moderation.
 - Earrings will meet these specifications: 6mm or ¼ in. in diameter or smaller; gold, silver, white, pearl, or diamond; unadorned and spherical; fit snugly against the ear lobe; maximum of two earrings per lobe. No large or dangle earrings.
 - No other jewelry or body piercing materials will be visible while in any healthcare facility /clinical area

- Fad devices, vogue medallions, personal talismans, or amulets will not be worn.
- 12. <u>Gum</u>: No chewing gum is allowed in the Nursing Skills Lab or when administering direct patient care.
- 13. Shoes: White or black nursing shoes or all white or all black athletic shoes can be worn in the healthcare facility/clinical area. Shoes must be closed in toe and heel. No sandals, crocs, flip flops or toeless or backless shoes can be worn to the healthcare facility/clinical area. Shoes in the lab area when in uniform/scrubs or classroom attire will be closed in toe and heel. Closed heel and closed toe shoes will be worn at all times in the healthcare facilities/clinical areas to prevent foot injuries due to rolling or falling objects. (OSHA Standards and Texas Office of Risk Management Guidelines).

14. Hygiene and Body Grooming:

- All students are representatives of EPCC and the ADN and VN program at all times. Each student should be mindful of his/her appearance, especially when in the healthcare facility/clinical area or other times as an EPCC representative.
- Uniforms and lab coats will be freshly laundered, neat, not wrinkled, and fit properly.
- Shoes and socks/ hose will be clean and neat.
- Excessive make-up or strong smelling perfumes/colognes/aftershave will not be permitted. Deodorant should be used.
- Extreme shades of lipstick and nail polish such as bright colors, purple, gold, white, or combinations colors/designs will not be worn.

A. Uniform for Clinical Patient(s) Selection:

- 1. <u>The uniform</u> will be Khaki pants/slacks with a belt and a black polo shirt (with a collar). Shirts will be tucked into the pants.
- 2. **Name Tags** (see previous description)
- 3. <u>School Patch</u> (see previous description)
- 4. **Shoes** (see previous description)
- 5. <u>Lab Coat</u> (see previous description)
- 6. **Long Sleeves Scrub Jacket** Can be worn in clinical area or labs for warmth if cold.
- 7. **Students must be in full uniform** when selecting patients in the clinical area. No partial uniform allowed.

B. Uniform for Clinical:

- 1. <u>Uniform/ scrubs</u>: The teal and black, (teal colored tops and black pants) uniform/scrubs should be clean and neat. They should be pressed as needed to keep them wrinkle free. Nylon/transparent/translucent material may not be used for the uniform/scrubs.
- 2. <u>Uniform/ scrubs Sleeves</u>: Teal Sleeves may be short sleeves, long sleeved or ¾ length. If a shirt is worn under a scrub top, it must be of nontransparent/ nontranslucent material. It can be white or black. It must be plain and void of any visible decorations or pattern.
- 3. <u>Uniform/ scrubs</u>: The uniform/scrubs that is used should be free of decorations or belts, pleats, ribbing, ruffles, lace, embroidery, etc. Scrub tops and pants must be of the same fabric.
- 4. <u>Uniform/ scrubs</u>: Uniform/ scrubs should have pockets on the scrub shirt, and/or scrub slacks (pants).
- 5. <u>Uniform/scrubs</u>: The uniform should fit loosely enough to allow adequate movement, and should not be too tight or baggy. Uniform Scrubs tops should be long enough to cover the torso completely and should be 8-10 inches below the waist to prevent any skin at the waist, midriff and hips from showing when bending or lifting while working. Tops should not be low cut in the front and not tight.

 Pants should be worn comfortably around the waist and not low on the hips. Pant hemlines should touch the top of the shoes. They should not be short, capri length, or drag on the floor.
- 6. **Shoes:** (see previous description)
- 7. **No sandals:** crocs, flip flops or toeless or backless shoes can be worn to the healthcare facility/clinical area. Shoes in the lab area when in uniform/scrubs or classroom attire will be closed in toe and heel.
- 8. **School Patch:** (see previous description)
- 9. Name Tag: (see previous description)
- 10. <u>School Pin</u>: After completion of program requirements for the associate degree or vocational certificate, the graduate may wear the EPCC pin.
- 11. **Lab Coat:** (see previous description)
- 12. **Long Sleeve Scrub Jacket:** (see previous description)

13. **Students must be in full uniform for clinical and lab:** No partial uniform allowed.

III. NURSING SKILLS LAB DRESS CODE:

- 1. Professional dress is expected at all times.
- 2. All EPCC Students must wear scrubs and closed toe and closed heel shoes in the nursing Skills Lab for practice, check-offs, and simulations, not for classes where no lab skills are performed. The scrubs in the lab do not have to be EPCC teal/black scrubs unless required by instructor.
- 3. Dress requirements for lab will be the same as for clinical requirements. Hair must be secured from falling across face when in lab, and must be up off the shoulders and secure for all students. Tattoos will be covered with make-up. If tattoos are on hands the tattoos must be covered with waterproof make-up at all times or gloves will be worn with all patient care and in lab. No body piercing materials will be visible while in lab when in uniform/scrubs, with the exception of two small stud earrings or two small earrings. No large or dangle earrings.
- 4. **NAILS** (see previous description)

IV. NURSING CLASSROOM DRESS CODE:

The following Nursing classroom dress code applies in ALL classroom areas at all times if not wearing uniform/scrubs: The uniform can also be Khaki pants/slacks with a belt and a black polo shirt (with a collar). Shirts will be tucked into the pants.

- 1. **Business casual** can be used in the classroom or complete uniforms can be worn.
- 2. <u>Classroom Attire:</u> No halter tops, no strapless shirts, no skimpy or short shirts or tops, no tube tops, low cut tank tops, spaghetti straps or no mesh tops. No short shorts, jogging suits, no leggings/yoga pants, or sweats. No underwear should be showing. Only full blouses/shirts and tops that are conservative/modest are allowed.
- 3. No translucent/ transparent tops or bottoms shirts, blouses or garments for females and males.
- 4. No underwear for outer wear for any student.
- 5. No sleeveless clothes or halter tops that allow bras straps to show for females.
- 6. No jeans with holes anywhere on them; No jeans that ride low on the hips, no jean cut offs.

- 7. Shorts for any student (male and female) must be mid-thigh.
- 8. No short dresses or skirts, must be mid-thigh.
- 9. No sandals, flip flops, backless shoes, high heels shoes. Shoes must be flat or moderate height and must be closed toe and closed heel for safety especially when going to nursing lab area. (OSHA Standards; Texas Office of Risk Management Guidelines.)
- 10. Pants/skirts and tops must fit correctly with no gap of skin showing at the waist, when bending or moving.
- V. DRESS CODE WHEN NOT IN HOSPITAL UNIFORM BUT REPRESENTING EPCC PROGRAM (For example Sunday selection of patients, Mental Health rotation, community visits etc.)
 - 1. <u>Lab coat</u>, name tag (EPCC teal and white and EPCC picture identification card) and school patch is required.
 - 2. Clothes underneath lab coat must be professional dress (see description under section IV: \mathbb{N}_{2} 2)
 - 4. <u>Uniform</u> (see description under section B: № 1)
 - 5. <u>Name Tags</u> (see previous description)
 - 6. **EPCC School Patch** (see previous description)
 - 7. **Shoes** (see previous description)
 - 8. **Lab Coat** or Long Sleeves Scrub Jacket (see previous description)
 - 10. <u>Students must be in full uniform</u> when selecting patients in the clinical area. No partial uniform allowed.

Reviewed: October, 2006; Reviewed: October, 2007; Revised: June, 2008; Reviewed: August, 2009; Reviewed: June, 2012; Revised: August 2013; Revised: August 2014; Reviewed: December, 2015; Revised: April 27, 2018; Revised: May, 2018

CHARTING/DOCUMENTATION

I. <u>Statement of Purpose</u>:

- A. To establish guidelines for students and faculty to follow in regards to charting patient's data and patient care rendered.
- B. To establish guidelines for students and faculty to follow in regards to making notations on narcotic records.

II. <u>Statement of Policy</u>:

- A. Special hospital policies regarding charting/documentation override the EPCC Policy. Special policies will be noted on the agency protocol sheet.
- B. Students in nursing may chart under the supervision of their clinical instructor if applicable at the institution.
 - 1. First semester (Foundation) students must have charting approved by clinical instructor prior to charting in the patient's chart.
 - 2. Except for the Admission Nursing Assessment, notations made into a patient's chart need not be co-signed if using paper/pen charting. Signature should include SN/SVN or student nurse/student vocational nurse.
 - 3. The Admission Nursing Assessment must be completed by an RN. The student will be allowed to do the assessment with the RN or independently after it is completed. The nursing instructor is available to work with the student and complete an admission assessment on a client after an RN has completed the assessment.
 - 4. Students may not witness the signing of permits or other legal documents.
 - 1. Electronic charting will be done as hospitals give their permission and/or students are trained.
 - 2. Electronic charting will be done by 4th semester, preceptor students when possible.
- C. The student's signature on the narcotic record need not be co-signed, unless the narcotic is wasted. If the agency utilizes an automated medication dispensing system, agency policy and procedures are to be utilized in retrieval, dispensing, and documentation of medications. When an automated dispensing system is not used, the following guideline is to be used.

- 1. When a narcotic is wasted, the student's signature must be co-signed by the clinical instructor or staff nurse (RN or LVN) observing the wastage. (This is in accordance with procedures set forth by federal, state and hospital standards).
- D. **STUDENTS MAY NOT TAKE VERBAL ORDERS**. The exception is management students in conjunction with their preceptor. The licensed preceptor will add the order to the medical record.

Students **ARE NOT** allowed to transcribe or verify orders. Students in the RNSG 2261, clinical portion of Professional Nursing: Leadership and Management course may transcribe and verify orders only in conjunction with the Registered Nurse Preceptor.

Reviewed: August, 2004 Reviewed: July, 2005 Revised: July, 2006 Revised: Nov., 2007 Revised: August, 2008 Revised: August, 2009 Revised: June, 2012

Reviewed: December, 2015 Reviewed: August, 2018

ETHICS

ETHICS

The following section of materials on Ethics is a part of professional behavior, responsibility and accountability.

This section includes specific Nursing Program Policies and Procedures, as well as materials from the National Student Nurse Association and the Texas Board of Nursing Nurse Practice Act/Rules and Regulations, related to the Ethical/Legal Conduct of Nursing Students.

All materials should be considered a binding part of the Nursing Student Handbook.

The materials are also considered a part of the Nursing Students actions and behaviors in classes, lecture, laboratory classes/sessions, and clinical or any time students and faculty meet for specific sessions for tutoring, mentoring, retain, or mentoring tutoring for a grant.

American Nurses Association Code of Ethics for Nurses

Provision 1	The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
Provision 2	The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
Provision 3	The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
Provision 4	The nurse has authority, accountability and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to provide optimal patient care.
Provision 5	The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
Provision 6	The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
Provision 7	The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
Provision 8	The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

Provision 9

The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Source: American Nurses Association. (2015). *Code of ethics with interpretative statements*. Silver Spring, MD: Author. Retrieved from

 $\underline{http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/CodeofEthics-For-Nurses.html}\\$

NATIONAL COUNCIL OF STATE BOARDS OF NURSING – NCSBN

Cell phone policy when taking the NCLEX-RN and/or NCLEX-PN licensing examination.

As part of the annual update to exam day processes for NCLEX candidates, NCSBN and Pearson VUE introduced a new policy regarding cell phones.

Currently, candidates agree via the Candidate Rules to not access cell/mobile/smart phones, pagers or other electronic devices during the exam (including breaks). They are instructed to keep their phones in their provided locker and are reminded that they cannot access the phones at any point during the exam. When a candidate violates this rule, NCSBN, with the board of nursing's approval, pursues a result cancellation.

The new cell phone policy requires candidates to store their electronic devices in their locker in a sealable bag. This bag is provided to the candidate at check-in by the test administrator (TA) and is inspected by the TA at the end of the exam. The candidate is informed that any evidence of bag tampering will result in an incident, which could lead to a result cancellation.

Provided there is no evidence of tampering with the bag, the candidate will be permitted to remove items from the bag and the TA will dispose of the bag at the test center. If there is evidence of tampering, an incident will be reported and further investigation will take place. It is our hope that this new policy will prevent candidates from inadvertently touching their cell phones, thus reducing result cancellations.

Cell phones at EPCC Nursing Programs.

See course syllabus for specific course requirements regarding cell phones. Cell phones are not allowed in the classroom during testing. Cell phones are not allowed in clinical unless cleared through the affiliate security and it is being used only for references.

EL PASO COMMUNITY COLLEGE CODE FOR NURSING STUDENTS

Students are involved in the clinical and academic environments. It is believed that ethical principles are a necessary guide to professional development.

- 1. Advocate for the rights of all clients/patients.
- 2. Maintain client confidentiality at all times.
- 3. Ensure the safety of clients, self, and others all times.
- 4. Care for the client/patient in a timely, compassionate and professional manner.
- 5. Communicate client care in a truthful, timely and accurate manner to all caregivers.
- 6. Promote high level of moral and ethical principles and accept responsibility for your own actions.
- 7. Encourage lifelong learning and professional development.
- 8. Treat others with Respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
- 9. Work together in a reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client/patient care
- 10. Utilize opportunities to improve faculty and clinical staff understanding of the learning needs of nursing students.
- 11. Encourage mentoring of nursing students.
- 12. Insure from student has been adequately trained on a procedure or technique asked to perform.
- 13. Do not omit care in the clinical setting that creates unnecessary risk of injury to the client/patient, self, or others.
- 14. Do not use alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
- 15. Endeavor to achieve and maintain an optimal level of personal health.
- 16. Support school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

HONESTY POLICY TESTING EXAMS, QUIZZES

To assure quality education and equality to all students in the following special conditions will apply during any testing situation in the laboratory or clinical:

- 1. The instructor(s) controls the option of seating arrangement, movement, leaving the room, and stopping an exam for violation of the honesty policy.
- 2. <u>All books, papers, notebooks, and personal belongings will be placed at the front of the classroom or other designated area before entering a testing situation.</u> (i.e., left in your car.)
- 3. Any information found on, or in the immediate vicinity of the individual during a testing situation will be grounds for termination of the testing. A grade of zero will be recorded and averaged into the final grade.
- 4. Any verbal or nonverbal communication between students during a testing situation will be grounds for termination of the testing. A grade of zero will be recorded and averaged into the final grade.
- 5. Should a student need to communicate with the instructor, he/she should remain seated and raise his/her hand.
- 6. Infractions of the honesty policy will be grounds for dismissal from the course or the program for Quizzes and Exams

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EL PASO COMMUNITY COLLEGE SCHOLASTIC DISHONESTY

Scholastic dishonesty shall constitute a violation of these rules and regulation and is punishable as prescribed by EPCC Board of Trustee policies. Scholastic dishonesty shall include, but not be limited to, cheating on a test, plagiarism, and collusion. This applies to theory, laboratory and clinical. Scholastic Dishonesty shall include:

- 1. Copying from another student's test paper or any assignment.
- 2. Using test materials not authorized by the person administering the test.
- 3. Unauthorized collaborating with or seeking aid from another student for any assignment.
- 4. Knowingly using, buying, selling, stealing or soliciting, in whole or in part, the contents of a test or other materials.
- 5. The unauthorized transportation or removal, in whole or in part, of the contents of the test or other materials.
- 6. Substituting for another student, or permitting another student to substitute for one's self, to take a test or complete other assignments.
- 7. Bribing another person to obtain a test or information about a test.
- 8. "Collusion" shall be defined as the unauthorized collaboration with another person in preparing written work for fulfillment of course requirements.
- 9. Any student involved in scholastic dishonestly as identified above, or in the Nursing Student Handbook, may, at the discretion of the faculty;
 - a. Have the test or paper graded zero (0) or F.
 - b. Be removed from the class with a 0 or F.
 - c. Be recommended for administrative dismissal from the course or program with a 0 or F.

The stringency of this policy is understandable when read in the context of an educational program preparing individuals for a health career where the safety and well-being of the public are largely dependent upon the knowledge and ethical responsibility of the health personnel. Evidence of unethical behavior, such as cheating, precludes the instructional faculty's ability to declare prospective graduates to be reliable and ethical.

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EL PASO COMMUNITY COLLEGE PROCEDURE ON SCHOLASTIC DISHONESTY

Scholastic dishonesty shall constitute a violation of these rules and regulations and is as specified in this procedure and in accordance with El Paso Community College disciplinary and grievance procedures (see current El Paso Community College Catalog and/or Nursing Student Handbook). Scholastic dishonesty shall include, but is not limited to, cheating on a test, plagiarism, and collusion in the theory laboratory, or clinical.

Cheating on a test shall include:

- 1. Copying from another student's test paper.
- 2. Using test materials not authorized by the person administering the test.
- 3. Unauthorized collaborating with or seeking aid from another student.
- 4. Knowingly using, buying, selling, stealing, or soliciting (in whole or in part) the contents of a test or other materials.
- 5. The unauthorized transportation or removal in whole or in part of the contents of a test or other material.
- 6. Substituting for another student, or permitting another student to substitute for one's self to take a test or complete other assignments.
- 7. Bribing another person to obtain a test or information about a test.

<u>Collusion shall</u> be defined as the unauthorized collaboration with another person in preparing written work for fulfillment of course requirements.

Consequences of Scholastic Dishonesty.

Any student involved in scholastic dishonesty as identified above, or elsewhere in College or Program Procedures, may, at the discretion of the faculty:

- 1. Have the test or paper graded zero (0) or F.
- 2. Be removed from the class and or clinical with a 0 or F.
- 3. Be recommended for administrative dismissal from the course or program with a 0 or F.

The stringency of the procedure is understandable when read in the context of an educational program preparing individuals for a health career where the safety and wellbeing of the public are largely dependent upon the knowledge and ethical responsibility of the health personnel. Evidence of unethical behavior, such as cheating, precludes the instructional faculty's ability to declare prospective graduates to be reliable and ethical.

Appeals

Students have the right to appeal the results of Scholastic Dishonesty in accordance with El Paso Community College grievance procedures (see El Paso Community College Catalog and Nursing Student Handbook).

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EL PASO COMMUNITY COLLEGE PROCEDURE STUDENT ABSENTEEISM FOR CLINICAL, DIDACTIC AND LABORATORY GRADES

I. Clinical

In all nursing clinical rotations, ten (10) points will be deducted (taken off) for each clinical absence from the A.D.N. or V.N. Competencies Clinical Evaluation for that rotation where the absence occurred. The points will be deducted from the rotation the absence occurred, not off the final grade. Points will also be taken off if the student is unprepared for clinical and is sent home. The student may be sent home or kept in the clinical area at the instructor's discretion with lack of clinical preparation. Exceptions are as follows:

A. Student Illness

Points will not be subtracted from the student's grade if ALL of the following conditions are met:

- 1. Prior to the absence, the student must notify the clinical instructor as set forth in the instructor's clinical expectations or by cell phone or message left on office telephone.
- 2. The student must notify the clinical site of the absence by the time required by the agency as set forth in the agency's human resource manual for agency employees.
- 3. The student must present a health care provider licensed in the United States (HCP) to the clinical instructor or the course responsible faculty member on the first day that the student returns to either clinical or theory, whichever comes first.
- 4. The physician's note must be on the health care provider letterhead stationery or specific prescription pad and must include the date of treatment and the date the student is cleared to return to theory and/or clinical. It must be by an American Licensed Physician, Advanced Practice nurse, Assistant.

B. Illness of a Child

Regarding in care of an ill child; points will not be subtracted from the student's grade of the rotation the absence occurred or the final grade if ALL of the following conditions are met.

- Prior to the absence, the student must notify the clinical instructor as set forth in the instructor's clinical expectations or course syllabus, or by audix message on office phone, or by cell phone.
- 2. The student must notify the clinical site by the time required by the agency as set forth in the agencies human resource manual for agency employees.
- 3. The student must present a health care provider's note to the clinical instructor or the course responsible faculty member on the first day that the student returns to either clinical or theory, whichever comes first. It must be by an American Licensed Physician, Nurse Practioner or Physicians Assistant.
- 4. The physician's note must be on the physician's letterhead stationery or specific prescription pad and must include the date of treatment. The note must also state the reason for the child's treatment to be due to illness and not well-child care.

C. Death in the Immediate Family.

Immediate family includes the student's spouse, parents, brothers, sisters, grandparents, and children, or anyone of like relationship by marriage. Up to three (3) consecutive days of bereavement leave will be granted to the student with no points subtracted from the student's grade if the following conditions are met:

- 1. In the event of an absence due to death in the family, the student must submit, in writing, a statement of the relationship to the deceased and provide at least <u>one</u> of the following documents:
 - a. Obituary with student listed as survivor.
 - b. Mortuary note specifying date of death and student's relation to the deceased. This note must be on letterhead stationery and must be dated.
 - c. Note from the deceased's physician on physician's letterhead or prescription pad with date of death and student's relation to the deceased.
- 2. <u>Prior</u> to the absence, and taking the bereavement leave the student must notify the clinical instructor as set forth in the instructor's clinical expectations.
- 3. The student must present the documentation to the clinical instructor or the course responsible faculty member either prior to the absence or on the first day that the student returns to either clinical or theory, whichever comes first.

4. The student must make arrangements with the instructor for any missed assignment or clinical days.

I. Theory and/or Laboratory

In all nursing theory and laboratory classes, points will be deducted from the theory and/or laboratory grade if a student is absent for tests, quizzes, assignments, projects, scheduled laboratory sessions/check-offs according to the course syllabi and/or Nursing Program Policies and Procedures. Exceptions are as follows:

A. Student Illness

Points will not be subtracted from the student's grade if ALL of the following conditions are met:

- 1. Prior to the absence, the student must notify the instructor as set forth in the instructor's course syllabus or by telephone leaving a message on the audix message system that records date and time of phone call.
- 2. The student must present a physician's note to the instructor or the course responsible faculty member on the first day that the student returns to either clinical or theory, whichever comes first.
- 3. The physician's note must be on the physician's letterhead stationery or specific prescription pad and must include the date of treatment and the date the student is cleared to return to theory and/or clinical. It must be by an American Licensed Physician, Nurse Practioner or Physicians Assistant.

B. Illness of a Child

When it is impossible to make other arrangements for the care of an ill child, points will not be subtracted from the student's grade if ALL of the following conditions are met.

- Prior to the absence, the student must notify the clinical instructor as set forth in the instructor's course syllabus or by audix message on office phone or by cell phone.
- 2. The student must present a physician's note to the clinical instructor or the course responsible faculty member on the first day that the student returns to either clinical or theory, whichever comes first. It must be by an American Licensed Physician, Nurse Practioner or Physicians Assistant.
- 3. The physician's note must be on the physician's letterhead stationery or specific prescription pad and must include the date of treatment. The note

must also state the reason for the child's treatment to be due to illness and not well-child care.

C. Death in the Immediate Family.

Immediate family includes the student's spouse, parents, brothers, sisters, grandparents, and children, or anyone of like relationship by marriage. Up to <u>three</u> (3) consecutive days of bereavement leave will be granted to the student with no points subtracted from the student's grade if the following conditions are met:

- 1. In the event of an absence due to death in the family, the student must submit, in writing, a statement of the relationship to the deceased and provide at least one of the following documents:
 - a. Obituary with student listed as survivor.
 - b. Mortuary note specifying date of death and student's relation to the deceased. This note must be on letterhead stationery and must be dated.
 - c. Note from the deceased's physician on physician's letterhead or prescription pad with date of death and student's relation to the deceased.
- 2. <u>Prior</u> to the absence, the student must notify the theory instructor as set forth in the instructor's course syllabus.
- 3. The student must present the documentation to the instructor or the course responsible faculty member either prior to the absence or on the first day that the student returns to either clinical or theory, whichever comes first.
- 4. The student must make arrangements with the theory instructor for any missed assignment.

Reviewed: October, 2002
Reviewed: February, 2004
Reviewed: August 2004
Reviewed: July, 2005
Revised: July, 2006
Revised: Nov., 2007
Reviewed: August, 2008
Reviewed: August, 2009
Reviewed: June, 2012
Reviewed: August, 2014
Reviewed: December, 2015
Reviewed: August 2018

EL PASO COMMUNITY COLLEGE

CRITERIA FOR UNSAFE CLINICAL PRACTICE

Students in the Nursing Program are assigned responsibilities for client care at various clinical sites in the community. Each clinical course specifies the criteria for successful completion of the course. There may, however, be situations where the student places a patient in actual or potential physical or emotional jeopardy. In the case of a student who performs in an unsafe manner, the student may:

- 1. Be verbally counseled A memo for record will be written by the faculty for insertion into the student record
- 2. Receive written counseling, A copy will go into the students record.
- 3. Be dismissed from clinical with an unexcused absence, The Program Coordinator or Dean of Nursing will be notified.
- 4. Be immediately removed from the course with a failing grade Documentation of the seriousness of the situation will be documented and the Program Coordinator or Dean of Nursing will be notified.
- 5. Be immediately removed from the nursing program The situation must be documented and the Program Coordinator or Dean of Nursing must notified immediately and the decision will be left to the Dean.

What action is taken by the instructor/coordinator and/or Dean of Nursing is contingent upon the severity of the incident(s), the number of incidents, or the type of unsafe practice. In ALL instances of unsafe clinical practice, verbal and written counseling will be initiated by the instructor. The counseling form(s) and recommendations will be maintained in the student records maintained by the program throughout their enrollment in the program.

A failure in the course will cause the student to be removed from the program and the student must complete the process for readmission into the Nursing Program. See Nursing Student Handbook for guidelines on readmission. Students who have failed a course due to documented incidents of unsafe practice may not be eligible for readmission, regardless of the level of the course. Any negative consequence of unsafe practice for the student may be appealed under the Student Reentry into the Nursing Program Policy 7.02.01.26.

Students are legally responsible for their own acts, commission, and omission. Instructors are responsible for their students in the clinical setting. It is therefore necessary for the student and the faculty to conscientiously evaluate unsafe behaviors.

The student will be held responsible for treating clients safely at all times and preventing situations of physical or emotional jeopardy.

Reviewed: July, 2005 Revised: July, 2006 Reviewed: Nov., 2007 Reviewed: August, 2008 Reviewed: August, 2009 Revised: June, 2012 Reviewed: August, 2014 Reviewed: December, 2015 Reviewed: August, 2018

PHYSICAL JEOPARDY

Physical jeopardy is defined as any action or inaction on the part of the student which threatens the client's physical well-being. The following are examples of situations that would place the client in physical jeopardy. NOTE** This is **NOT** a complete list and other situations may place a patient in physical jeopardy.

CATEGORY OF UNSAFE PRACTICE	EXAMPLES	
1. Violates or threatens the client's physical safety.	A. Comes unprepared to clinical. – Does not have all or part of the daily preps, does not know medications. B. Failure to use side rails, restraints, and/or call bells when appropriate. C. Fails to report or chart abnormal vital signs and/or tests (e.g. lab data, x-rays). D. Fails to give rational for client care interventions. E. Fails to report any deviation from normal in assigned client's diagnosis/observations. F. Failure to identify the appropriate nursing diagnosis as based on client assessment. G. Failure to report malfunction of equipment. H. Failure to consult with staff member or instructor for assistance in new procedures or use of new equipment or on patient care issues. I. Improper use of equipment (e.g. wheelchair, stretcher, monitors). J. Failure to report change in patient conditions. K. Failure to report any patient lab changes to include glucose levels. L. Gives medication without consulting instructor. M. Gives medication out of scope of	
2 Wielstes on threatens the	course/semester enrolled in.	
2. Violates or threatens the microbiological safety of the client.	 A. Unrecognized violation of aseptic technique. B. Comes to clinical sick (e.g. Temperature of 100 or higher, diarrhea, vomiting, rash, etc.) C. Failure to maintain both medical and/or surgical principles of asepsis at all times. D. Failure to identify lab reports indicating infections. 	

CATEGORY OF UNSAFE PRACTICE		EXAMPLES	
3.	Violates or threatens the chemical safety of the client.	 A. Failure to calculate appropriate dosage of medication. B. Violates the 10 Rights in administering medication. C. Fails to monitor IV infusions. D. Failure to state drug information: Classification of drug Indication for use in assigned patient Side effects Appropriateness of dose Client care implications Client response to drugs 	
4.	Violates or threatens the thermal safety of the patient.	 7. Interaction with other drugs patient is receiving. A. Improper use of heat (hot packs, heating lamps, etc.) resulting in hyperthermia, burns or potential tissue injury. B. Fails to observe safety precautions during oxygen therapy. C. Failure to report malfunction of equipment which could place client in jeopardy of electric shock. D. Improper use of electrical equipment. E. Failure to report abnormal temperature of patient. F. Improper use of cold (ice packs, K-pad, etc.) resulting in hypothermia or potential tissue injury. G. Failure to maintain adequate body warmth resulting in hypothermia (e.g. dry sheets with diaphoresis or with newborn). 	
5.	Violates <u>previously mastered</u> <u>principles</u> , learning and objectives in carrying our patient care and/or delegated medical functions from previous and current semesters.	Failure to demonstrate or explain patient care, assessment, planning interventions, and evaluations listed in previous course objectives that have been completed. (see syllabus and evaluation tools).	
6.	Inadequately and/or inaccurately utilizes the nursing process.	 A. Fails to observe and/or report critical data for patient charge nurse or instructor. B. Makes repeated faulty judgments and decisions in nursing situations. C. Fails to obtain assistance or ask questions of staff or instructor when appropriate. 	

CATEGORY OF UNSAFE PRACTICE		EXAMPLES	
7.	Assumes inappropriate	A.	Performs skills or competencies not yet
	independence in action or decisions.		evaluated.
		В.	Fails to seek help in an emergency situation.
		C.	Continually seeks assistance or validation in
			areas previously mastered.
		D.	Fails to seek out instructor when asked to do
			skills, tasks, patient care not yet instructed
			or evaluated.
8.	Fails to recognize own limitations,	A.	Refuses to admit errors noted by staff or
	incompetence, and/or legal		instructor.
	responsibilities.	B.	Cannot identify own legal responsibility in
			specific situation.
		C.	Fails to seek assistance when appropriate.
9.	Fails to accept moral and legal	A.	Covers own/other's errors.
	responsibility for his/her own	B.	Fails to report errors in patient care by self
	actions, thereby violating		or others.
	professional integrity.	C.	Shares confidential information
			inappropriately.
		D.	Fails to maintain patient/others
			confidentiality.

Reviewed: July, 2005 Reviewed: July, 2006 Reviewed: Nov., 2007 Reviewed: August, 2008

Revised: Added inadvertently deleted information 2-3-09 Reviewed: August, 2009

Reviewed: August, 2009 Revised: June, 2012 Reviewed: August, 2014 Reviewed: December, 2015 Revised: August 2018

EMOTIONAL JEOPARDY

Emotional jeopardy is defined as any action or inaction on the part of the student which threatens the patient's or family's emotional well-being/family, other student or other student's well being. The following are **examples** of situations that would place the patient in emotional jeopardy. This is **NOT** a complete list.

CATEGORY OF UNSAFE PRACTICE	EXAMPLES
1. Violates or threatens the psychological	A. Repeatedly uses nontherapeutic
safety of the patient.	techniques in interactions.
	B. Attacks or derogates individuals
	(patients or other students) beliefs
	or values.
	C. Failure to explain a procedure correctly
	to the patient or family.
	D. Failure to include the patient and the
	family in discussions when in the
	patient's room.
	E. Failure to communicate at the
	appropriate level for the patient or
	family.
	F. Failure to obtain/provide translation
	for the patient as appropriate.
	G. Fails to maintain
	patient/family/student confidentiality.
	H. Fails to do appropriate patient/
	family assessment to prevent harm to
	patient/family with psychological
	needs.

Reviewed: July, 2005 Reviewed: July, 2006 Reviewed: Nov., 2007 Reviewed: August, 2008 Reviewed: August, 2009 Revised: June, 2012 Reviewed: August, 2014 Reviewed: December, 2015 Revised: August 2018

BACKGROUND CHECKS

Upon satisfactory completion and awarding of the Associate of Applied Science Degree for the Associate Degree Nurse, or completion and awarding of the Certificate for Vocational Nurse the graduate is eligible to apply to take the National Council Licensing Examination for licensure as a Registered Nurse (NCLEX-RN) or take the National Council Licensing Examination for Licensure as a Licensed Vocational Nurse. Graduation does not guarantee approval from the Texas Board of Nursing (BON) to take either of the licensing examinations. Examples of behaviors that violate Standards of Conduct that may prevent an applicant receiving approval from the Texas BON are included in the Nursing Student Handbook and are given out to students at the Nursing New Student Orientation. Background checks with the FBI, including fingerprinting, are performed prior to students entering the program and must be completed by the end of the first semester. This is a requirement of the Texas Board of Nursing. Students are also required to do a background check thru American Data Bank prior to entry into the program.

New Students Orientation (NSO) and The El Paso Community College Catalog include the "student code of conduct" for all students which establishes a system of rights and responsibilities for students. Nursing related procedures are in place for students that perform in an unsafe manner in the Nursing Student Handbook. The "Declaratory Orders of Eligibility for Licensure" from the BON is given out at the Nursing NSO, available in the Nursing Student Handbook, and available on the BON website.

Students with either a minor or major criminal history in their background or a positive drug screen are strongly encouraged to discuss the problem with The Associate Degree Nursing or Vocational Nursing Coordinator, The Dean of Nursing, the BON and/or complete The Declaratory Order. The address and phone number for the Texas BON are provided in the catalog.

Reviewed: July, 2005 Revised: July, 2006 Revised: Nov., 2007 Reviewed: August, 2008 Reviewed: August, 2009 Revised: June, 2012

Reviewed: December, 2015 Revised: August, 2018

DRUG SCREENING

Be advised that the Nursing and Vocational Nursing Coordinators or the Dean of Nursing have the right to require a student to undergo a Random Drug Screen for Cause. The Cause can be any signs & symptoms of physical or mental impairment, or evidence of Substance Abuse that occur within the span of time a student is in the Academic environment and clinical health care facility.

August, 2018

PROFESSIONAL BOUNDARIES

National Council of State Boards of Nursing (NCSBN) defines professional Boundaries as the spaces between the nurse's power and patient's vulnerability from the Texas Board of Nursing (BON and the NCSBN). A nurse abstains from personal gain at the client's expense and refrains from inappropriate involvement with the patient or the patient's family. Every nurse is responsible for knowing, recognizing, and maintaining the professional boundaries of the nurse-client/patient relationship.

BOARD OF NURSING (BON) POLICY FOR INDIVIDUALS WITH CONVICTIONS – DECLARATORY ORDERS

The BON's Licensure Eligibility Policy for Individuals with Convictions is reprinted below.

- 1. Staff are authorized to propose denial of licensure eligibility for an applicant or petitioner who:
 - a. has been convicted of a felony.
 - b. has been convicted of a misdemeanor involving moral turpitude in which the crime was against a person(s) or was a crime of violence.
 - c. has been convicted of misdemeanor involving moral turpitude in which the crime was non-violent, involving property if less than 10 years from the date all court conditions were met.
- 2. Staff members of the BON are authorized to propose denial of licensure eligibility of an individual who has had action by another health care licensing authority when:
 - a. his/her licensure was revoked and not reinstated.
 - b. board action was related to a felony conviction.
 - c. board action was related to a misdemeanor conviction (see 1b and 1c)
- 3. The Executive Director of the BON is authorized to recommend approval of an individual convicted of a misdemeanor involving moral turpitude in which the crime was non-violent, involving property, who has met all conditions of the court, such as probation, 10 or more years prior to the application or petition, with no further conviction(s).

Current Procedure to Apply for Declaratory Order:

- 1. Submit a letter to the BON describing the situation. Do not enclosure money or the Declaratory Order Form at this time.
- 2. The staff members of the BON will review your letter and determine if you need to go through the Declaratory Order Process. If they decide you need to complete the process, they will send you a letter with instructions and all forms needed.
- 3. If you are required to submit the paperwork for a Declaratory Order, you will be required to submit the required fee with the application and requested documentation.
- 4. Keep all correspondence to and from the BON.
- 5. It is recommended that you submit all paperwork relating to this process via certified mail, return receipt requested.

For further information contact:

Texas Board of Nursing (Registered Nurse's and Licensed Vocational Nurse's) 333 Guadalupe # 3-460 Austin, Texas 78701 Phone: (512) 305-7400

Executive Director: Katherine Thomas, MN, RN

Web Address: www.bne.state.tx.us

<u>Equal Educational Opportunity</u>. No Student or Prospective Student of the College Shall Be Discriminated Against Because of Race, Color, Religion, Gender, National Origin, Age, or Handicap. Students Who Feel Aggrieved on the Basis of Race, Gender, Color, National Origin, Disability, Creed, or Age May File a Written Grievance. See college catalog for specific procedures.

Reviewed: July, 2005 Reviewed: July, 2006 Revised: Nov., 2007 Reviewed: August, 2009 Revised: June, 2012

Reviewed: August, 2014 Reviewed: December, 2015 Reviewed: August 2018

EL PASO COMMUNITY COLLEGE

DECLARATORY ORDERS FOR INDIVIDUALS WITH PRIOR CRIMINAL HISTORY, MENTAL ILLNESS, OR CHEMICAL DEPENDENCY

Students applying to or enrolled in the nursing program who have a history of (1) conviction of a crime (felony or misdemeanor) other than a minor traffic violation, (2) hospitalization or treatment for mental illness, (3) hospitalization or treatment for chemical dependency, or disciplinary action by another licensing agency, are encouraged to have their situation reviewed by the Nursing Coordinator, Nursing Dean or the Board of Nursing prior to entering the program.

In addition, students with a current or past history of psychiatric conditions or drug/alcohol use should discuss their current health status with their health care provider. This information should be documented on the physical examination form on file with the College. Current drug or alcohol use may result in disciplinary action by the College in accordance with existing student disciplinary procedures. Refer to the College Catalog and/or the College Student Handbook for more information.

The Board of Nursing can issue declaratory orders to individuals stating their eligibility to write the licensure examination prior to entering or completing the nursing program. You should request advice from the Board of Nursing regarding the need for a declaratory order if:

- 1. You have been convicted of a crime other than a minor traffic violation.
- 2. You have been hospitalized or treated for mental illness and/or chemical dependency.
- 3. You have had disciplinary action taken against you by a licensing authority.

The Board of Nursing requires that the individual student request this clearance. The school can not complete this process for you. If you have not received clearance from the Board of Nursing prior to graduation, the Board of Nursing will not be able to release a graduate permit to you until you have been cleared. Therefore, you are encouraged to complete this process prior to your last semester in school to avoid delays upon graduation and your application for licensure.

Texas Administrative Code

TITLE 22 EXAMINING BOARDS

<u>PART 11</u> TEXAS BOARD OF NURSING <u>CHAPTER 213</u> PRACTICE AND PROCEDURE

RULE §213.30 Declaratory Order of Eligibility for Licensure

(a) For purposes of this section only, "petitioner" means an individual who:

- (1) is enrolled or planning to enroll in an educational nursing program that prepares individuals for initial licensure as a registered or vocational nurse;
- (2) seeks licensure by endorsement pursuant to §217.5 of this title (relating to Temporary License and Endorsement); or
- (3) seeks licensure by examination pursuant to §217.2 (relating to Licensure by Examination for Graduates of Nursing Education Programs Within the United States, its Territories, or Possessions) or §217.4 (relating to Requirements for Initial Licensure by Examination for Nurses Who Graduate From Nursing Education Programs Outside of United States' Jurisdiction) of this title.
- (b) An individual who has reason to believe that he or she may be ineligible for initial licensure or licensure by endorsement due to issues discussed in this rule may petition the Board for a declaratory order as to his or her eligibility.
- (c) A petitioner must submit a petition, on forms provided by the Board, and the following information:
- (1) a statement by the petitioner indicating the reason(s) and basis of his/her potential ineligibility;
- (2) if the potential ineligibility is due to the petitioner's criminal history, all court documents, including, but not limited to: indictments, agreements for pre-trial diversion or deferred prosecution, orders of deferred adjudication, judgments, probation records, and evidence of completion of probation, as applicable;
- (3) if the potential ineligibility is due to the petitioner's mental health condition or diminished capacity, verifiable and reliable evidence of controlled behavior and consistent compliance with recommended treatment, including compliance with a prescribed medication regime, for a reasonable amount of time, as applicable;
- (4) if the potential ineligibility is due to the petitioner's substance use disorder and/or the abuse/misuse of alcohol or drugs, verifiable and reliable evidence of sobriety and abstinence from drugs and alcohol, which may include evidence of the completion of inpatient, outpatient, or aftercare treatment, random drug screens, individual or group therapy, and/or support group attendance;
- (5) the required fee, which is not refundable; and
- (6) an evaluation that meets the criteria of the Occupations Code §301.4521 and §213.33 of this chapter (relating to Factors Considered for Imposition of Penalties/Sanctions), as applicable.
- (d) Once the Board has received all necessary information, including the information required by subsection (c) of this section, an investigation of the petition and the petitioner's eligibility shall be conducted. The investigation will be based upon an evaluation of the individualized factors of the case, the potential risk of harm the individual's practice may pose to patients/clients and/or

the public, and the petitioner's ability to meet the requirements of §213.27 (relating to Good Professional Character), §213.28 (relating to Licensure of Individuals with Criminal History), and §213.29 (relating to Fitness to Practice) of this chapter, as applicable. Based upon the individualized facts of the case, the Board may approve licensure without encumbrance, impose probationary conditions or restrictions on the individual's ability to practice nursing in this state, or deny licensure.

- (e) The petitioner or the Board may amend the petition to include additional grounds for potential ineligibility at any time before a final determination is made.
- (f) If an individual is seeking licensure by endorsement pursuant to §217.5 of this title and has been licensed to practice nursing in any jurisdiction and has been disciplined in that jurisdiction or allowed to surrender in lieu of discipline in that jurisdiction, the provisions of §213.27(e) of this chapter will apply to the eligibility of the petitioner.
- (g) If a petitioner's potential ineligibility is due to his/her criminal history, the provisions of §213.28 of this chapter will apply to the eligibility of the petitioner.
- (h) If a petitioner's potential ineligibility is due to a substance use disorder and/or the abuse/misuse of alcohol or drugs, a mental health condition or diminished capacity, or another issue relating to the individual's fitness to practice, the provisions of §213.29 of this chapter will apply to the eligibility of the petitioner.
- (i) If the Executive Director proposes to find the petitioner ineligible for licensure, the petitioner may obtain a hearing be-fore the State Office of Administrative Hearings (SOAH). The Executive Director shall have discretion to set a hearing and give notice of the hearing to the petitioner. The hearing shall be conducted in accordance with §213.22 of this chapter (relating to Formal Proceedings) and the rules of SOAH. When in conflict, SOAH's rules of procedure will prevail. The decision of the Board shall be rendered in accordance with §213.23 of this chapter (relating to Decision of the Board).
- (j) A final Board order is issued after an appeal results in a Proposal for Decision from SOAH. The Board's final order must set out each basis for potential ineligibility and the Board's determination as to eligibility. In the absence of new evidence not disclosed by the petitioner or not reasonably available to the Board at the time the order is issued, the Board's ruling determines the petitioner's eligibility with respect to the grounds for potential ineligibility as set out in the order. An individual whose petition is denied by final order of the Board may not file another petition or seek licensure by endorsement or examination until after the expiration of three years from the date of the Board's order denying the petition. If the petitioner does not appeal or request a formal hearing at SOAH after a letter proposal to deny eligibility made by the Eligibility and Disciplinary Committee of the Board or the Executive Director, the petitioner may re-petition or seek licensure by endorsement or examination after the expiration of one year from the date of the proposal to deny eligibility, in accordance with this section and the Occupations Code §301.257.
- (k) The following eligibility and disciplinary sanction policies, as applicable, shall be used by the Executive Director, SOAH, and the Board in evaluating an eligibility matter under this section:
- (1) Sanctions for Behavior Involving Fraud, Theft, and Deception, approved by the Board and published on August 28, 2015, in the *Texas Register* and available on the Board's website at http://www.bon.state.tx.us/disciplinaryaction/dsp.html;
- (2) Sanctions for Behavior Involving Lying and Falsification, approved by the Board and published on August 28, 2015, in the *Texas Register* and available on the Board's website at http://www.bon.state.tx.us/disciplinaryaction/dsp.html;

- (3) 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; and
- (4) Sanctions for Substance Use Disorders and Other Alcohol and Drug Related Conduct, approved by the Board and published on August 28, 2015, in the *Texas Register* and available on the Board's website at http://www.bon.state.tx.us/disciplinaryaction/dsp.html.
- (l) If an individual seeking licensure by endorsement under §217.5 of this title or licensure by examination under §217.2 or §217.4 of this title should have had an eligibility issue addressed pursuant to the Occupations Code §301.257, the filed application will be treated and processed as a petition for declaratory order under this section, and the individual will be treated as a petitioner under this section and will be required to pay the non-refundable fee required by this section and §223.1 of this title (relating to Fees).
- (m) This section implements the requirements of the Occupations Code Chapter 53 Subchapter D and the Occupations Code §301.257.

Source Note: The provisions of this §213.30 adopted to be effective August 15, 2002, 27 TexReg 7107; amended to be effective May 17, 2004, 29 TexReg 4884; amended to be effective February 19, 2006, 31 TexReg 847; amended to be effective October 10, 2007, 32 TexReg 7058; amended to be effective July 2, 2008, 33 TexReg 5007; amended to be effective November 15, 2009, 34 TexReg 7812; amended to be effective July 12, 2010, 35 TexReg 6074; amended to be effective July 10, 2013, 38 TexReg 4342; amended to be effective October 29, 2015, 40 TexReg 7422

For Office Use Only: RN / LVN
Amount
Date Rec'd
Date App Expires

Texas Board of Nursing333 Guadalupe, Ste. 3-460, Austin, TX 78701-3944
Phone: 512-305-7400 -- Web Site: <u>www.bon.texas.gov</u>

FBI	HX: [] Yes[] No
Audit #:	

For Office Use Only:

Date Rec'd				Audit #:
Date App Expires	PETITION	N FOR DECLARATORY	ORDER	Staff Initials:
Last Name (Print):		First Name:		L
Middle Name (will appear on license):				
(Address)		(City)	(State/Country)	(Zip/Postal Code)
(E-Mail Address)			(Phone Number
()	Social Security Number	:		
Gender: [] Male	[] Female Ethnicity : [] Africa			•
[] No [] Yes	Are you enrolled, planning to	enroll, or have you graduate	ed from a nursing progr	am?
	Nursing program name:			
	Location of program:	City	State	
	Type of Nursing Program: (cire			
	Date of Enrollment:	Date of	Graduation:	
E C E F	 been convicted of a felon pled nolo contendere, no received deferred adjudic been placed on communi been sentenced to serve been granted pre-trial div been arrested or have an been cited or charged wit 	demeanor? ay? contest, or guilty? cation? ity supervision or court-ordered jail or prison time? court-orde version? by pending criminal charges? th any violation of the law? court-ordered that it is a second to be second to b	probation, whether or no red confinement?	
(<u>Y</u>	ou may only exclude Class C mis	sdemeanor traffic violations.)		
NOTE: Expunged disclosed, it is you recommended that application. Failure a disciplinary order TAC §213.27) NOTE: Orders of N an order of non-dist the subject of an order subject of an order discover the Board discover	and Sealed Offenses: While or responsibility to ensure the offer you submit a copy of the Court Court to reveal an offense, arrest, ticker and fine. Non-disclosure of relevance of the court of the cou	expunged or sealed offenses, ense, arrest, ticket or citation of the expunging or sealing the et, or citation that is not in fact want offenses raises questions of the expunding the expunding the expunsion of t	nas, in fact, been expund ecord in question to our dexpunged or sealed may related to truthfulness and ou have criminal matters on this form. However, a ssue. Pursuant to Gov't is the subject of an ordelosure, even if you proposed.	ged or sealed. It is office with your subject your license to d character. (See 22 that are the subject of criminal matter that is Code chapter 411, the ler of non-disclosure. If erly did not reveal that
Applicant's Signa	ture		Date:	

Petition for Declaratory Order

Applicant Name:	Social Security Number:	
2) [] No [] Yes	*Are you currently the target or subject of a grand jury or governmental agency investigation?	
3) []No []Yes	Has <u>any</u> licensing authority ever 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 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	
5) [] 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?	
*Pursuant to the Texas Occupations Code §301.207, information, including diagnosis and treatment, regarding an individual's physical or mental condition, intemperate use of drugs or alcohol, or chemical dependency and information regarding an individual's criminal history is confidential to the same extent that information collected as part of an investigation is confidential under the Texas Occupations Code §301.466. 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. NOTE: IF YOU ANSWER "YES" TO ANY QUESTION #1 - #5, YOU MUST PROVIDE A SIGNED AND DATED LETTER DESCRIBING THE INCIDENCE(S) THAT YOU ARE REPORTING TO THE BOARD, AS WELL AS SUPPORTING DOCUMENTATION. PLEASE REFER TO THE		
,	QUESTIONS INSTRUCTIONS FOR MORE INFORM	
ELIGIBIETT		
	Attestation/Consent to Release & Use of Confidential Records	
that I understand & n	didate whose name appears within this Application, acknowledge this document is a legal document and I attest neet all the requirements for the type of licensure requested, as listed in sections 301.252, 301.253, 301.452, d 304.001 of the Nursing Practice Act; 22 TAC §§ 213.27, 213.28, 213.29, 213.30, 213.33; 22 TAC §§ 217.11	
Further, I understand that it is a violation of the 22 TAC § 217.12 (6) (I) and the Penal Code, sec 37.10, to submit a false statement to a government agency; and I consent to release of confidential information to the Texas Board of Nursing and further authorize the Board to use and to release said information as needed for the evaluation and disposition of my application.		
	have any questions regarding this affidavit I should contact an attorney or the appropriate professional health liately notify the Board if at any time after signing this affidavit I no longer meet the eligibility requirements.	
Applicant's Signature	e:/ Date:/	

DEFINITIONS

Turpitude – Everything done contrary to justice, honesty, modesty or good morals, is said to be done with turpitude (www.lectlaw.com accessed 4/5/05)

Depravity – A corrupt or depraved or degenerate act or practice (<u>www.wordreference.com</u> accessed 4/5/05)

Base – Low, vile mean deserving of contempt because of the absence of higher values. (www.m-w.com accessed 4/5/05)

Vile – Morally despicable or abhorrent (www.m-w.com accessed 4/5/05)

Moral - of or relating to principles of right and wrong in behavior ($\underline{www.m-w.com}$ accessed 4/5/05)

CIMT CHECKLIST

This checklist is designed to provide a quick reference to the types of offenses which the Board of Nurse Examiners may find to be "Crimes Involving Moral Turpitude." This list is not exclusive.

Crimes Against The Person

Murder/Intentional Homicide

Voluntary Manslaughter

Homicide by Reckless Conduct

Involuntary Manslaughter w/ Reckless Disregard

Attempted Murder

Kidnapping Mayhem

Assault or Attempted Murder Upon Government Officers

Carrying a Concealed Weapon w/ Intent to Use Against the Person of Another

Assault w/ a Deadly Weapon

Assault w/ Weapon Likely to Produce Bodily Harm

Interfering w/ a Law Enforcement Officer

w/ Use of Deadly Force

Attempting to Obstruct/Impede the Progress

of Justice

Aggravated Assault Against a Peace Officer

Crimes Against Property

Attempted Arson

Blackmail/Extortion

Forgery

Uttering a Forged Instrument/Forged Prescription

Making False Statements of Financial Condition

Robbers'

Embezzlement

Larceny/Theft

Grand theft

Petty Theft

Receiving Stolen Property

Concealing Assets in Bankruptcy

Encumbering Mortgaged Property w/ Intent to Defraud

Fraudulently Issuing Check w/ Insufficient Funds

Fraudulently Issuing Worthless Check

Illegal use of ATM or Credit Card

Passing Forged Instrument

Attempted Fraud

Using Mails to Defraud

Making False Statements in Acquisition of Firearm

Securities Fraud

Welfare Fraud

Transporting Stolen Property

Obtaining Money by False Pretenses

Bribery

Malicious Trespass

Sexual and Family Crimes

Assault w/ Intent to Commit Abortion

Attempted Assault w/ Intent to Commit Carnal Abuse

Statutory Rape/Rape

Indecent Assault/Sexual Battery

Adultery

Bigamy

Prostitution

Sodomy

Gross Indecency

Contributing to the Delinquency of a Minor/Sexual Acts

Taking Indecent Liberties w/ a Child

Incest

Oral Sexual Perversion

Crimes Against the Government

Falsely Issuing a Narcotic Prescription

Offering a Bribe

Making, Passing, or Possessing Counterfeit Coins

Conspiracy to Violate IRS Laws

Securities Fraud

Counterfeiting

Smuggling Merchandise

Impersonating Federal Officer

False Statements/Firearm

False Statements or Entries

Harboring a Fugitive

Using False Names & Addresses to Violate Postal Laws

Uttering/Selling False/Counterfeit Immigration Documents

False Statements to Obtain a Passport

False Statements in LPR Application

Perjury

Theft from U.S. Mail

Taking Kickbacks

Receiving Funds by False Statements

Trafficking in Narcotics

Failing to Report Income

Union Official Unlawfully Accepting a Loan

Kickbacks on Government Contracts

False Statements/Selective Service

Falsely Representing Social Security Number

False Statements/Unemployment Benefits

Reviewed: Nov., 2007 Reviewed: August, 2008 Reviewed: August, 2009 Reviewed: June, 2012 Reviewed: August, 2014

Texas Administrative Code

TITLE 22 EXAMINING BOARDS

<u>PART 11</u> TEXAS BOARD OF NURSING <u>CHAPTER 213</u> PRACTICE AND PROCEDURE

RULE §213.28 Licensure of Individuals with Criminal History

- (a) Purpose and Applicability. This section establishes the criteria utilized by the Board in determining the effect of criminal history on nursing licensure and eligibility for nursing licensure and implements the requirements of Texas Occupations Code §53.025. This section applies to all individuals seeking to obtain or retain a license or multistate licensure privilege to practice nursing in Texas.
- (b) An individual is subject to denial of licensure or to disciplinary action for a conviction for, or placement on deferred adjudication community supervision or deferred disposition for, a felony that is directly related to the practice of nursing or for a misdemeanor involving moral turpitude that is directly related to the practice of nursing (collectively referred to as *crimes* hereafter). This section applies to crimes that have been adjudicated through agreement or judicial order by a state or federal criminal justice system, without re-litigation of the underlying factual basis for the agreement or judicial order.
- (c) The Board considers the crimes listed in the attached Criminal Guidelines (Guidelines) to be directly related to the practice of nursing. The Guidelines reflect the most common or well known crimes. The vast majority of an individual's criminal history that is reviewed by the Board will fall within the Guidelines. However, the Guidelines are not intended to be an exhaustive listing, and they do not prohibit the Board from considering an offense not specifically listed in the Guidelines. In matters involving an offense that is not specifically listed in the Guidelines, such as a violation of another state's law, federal law, or the Uniform Code of Military Justice, a determination shall be made by comparing that offense to the crime listed in the Guidelines that contains substantially similar elements. The offense must meet the requirements of subsection (b) of this section to be actionable.

Attached Graphic

- (d) The Board has determined that the crimes listed in the Guidelines in subsection (c) of this section are directly related to the practice of nursing for the following reasons.
- (1) Nursing is a unique profession. Nurses practice autonomously in a wide variety of settings and provide care to individuals who are, by virtue of their illness or injury, physically, emotionally, and financially vulnerable. These individuals include the elderly; children; individuals with mental disorders; sedated and anesthetized patients; individuals with mental or cognitive disorders; and disabled and immobilized individuals. Nurses that engage in criminal conduct potentially place patients, healthcare employers, and the public at future risk of harm.
- (2) Crimes involving fraud or theft. Nurses often have unfettered access to individuals' privileged information, financial information, and valuables, including medications, money, jewelry, credit cards/checkbook, and sentimental items. Nurses also provide around the clock care, working night and weekend shifts at hospitals, long term care facilities, nursing homes, assisted living facilities, and in home health and home-like settings, where there is often no direct supervision of the nurse. Patients in these settings are particularly vulnerable to the

unethical, deceitful, and illegal conduct of a nurse. When a nurse has engaged in criminal behavior involving fraud or theft in the past, the Board is mindful that similar misconduct may be repeated in these nursing settings, thereby placing patients, healthcare employers, and the public at risk.

- (3) Crimes involving sexual misconduct. Nurses also frequently provide care to partially clothed or fully undressed individuals, who are particularly vulnerable to exploitation. Due to the intimate nature of nursing care, professional boundaries in the nurse-patient relationship are extremely important. When a nurse has engaged in criminal behavior involving any type of sexual misconduct in the past, the Board is mindful that similar misconduct may be repeated in nursing settings. Such conduct may involve touching intimate body parts when the touch is not necessary for care, voyeurism, exposure of body parts when not necessary, and surreptitious touching. As such, the Board considers crimes involving any type of sexual misconduct to be highly relevant to an individual's ability to provide safe nursing care.
- (4) Crimes involving lying, falsification, and deception. Nurses are expected to accurately and honestly report and record information in a variety of sources, such as medical records, pharmacy records, billing records, nursing notes, and plans of care, as well as report errors in their own nursing practice. When a nurse has engaged in criminal behavior involving lying, falsification, or deceptive conduct, the Board is mindful that similar misconduct may be repeated in nursing settings, thereby placing patients, healthcare employers, and the public at risk.
- (5) Crimes involving drugs and alcohol.. Nurses have a duty to their patients to provide safe, effective nursing care and to be fit to practice. Nurses who have a substance use disorder may exhibit impairment in both cognitive and motor functioning. A nurse affected by a substance use disorder may be unable to accurately assess patients, make appropriate judgments, or intervene in a timely and appropriate manner. This danger may be heightened when the nurse works in an autonomous setting where other healthcare providers are not present to provide interventions for the patient. As such, the Board considers crimes related to the use or possession of drugs or alcohol to be highly relevant to a nurse's fitness to practice.
- (6) Crimes involving violence or threatening behavior. Nurses provide care to the most vulnerable of populations, including individuals who often have no voice of their own and cannot advocate for themselves. Further, patients are dependent on the nurse-patient relationship for their daily care. When a nurse has engaged in violent or threatening criminal behavior in the past, the Board is mindful that patients may be at risk for similar behavior in a healthcare setting. As such, the Board considers crimes involving violence and threatening behavior to be highly relevant to a nurse's fitness to practice.
- (e) The Board has considered the nature and seriousness of each of the crimes listed in the Guidelines in subsection (c) of this section, the relationship of the crime to the purposes for requiring a license to engage in nursing; the extent to which a license to practice nursing might offer an opportunity to engage in further criminal activity of the same type as that in which the individual previously was involved; and the relationship of the crime to the ability, capacity, or fitness required to perform the duties and discharge the responsibilities associated with the practice of nursing. The Board has determined that each crime listed in the Guidelines in subsection (c) of this section raises concerns about the propensity of the individual to repeat similar misconduct in the workplace, if provided the opportunity. The Board has also determined that similar misconduct in the workplace would place vulnerable individuals at risk of exploitation or victimization. As a result, if an individual has committed a crime listed in the Guidelines in subsection (c) of this section, the Board will evaluate that conduct to determine if

disciplinary action is warranted.

- (f) Additionally, a crime will be considered to be directly related to the practice of nursing if the act:
- (1) arose out of the practice of vocational, professional, or advanced practice nursing, as those terms are defined by the Nursing Practice Act (NPA);
- (2) involves a current or former patient;
- (3) arose out of the practice location of the nurse;
- (4) involves a healthcare professional with whom the nurse has had a professional relationship; or
- (5) constitutes a criminal violation of the NPA or another statute regulating another profession in the healing arts that also applies to the individual.
- (g) Sanction. Not all criminal conduct will result in a sanction. The Board recognizes that an individual may make a mistake, learn from it, and not repeat it in the nursing practice setting. As such, each case will be evaluated on its own merits to determine if a sanction is warranted. If multiple crimes are present in a single case, a more severe sanction may be considered by the Board pursuant to Texas Occupations Code §301.4531. If a sanction is warranted, the Board will utilize the schedule of sanctions set forth in §213.33(e) (relating to Factors Considered for Imposition of Penalties/Sanctions) of this chapter. At a minimum, an individual will be required to successfully complete the terms of his/her criminal probation and provide evidence of successful completion to the Board. If an individual's criminal behavior is due to, or associated with, a substance use disorder or a mental health condition, evidence of ongoing sobriety, effective clinical management, and/or appropriate ongoing treatment may be required. Further, if an individuals' criminal history implicates his/her current fitness to practice, the individual may also be required to meet the requirements of §213.29 to ensure he/she is safe to practice nursing. (h) Factors. The following factors will be considered when determining the appropriate sanction, if any, in eligibility and disciplinary matters involving criminal conduct:
- (1) the nature, seriousness, and extent of the individual's past criminal activity;
- (2) the age of the individual when the crime was committed;
- (3) the amount of time that has elapsed since the individual's last criminal activity;
- (4) the conduct and work activity of the individual before and after the criminal activity;
- (5) evidence of the individual's rehabilitation or rehabilitative effort while incarcerated or after release;
- (6) other evidence of the individual's fitness, including letters of recommendation from prosecutors and law enforcement and correctional officers who prosecuted, arrested, or had custodial responsibility for the individual; the sheriff or chief of police in the community where the individual resides; and any other individual in contact with the convicted individual;
- (7) a record of steady employment;
- (8) support of the individual's dependents;
- (9) a record of good conduct;
- (10) successful completion of probation/community supervision or early release from probation/community supervision;
- (11) payment of all outstanding court costs, supervision fees, fines, and restitution ordered;
- (12) the actual damages, physical or otherwise, resulting from the criminal activity;
- (13) the results of an evaluation performed pursuant to Texas Occupations Code §301.4521 and §213.33(k) and (l) of this chapter;
- (14) evidence of remorse and having learned from past mistakes;

- (15) evidence of current support structures that will prevent future criminal activity;
- (16) evidence of current ability to practice nursing in accordance with the NPA, Board rules, generally accepted standards of nursing; and other laws that affect nursing practice; and (17) any other matter that justice requires.
- (i) Evaluations. Pursuant to Texas Occupations Code §301.4521 and §213.33(k) and (l) of this chapter, the Board may request or require an individual to undergo an evaluation with a Board-approved evaluator to better determine whether the individual is safe to practice nursing and is able to comply with the NPA, Board rules, and generally accepted standards of nursing. If an individual's criminal behavior is due to, or associated with, a substance use disorder or a mental health condition, evidence of ongoing sobriety, effective clinical management, and/or appropriate ongoing treatment may also be required.
- (j) Youthful Indiscretions. Some criminal behavior may be deemed a youthful indiscretion under this paragraph. In that event, a sanction will not be imposed. The following criteria will be considered in making such a determination:
- (1) the offense was not classified as a felony;
- (2) absence of criminal plan or premeditation;
- (3) presence of peer pressure or other contributing influences;
- (4) absence of adult supervision or guidance;
- (5) evidence of immature thought process/judgment at the time of the activity;
- (6) evidence of remorse;
- (7) evidence of restitution to both victim and community;
- (8) evidence of current maturity and personal accountability;
- (9) absence of subsequent criminal conduct;
- (10) evidence of having learned from past mistakes;
- (11) evidence of current support structures that will prevent future criminal activity; and
- (12) evidence of current ability to practice nursing in accordance with the NPA, Board rules, generally accepted standards of nursing, and other laws that affect nursing practice. (k) Bars to Licensure.
- (1) Texas Occupations Code §301.4535. The Board is required under Texas Occupations Code §301.4535(b) to deny an individual initial licensure or licensure renewal and to revoke an individual's nursing license or privilege to practice nursing in Texas upon a final conviction or a plea of guilty or nolo contendere for a criminal offense specified in §301.4535(a). Further, an individual is not eligible for initial licensure or licensure endorsement in Texas or for licensure reinstatement before the fifth anniversary of the date the individual successfully completed and was dismissed from community supervision or parole for an offense specified in §301.4535(a).
- (2) Imprisonment. Pursuant to Texas Occupations Code §53.021(b), an individual's license or multistate licensure privilege to practice nursing in Texas will be revoked by operation of law upon the individual's imprisonment following a felony conviction, felony community supervision revocation, revocation of parole, or revocation of mandatory supervision.
- (l) Arrests. The fact that an individual has been arrested will not be used as grounds for sanction. If, however, evidence ascertained through the Board's own investigation from information contained in the arrest record regarding the underlying conduct suggests actions violating the NPA or Board rules, the Board may consider such evidence.
- (m) The Executive Director is authorized to close an eligibility file when the individual seeking licensure has failed to respond to a request for information, a proposed eligibility order, or denial of licensure within 60 days of the request for information, proposed eligibility order, or denial.

(n) Pursuant to the Nurse Licensure Compact, Texas Occupations Code §304.0015, Article III, (c)(7), an individual will not be eligible to hold a multistate licensure privilege if the individual has been convicted or found guilty, or has entered into an agreed disposition, of a felony offense under applicable state or federal criminal law. Further, pursuant to the Nurse Licensure Compact, Texas Occupations Code §304.0015, Article III, (c)(8), an individual will not be eligible to hold a multistate licensure privilege if the individual has been convicted or found guilty, or has entered into an agreed disposition, of a misdemeanor offense related to the practice of nursing, as determined on a case-by-case basis by the Board.

Source Note: The provisions of this §213.28 adopted to be effective February 25, 2018, 43 TexReg 867

Texas Administrative Code

TITLE 22 EXAMINING BOARDS

PART 11 TEXAS BOARD OF NURSING CHAPTER 213 PRACTICE AND PROCEDURE

RULE §213.29 Fitness to Practice

- (a) Each individual who seeks to practice nursing in Texas must possess current fitness to practice. This requirement includes all individuals seeking to obtain or retain a license or privilege to practice nursing in Texas and applies in all eligibility and disciplinary matters. Each individual has a duty to self-evaluate to ensure that he/she is fit to practice before providing nursing care.
- (b) An individual's fitness to practice will be determined by evaluating the individual's ability to consistently comply with the requirements of the Nursing Practice Act, the Board's rules and regulations, and generally accepted standards of nursing practice. An individual's fitness to practice may be subject to Board review due to an individual's substance use disorder; possession, abuse, or misuse of alcohol or drugs, prescribed or otherwise; or physical or mental health condition. This is not an exhaustive list. If an individual exhibits any conduct that may prevent him/her from practicing nursing with reasonable skill and safety, the Board will review the individual's conduct to determine if he/she possesses current fitness to practice.
- (c) Evaluations. If an individual exhibits conduct that raises questions about his/her fitness to practice, the Board may require the individual to undergo a physical and/or psychological evaluation that meets the criteria of the Occupations Code §301.4521 and §213.33 of this chapter (relating to Factors Considered for Imposition of Penal-ties/Sanctions). Pursuant to §301.4521, an individual subject to this rule is responsible for paying the costs of the evaluation. Utilizing the results of the evaluation and the individualized facts of the case, the Board may deny licensure (including renewal, reinstatement/reactivation, or the return to direct patient care from a limited license); suspend or revoke the individual's license or privilege to practice nursing in this state; or impose probationary conditions or restrictions on the individual's ability to practice nursing in this state.
- (d) Substance Use Disorders and Abuse/Misuse of Alcohol or Drugs.
- (1) Individuals who have been diagnosed, treated, or hospitalized for a substance use disorder that may impair their ability to practice nursing safely, will, at a minimum, be required to demonstrate sobriety and abstinence from drugs and alcohol for a minimum of twelve consecutive months, through verifiable and reliable evidence, in order to obtain or retain licensure. Verifiable and reliable evidence of sobriety and abstinence from drugs and alcohol may include evidence of the completion of inpatient, outpatient, or aftercare treatment, random drug screens, individual or group therapy, and/or support group attendance. Depending upon the individualized facts of each case, an individual may be required to establish this period of sobriety and abstinence prior to being permitted to practice nursing in this state. If appropriate, based upon the individualized facts of the case, an individual may also be eligible to obtain or retain licensure and practice nursing under an en-cumbered license with conditions/restrictions determined by the Board or through participation in a Board-approved peer assistance program created pursuant to the Texas Health and Safety Code Chapter 467 or other lawfully authorized peer assistance program. Licensure conditions/restrictions may include the completion of inpatient, outpatient, or aftercare treatment, random drug screens, individual or group therapy,

and/or support group attendance. The outcome of any particular case will be based upon an evaluation of the individualized factors of the case and the potential risk of harm the individual's practice may pose to patients/clients and/or the public.

- (2) Individuals who have not been diagnosed, treated, or hospitalized for a substance use disorder, but have nonetheless exhibited behaviors raising concerns about the individual's ability to practice nursing with reasonable skill and safety due to the possession, misuse, or abuse of alcohol or drugs, prescribed or otherwise, including related criminal conduct, may be required to demonstrate sobriety and abstinence from drugs and alcohol for a minimum of twelve consecutive months, through verifiable and reliable evidence, in order to obtain or retain licensure. Verifiable and reliable evidence of sobriety and abstinence from drugs and alcohol may include evidence of the completion of inpatient, outpatient, or aftercare treatment, random drug screens, individual or group therapy, and/or support group attendance. If appropriate, and depending upon the individualized facts of each case, an individual may be eligible to obtain or retain licensure and practice nursing under an encumbered license with conditions/restrictions determined by the Board, which may include the completion of inpatient, outpatient, or aftercare treatment, random drug screens, individual or group therapy, and/or support group attendance. The outcome of any particular case will be based upon an evaluation of the individualized factors of the case and the potential risk of harm the individual's practice may pose to patients/clients and/or the public.
- (3) An individual's prior substance use disorder diagnosis or history of prior criminal conduct involving drugs or alcohol, prescribed or otherwise; or misuse or abuse of alcohol or drugs, prescribed or otherwise; will be considered by the Board only to the extent that it may be indicative of the individual's current lack of fitness to practice nursing.
- (e) Mental Health Conditions and Diminished Capacity.
- (1) Individuals who have been diagnosed, treated, or hospitalized for a mental health condition that may impair their ability to practice nursing safely, will, at a minimum, be required to demonstrate controlled behavior and consistent compliance with recommended treatment, including compliance with a prescribed medication regime, for a reasonable amount of time, through verifiable and reliable evidence, in order to obtain or retain licensure. Depending upon the individualized facts of each case, an individual may be required to establish controlled behavior and compliance with recommended treatment, including compliance with a prescribed medication regime, prior to being permitted to practice nursing in this state. If appropriate, and depending upon the individualized facts of the case, an individual may also be eligible to obtain or retain licensure and practice nursing under an encumbered license with conditions/restrictions determined by the Board or through participation in a Board-approved peer assistance program created pursuant to the Texas Health and Safety Code Chapter 467. The outcome of any particular case will be based upon an evaluation of the individualized factors of the case and the potential risk of harm the individual's practice may pose to patients/clients and/or the public.
- (2) Individuals who have not been diagnosed, treated, or hospitalized for a mental health condition, but have nonetheless exhibited behaviors raising concerns about the individual's fitness to practice due to a mental health condition or diminished capacity may be required to demonstrate controlled behavior and compliance with recommended treatment, including compliance with a prescribed medication regime, for a reasonable amount of time, through verifiable and reliable evidence, in order to obtain or retain licensure. If appropriate, and depending upon the individualized facts of each case, an individual may also be eligible to obtain or retain licensure and practice nursing under an encumbered license with conditions/restrictions

determined by the Board. The outcome of any particular case will be based upon an evaluation of the individualized factors of the case and the potential risk of harm the individual's practice may pose to patients/clients and/or the public.

- (3) An individual's prior mental health diagnosis or behavioral history will be considered by the Board only to the extent that it may be indicative of the individual's current lack of fitness to practice nursing.
- (f) Other Medical Conditions.
- (1) The Board recognizes that individuals may have a variety of medical conditions that require medical treatment and/or a medication regime that includes prescription drugs. Although authorized by law and medically necessary, prescription drugs may affect an individual's fitness to practice. An individual must be able to function safely while under the effects of prescription drugs. An individual who abuses his/her prescription drugs or who has been unable to stabilize the synergistic effect of his/her medications may not possess current fitness to practice. Further, some prescription medications may cause side effects that affect an individual's fitness to practice, even when taken properly. In some cases, an individual's physical condition may prevent the individual from practicing nursing safely. In addition to an individual's medication regime, the Board will review an individual's behavior, diagnosis/condition, and treatment plan to determine if he/she possesses current fitness to practice. Based upon the individualized facts of the case, including the results of a required evaluation, if any, the Board may deny licensure (including renewal, reinstatement/reactivation, or the return to direct patient care from a limited license); suspend or revoke the individual's license or privilege to practice nursing in this state; or impose probationary conditions or restrictions on the individual's ability to practice nursing in this state, including limiting the practice setting to one in which the individual is safe to practice nursing.
- (2) An individual's prior medical condition and/or diagnosis will be considered by the Board only to the extent that it may be indicative of the individual's current lack of fitness to practice nursing.
- (g) Authority of Executive Director. In eligibility and disciplinary matters involving an individual's fitness to practice, the Executive Director may:
- (1) review information submitted by the individual and materials and information gathered or prepared by Board Staff; including evidence of the individual's safe practice, compliance with the Nursing Practice Act, Board rules and regulations, and generally accepted standards of nursing practice; verification of compliance with treatment; and evidence of sobriety;
- (2) identify any deficiencies in the information necessary for a determination regarding the individual's current fitness to practice;
- (3) close any eligibility file in which the individual seeking licensure has failed to respond to a request for information from the Board or to a proposal for denial of licensure within 60 days of the request or proposed denial, as applicable;
- (4) approve an individual's eligibility for licensure, enter eligibility orders as authorized in §211.7 (relating to Executive Director) of this title, and approve renewals, without Board ratification, when the evidence is clearly insufficient to support denial of licensure; and
- (5) propose eligibility and disciplinary orders in eligibility, disciplinary, and renewal matters consistent with the Board's rules and regulations and the interests of public safety and enter disciplinary orders as authorized in §211.7 of this title.
- (h) The following eligibility and disciplinary sanction policies, as applicable, shall be used by the Executive Director, SOAH, and the Board in evaluating the impact of criminal conduct on nurse

licensure in eligibility and disciplinary matters:

- (1) Sanctions for Behavior Involving Fraud, Theft, and Deception, approved by the Board and published on August 28, 2015, in the *Texas Register* and available on the Board's website at http://www.bon.state.tx.us/disciplinaryaction/dsp.html;
- (2) Sanctions for Behavior Involving Lying and Falsification, approved by the Board and published on August 28, 2015, in the *Texas Register* and available on the Board's website at http://www.bon.state.tx.us/disciplinaryaction/dsp.html;
- (3) 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; and
- (4) Sanctions for Substance Use Disorders and Other Alcohol and Drug Related Conduct, approved by the Board and published on August 28, 2015, in the *Texas Register* and available on the Board's website at http://www.bon.state.tx.us/disciplinaryaction/dsp.html.

Source Note: The provisions of this §213.29 adopted to be effective October 29, 2015, 40 TexReg 7416

CHAPTER 213

Texas Administrative Code

TITLE 22 EXAMINING BOARDS
PART 11 TEXAS BOARD OF NURSING

PRACTICE AND PROCEDURE

RULE §213.27 Good Professional Character

- (a) Every individual who seeks to practice nursing in Texas must have good professional character related to the practice of nursing. This requirement includes all individuals seeking to obtain or retain a license or privilege to practice nursing in Texas.
- (b) The Board defines good professional character as the integrated pattern of personal, academic, and occupational behaviors that indicate an individual is able to consistently conform his/her conduct to the requirements of the Nursing Practice Act, the Board's rules, and generally accepted standards of nursing practice. An individual who provides satisfactory evidence that he/she has not committed a violation of the Nursing Practice Act or a rule adopted by the Board is considered to have good professional character related to the practice of nursing.
- (c) A determination that an individual does not have good professional character related to the practice of nursing must be based on a showing by the Board of a clear and rational connection between a violation of the Nursing Practice Act or a rule adopted by the Board and the individual's ability to effectively practice nursing. When evaluating the rationale connection between the relevant conduct and the ability to effectively practice nursing, the Board will consider the following factors:
- (1) whether the individual will be able to practice nursing in an autonomous role with patients/clients, their families, significant others, healthcare professionals, and members of the public who are or who may become physically, emotionally, or financially vulnerable;
- (2) whether the individual will be able to recognize and honor the interpersonal boundaries appropriate to any therapeutic relationship or health care setting;
- (3) whether the individual will be able to make appropriate judgments and decisions that could affect patients/clients and/or the public;
- (4) whether the individual has exhibited an inability to conform his/her behavior to the requirements of the Nursing Practice Act, Board rules and regulations, including §217.11 (relating to Standards of Nursing Practice) and §217.12 (relating to Unprofessional Conduct) of this title, and generally accepted standards of nursing practice; and
- (5) whether the individual will be 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 and/or could protect patients/clients or the public from an unnecessary risk of harm.
- (d) Actions from Other Jurisdictions A certified copy of the order of the denial, suspension, or revocation or other action relating to an individual's license or privilege to practice nursing in another jurisdiction or under federal law is conclusive evidence of that action.

Source Note: The provisions of this §213.27 adopted to be effective October 29, 2015, 40 TexReg 7403; amended to be effective February 25, 2018, 43 TexReg 863

Texas Administrative Code

TITLE 22 EXAMINING BOARDS

PART 11 TEXAS BOARD OF NURSING

<u>CHAPTER 217</u> 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
 - (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 are 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

Texas Administrative Code

TITLE 22 EXAMINING BOARDS

PART 11 TEXAS BOARD OF NURSING

CHAPTER 217 LICENSURE, PEER ASSISTANCE AND PRACTICE

RULE §217.12 Unprofessional Conduct

The following 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 behaviors in the practice of nursing that are likely to deceive, defraud, or injure clients or the public. Actual injury to a client need not be established. These behaviors include but are not limited to:

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

offering sexual favors, or language or behavior suggestive of the same;

- (F) Threatening or violent behavior in the workplace;
- (G) Misappropriating, in connection with the practice of nursing, anything of value or benefit, including but not limited to, any property, real or personal of the client, employer, or any other person or entity, or failing to take precautions to prevent such misappropriation;
- (H) Providing information which was false, deceptive, or misleading in connection with the practice of nursing;
- (I) Failing to answer specific questions or providing false or misleading answers in a licensure or employment matter that could reasonably affect 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 Board.
- (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) 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.

Source Note: The provisions of this §217.12 adopted to be effective September 28, 2004, 29 TexReg 9192; amended to be effective February 25, 2018, 43 TexReg 1098

BOARD OF NURSING (BON) INFORMATION

Texas Administrative Code

TITLE 22 EXAMINING BOARDS

PART 11 TEXAS BOARD OF NURSING

CHAPTER 217 LICENSURE, PEER ASSISTANCE AND PRACTICE

RULE §217.2 Licensure by Examination for Graduates of Nursing Education

Programs Within the United States, its Territories, or Possessions

- (a) All applicants for initial licensure by examination shall:
- (1) file a complete application containing data required by the board attesting that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading, and the required application processing fee which is not refundable;
- (2) submit verification of completion of all requirements for graduation from an approved nursing education program, or certification from the nursing program director of completion of certificate/degree requirements. Prerequisites of an accredited master's degree program leading to a first degree in professional nursing must be approved by the board;
- (3) pass the NCLEX-PN (LVN applicant) or NCLEX-RN (RN applicant);
- (4) graduate from a Texas nursing program or a program with substantially equivalent education standards to a Texas approved nursing program as defined below.
- (A) A professional nursing education program operated in another state may be determined to have substantially equivalent education standards to a Texas approved nursing program if:
- (i) the program is approved by a state board of nursing or other governmental entity to offer a pre-licensure professional nursing program of study that awards a nursing diploma or degree upon completion;
- (ii) the program includes general education courses providing a sound foundation for nursing education for the level of preparation;
- (iii) the program's nursing courses include didactic content and supervised clinical learning experiences in medical-surgical, maternal/child health, pediatrics, geriatrics, and mental health nursing that teach students to use a systematic approach to clinical decision-making and safe patient care across the life span; and
- (iv) for baccalaureate degree nursing programs, nursing courses must also include didactic content and supervised clinical learning experiences, as appropriate, in community, research, and leadership.
- (B) A vocational nursing education program operated in another state may be determined to have substantially equivalent education standards to a Texas approved nursing program if:
- (i) the program is approved by a state board of nursing or other governmental entity to offer a pre-licensure vocational/practical nursing program of study that awards a vocational/practical nursing certificate, diploma, or degree upon completion;
- (ii) the program's nursing courses include didactic and supervised clinical learning experiences in medical-surgical, maternal/child health, pediatrics, geriatrics, and mental health nursing that teach students to use a systematic approach to clinical decision-making and safe patient care across the life span; and
- (iii) the program includes support courses providing a sound foundation for nursing education for the level of preparation.
- (C) A clinical competency assessment program shall be deemed substantially equivalent to a Texas approved nursing program while compliant with Tex. Occ. Code §301.157(d-8) and (d-9).

A clinical competency assessment program will be deemed to not be substantially equivalent to a Texas approved nursing program if the program fails to meet applicable requirements of Tex. Occ. Code §301.157(d-11) and (d-2).

- (D) If an applicant does not have substantially equivalent education under this paragraph, the applicant may become eligible for licensure if the applicant enrolls in an approved Texas program and completes the necessary educational requirements.
- (E) If an applicant for licensure as a registered nurse has completed a clinical competency assessment program which is deemed not to be substantially equivalent to Board standards for Texas programs, the Board may issue a provisional license to the applicant once the applicant has passed the National Council Licensure Examination for Registered Nurses (NCLEX-RN® Examination). The applicant will be eligible for full licensure if the applicant completes the requirements of clause (i) or (ii) below:
- (i) The applicant completes 500 hours of clinical practice under the direct supervision of an approved preceptor. The applicant, prior to beginning practice, must submit the name and license number of a potential preceptor for Board approval. After completion of 500 hours of clinical practice under direct supervision of the approved preceptor and the preceptor's signature that the applicant is competent and safe to practice nursing, the applicant may be eligible for full licensure.
- (ii) The applicant completes an educational program at an approved Texas program which is designed to assess and improve clinical skills for applicants who have not completed supervised clinical experiences in their prior educational program. The applicant must seek and receive the Board's approval prior to entering into the program to ensure that the program will allow the applicant may be eligible for full licensure. The applicant must provide the Board evidence of completion of the approved program.
- (5) submit FBI fingerprint cards provided by the Board for a complete criminal background check; and
- (6) pass the jurisprudence exam approved by the board, effective September 1, 2008.
- (b) Should it be ascertained from the application filed, or from other sources, that the applicant should have had an eligibility issue determined by way of a petition for declaratory order pursuant to the Occupations Code §301.257, then the application will be treated and processed as a petition for declaratory order under §213.30 of this title (relating to Declaratory Order of Eligibility for Licensure), and the applicant will be treated as a petitioner under that section and will be required to pay the non-refundable fee required by that section.
- (c) An applicant for initial licensure by examination shall pass the NCLEX-PN or NCLEX-RN within four years of completion of requirements for graduation.
- (d) An applicant who has not passed the NCLEX-PN or NCLEX-RN within four years from the date of completion of requirements for graduation must complete a board approved nursing education program in order to take or retake the examination.
- (e) Upon initial licensure by examination, the license is issued for a period ranging from six months to 29 months depending on the birth month. Licensees born in even-numbered years shall renew their license in even-numbered years; licensees born in odd-numbered years shall renew their licenses in odd-numbered years.
- (f) The U.S. Army Practical Nurse Course (formerly the 91C Clinical Specialist Course) is the only military program acceptable for vocational nurse licensure by examination.

Source Note: The provisions of this §217.2 adopted to be effective September 1, 1999, 24 TexReg 4001; amended to be effective July 14, 2003, 28 TexReg 5532; amended to be effective September 28, 2004, 29 TexReg 9189; amended to be effective April 16, 2006, 31 TexReg 3031; amended to be effective September 26, 2007, 32 TexReg 6519; amended to be effective May 14, 2009, 34 TexReg 2767; amended to be effective July 12, 2010, 35 TexReg 6083; amended to be effective February 28, 2018, 43 TexReg 1096; amended to be effective May 8, 2018, 43 TexReg 2779

Texas Administrative Code

TITLE 22 EXAMINING BOARDS
PART 11 TEXAS BOARD OF NURSING

CHAPTER 217 LICENSURE, PEER ASSISTANCE AND PRACTICE

RULE §217.3 Temporary Authorization to Practice/Temporary Permit

(a) A new graduate who completes an accredited basic nursing education program within the United States, its Territories or Possessions and who applies for initial licensure by examination in Texas may be temporarily authorized to practice nursing as a graduate nurse (GN) or graduate vocational nurse (GVN) pending the results of the licensing examination.

- (1) In order to receive temporary authorization to practice as a GN or GVN and obtain a Permit, the new graduate must:
- (A) file a completed application, including verification of completion of graduation requirements and the non-refundable application processing fee (see §217.2(a)(1)-(2) of this title relating to Licensure by Examination for Graduates of Basic Nursing Education Programs Within the United States, its Territories or Possessions);
- (B) have no outstanding eligibility issues (see §213.30 of this title (relating to Declaratory Order of Eligibility for Licensure), and Texas Occupations Code §301.257);
- (C) have never taken the NCLEX-PN or NCLEX-RN. Temporary authorization to practice as a GN will not be issued to any applicant who has previously failed the licensing examination; and
- (D) have registered to take the NCLEX-PN or NCLEX-RN with the examination administration service.
- (2) The temporary authorization to practice as a GN or GVN, which is not renewable, is valid for 75 days from the date of eligibility, receipt of permanent license, or upon receipt of a notice of failing the examination from the Board, whichever date is the earliest. The GN or GVN must immediately inform employers of receipt of notification of failing the examination and cease nursing practice.
- (3) The new graduate who has been authorized to practice nursing as a GN or GVN pending the results of the licensing examination must work under the direct supervision of either a licensed vocational or a registered professional nurse if a GVN or a registered professional nurse only if a GN, who is physically present in the facility or practice setting and who is readily available to the GN or GVN for consultation and assistance. If the facility is organized into multiple units that are geographically distanced from each other, then the supervising nurse must be working on the same unit to which the GN or GVN is assigned. The GN or GVN shall not be placed in supervisory or charge positions and shall not work in independent practice settings.
- (4) The nurse administrator of facilities that employ Graduate Nurses or Graduate Vocational Nurses must ensure that the GN or GVN has a valid temporary authorization to practice as a GN or GVN pending the results of the licensing examination, has scheduled a date to take the NCLEX-PN or NCLEX-RN , and does not continue to practice after expiration of the 75 days of eligibility or receipt of a notice of failing the examination from the Board, whichever date is earlier.
- (b) A nurse who has not practiced nursing for four or more years may be issued a temporary permit for the limited purpose of completing a refresher course, extensive orientation to the practice of professional or vocational nursing, whichever is applicable, or academic course. The

permit is valid for six months and is nonrenewable.

(c) A nurse whose license has been suspended, revoked, or surrendered through action by the board, may be issued a temporary permit for the limited purpose of meeting any requirement(s) imposed by the board in order for the nurse's license to be reissued. The permit is valid for six months and is nonrenewable.

Source Note: The provisions of this §217.3 adopted to be effective September 1, 1999, 24 TexReg 4001; amended to be effective July 5, 2004, 29 TexReg 6296

Texas Administrative Code

TITLE 22 EXAMINING BOARDS

PART 11 TEXAS BOARD OF NURSING

<u>CHAPTER 217</u> LICENSURE, PEER ASSISTANCE AND PRACTICE

RULE §217.5 Temporary License and Endorsement

- (a) A nurse who has practiced nursing in another state within the four years immediately preceding a request for temporary licensure and/or permanent licensure by endorsement may obtain a non-renewable temporary license, which is valid for 120 days, and/or a permanent license for endorsement by meeting the following requirements:
- (1) Graduation from an approved nursing education program;
- (2) Satisfactory completion of the licensure examination according to Board established minimum passing scores:
 - (A) Vocational Nurse Licensure Examination:
 - (i) Prior to April 1982--a score of 350 on the SBTPE;
 - (ii) Beginning October 1982 to September 1988--a score of 350 on the NCLEX-PN; and
 - (iii) October 1988 and after, must have achieved a passing report on the NCLEX-PN; and
 - (B) Registered Nurse Licensure Examination:
 - (i) Prior to July 1982--a score of 350 on each of the five parts of the SBTPE;
 - (ii) Prior to February 1989--a minimum score of 1600 on the NCLEX-RN; and
 - (iii) February 1989 and after, must have achieved a passing report on the NCLEX-RN;
- (3) Licensure by another U.S. jurisdiction;
- (4) For an applicant who has graduated from a nursing education program outside of the United States or National Council jurisdictions--verification of LVN licensure as required in §217.4(a)(1) of this chapter or verification of RN licensure must be submitted from the country of education or as evidenced in a Credential Evaluation Service (CES) Full Education Course-by-Course Report from the Commission on Graduates of Foreign Nursing Schools (CGFNS), Educational Records Evaluation Service (ERES), or the International Education Research Foundation (IERF), as well as meeting all other requirements in paragraphs (2) and (3) of this subsection;
- (5) Filing a completed "Application for Temporary License/Endorsement" containing:
- (A) personal identification and verification of required information in paragraphs (1) (3) of this subsection; and
- (B) attestation that the applicant meets current Texas licensure requirements and has never had disciplinary action taken by any licensing authority or jurisdiction in which the applicant holds, or has held licensure and attestation that all information contained in, or referenced by, the application is complete and accurate and is not false or misleading;
- (6) the required application processing licensure fee, which is not refundable;
- (7) submitting fingerprints for a complete criminal background check; and
- (8) a passing score on the jurisprudence exam approved by the Board, effective September 1, 2008.
- (b) A nurse who has not practiced nursing in another state within the four years immediately preceding a request for temporary licensure and/or permanent licensure by endorsement will be required to:

- (1) complete a refresher course, extensive orientation to the practice of nursing, or a nursing program of study that meets the requirements prescribed by the Board. The nurse must submit an Application for Six Month Temporary Permit (RN) or an Application for Six Month Temporary Permit (LVN), as applicable, to the Board for the limited purpose of completing a refresher course, extensive orientation to the practice of nursing, or a nursing program of study;
- (2) submit to the Board evidence of the successful completion of the requirements of paragraph (1) of this subsection;
- (3) submit to the Board a course completion form from one of the following:
- (A) the online Texas Board of Nursing Jurisprudence Prep Course;
- (B) the Texas Board of Nursing Jurisprudence and Ethics Workshop; or
- (C) a Texas Board of Nursing approved Nursing Jurisprudence and Ethics course; and
- (4) after completing the requirements of paragraphs (1) (3) of this subsection, submit to the Board verification of the completion of the requirements of subsection (a)(1) (8) of this section.
- (c) The Board adopts by reference the following forms, which comprise the instructions and requirements for a refresher course, extensive orientation to the practice of nursing, and a nursing program of study required by this section, and which are available at http://www.bon.state.tx.us/olv/forms.html:
- (1) Application for Six Month Temporary Permit (RN); and
- (2) Application for Six Month Temporary Permit (LVN).
- (d) A nurse who has had disciplinary action at any time by any licensing authority is not eligible for temporary licensure until completion of the eligibility determination.
- (e) Upon initial licensure by endorsement, the license is issued for a period ranging from six months to 29 months depending on the birth month. Licensees born in even-numbered years shall renew their licenses in even-numbered years; licensees born in odd-numbered years shall renew their licenses in odd-numbered years.
- (f) Should it be ascertained from the application filed, or from other sources, that the applicant should have had an eligibility issue determined by way of a petition for declaratory order pursuant to the Occupations Code §301.257, then the application will be treated and processed as a petition for declaratory order under §213.30 of this title (relating to Declaratory Order of Eligibility for Licensure), and the applicant will be treated as a petitioner under that section and will be required to pay the non-refundable fee required by that section.

Source Note: The provisions of this §217.5 adopted to be effective September 1, 1999, 24 TexReg 4001; amended to be effective September 28, 2004, 29 TexReg 9189; amended to be effective April 16, 2006, 31 TexReg 3031; amended to be effective September 26, 2007, 32 TexReg 6519; amended to be effective July 12, 2010, 35 TexReg 6083; amended to be effective July 26, 2011, 36 TexReg 4660

MISCELLANEOUS INFORMATION

HEALTH CAREERS PROCEDURE

Title of Procedure:

STUDENT EMPLOYMENT OR VOLUNTEER WORK

The Nursing Program supports the mandatory Nursing Practice Act of the State of Texas and is committed to excellence in nursing by nurse's appropriately prepared for the services they are rendering. Therefore, the position of the Nursing Program regarding undergraduate nursing students (who are unlicensed in the State of Texas either as Registered Professional Nurse's or as Licensed Vocational Nurse) accepting employment in hospitals or health agencies, is as follows:

- 1. It is recommended that a student combined employment and semester-hour load not exceed 40 contact hours per week in either long-session or summer terms.
- 2. Undergraduate nursing students who accept positions for which they receive compensation for client care, do so as unlicensed individuals and will not wear the school uniform, laboratory coat with insignia or other indications of their student status, inasmuch as they are not functioning as nursing students but as paid employees.
- 3. Students are advised to familiarize themselves with the State of Texas Nursing Practice Act so that they will recognize the full scope and responsibility of nursing as being more than just a collection of skills. Nursing students who accept a position for a pay as a nurses aide, nursing assistant or nurse tech must recognize that they may be held legally liable for their actions and therefore, should not accept responsibilities nor perform nursing interventions beyond their knowledge and skills, nor those within the responsibilities of the professional nurse as defined in the Nursing Practice Act and the Rules on Delegation of Nursing Duties.
- 4. The student is responsible for maintaining the required grade point average and should consider the demands of full or part-time employment upon the student's time and energies.
- 5. The professional practice insurance that is connected with the clinical course **only covers students while in their student role and will not cover students in an employee position**
- 6. Students should be aware that: (1) El Paso Community College assume no responsibility for their activities as volunteers or employees of agencies; (2) they are personally responsible and liable for any activity in which they participate while employed, or as a volunteer; (3) professional liability insurance purchased by students through EPCC is valid only in their student role, not their employment or volunteer role; (4) in nursing, individuals who practice illegally may jeopardize their futures, since persons who are convicted of crimes may not be eligible to take their licensure or certification exam.

- 7. Students who are employed or volunteer in agencies have a personal and professional responsibility to engage only in those activities that fall within their job descriptions as nonprofessional workers (i.e., aides, techs). They have a responsibility to refuse to participate in activities that they have not been legally licensed to do (i.e., giving medications, planning care, assuming total responsibility for a team or unit, etc.).
- 8. Students who are employed or working as a volunteer should seek information regarding liability coverage, laws governing volunteers, etc., from their employer(s).

Revised: August, 1999 Reviewed: October, 2002 Reviewed February, 2004 Reviewed July, 2005 Reviewed: Nov., 2007 Reviewed: August, 2008

Reviewed: Reviewed: August, 2009

Reviewed: June, 2012 Reviewed: August, 2014

STUDENT FORMS

INSTRUCTOR

STUDENT ACKNOWLEDGMENT

Student printed name	
Student Signature	ID#
Date	

POLICY FOR SOCIAL MEDIA AND NETWORKING

Students in the Associate Degree Nursing Program and the Vocational Nursing Program at El Paso Community College are expected to adhere to the high standards of the Nursing profession with regard to maintaining confidentiality. This not only includes guarding patient confidentiality at a clinical site, but also in the classroom, at home and on-line. Social Media is web-based technology used to communicate with others. The following guidelines are for behavior involved with cell phone use, FACEBOOK, Twitter, Myspace, Instagram, Blogs, Video Sharing (e.g., YouTube), Collaborative websites, Message Boards, Podcasts and any other social networking site. Many of you already have such sites established and are eager to use them to convey what you are learning and doing while in these programs. You may continue to use those sites, but with these cautions:

- It is your responsibility to keep your site appropriate and your profile clean.
- Do not post threats or derogatory remarks about anyone associated with the Associate Degree Nursing program and the Vocational Nursing program. This includes fellow students, faculty, staff, college administrators, clinical affiliates and, above all, patients. This is a violation of the EPCC Board Policy, you will be reported to the police and disciplinary action taken. Dismissal is possible for this violation from class(es), Nursing program and/or the college.
- Any photos posted of yourself must be made <u>out of uniform</u>, make no reference to EPCC, the Associate Degree Nursing program, the Vocational Nursing program or clinical affiliates, and will not include any illegal activity. Posting photos of other students, faculty, staff, clinical affiliates, patients, etc., is forbidden.
- Cell phone use in the classroom and at the clinical site is forbidden. Unless given permission by the affiliate security/police, if cell phones are discovered they will be confiscated for the remainder of the class or clinical day.
- Smart watches, Apple Watches, or watches linked to the internet are NOT allowed in the classroom during testing.
- No cameras of any kind are allowed in the classroom or at clinical.
- Instances of inappropriate use of social and electronic media may be reported to the Texas Board of Nursing (BON).

My signature acknowledges I have been informed of the Social Media and Networking Policy for the Associate Degree Nursing Program and the Vocational Nursing Program at El Paso Community College.

Student printed name	Date		
Student Signature	Student ID Number		

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EL PASO COMMUNITY COLLEGE NURSING PROGRAMS PATIENT CONFIDENTIALITY

- 1. All information learned during a patient care experience or from patient records is completely confidential. (Exceptions: instructors and agency staff members may be notified of all confidential matters.)
- 2. No comment should be made about the patient that could be taken as negative or critical. Such comments could easily be taken very personally by the patient or friends if overheard. The attitude taken about the patient and the treatment should always be in the best interest of the patient.

CONFIDENTIALITY AGREEMENT

I understand and agree that in the performance of my duties as a student in (course/program), I must hold patient information in
confidence. Further, I understand and agree that intentional or voluntary violation of the patient's confidentiality may result in refusal by the health care facility to allow me to participate in patient care. Violating patient confidentiality may place the patient in emotional jeopardy, one form of unsafe clinical practice, and may result in failure to meet course objectives.
DATE:
COURSE:
NAME:
(Please Print Legibly)
SIGNATURE:
STUDENT NUMBER:
SCHOOLE MAIL ADDRESS:

PERSONAL E-MAIL ADDRESS:

This page must be returned to the Program Coordinator Or Course Responsible Instructor

EL PASO COMMUNITY COLLEGE NURSING PROGRAM--RELEASE OF INFORMATION

PURPOSE:	Under the Family Educational Rights and Privacy Act of 1974, permission is needed to release information.
EXPLANATION	Developing clinical rotation schedules for students enrolled in <u>Nursing</u> courses is necessary. The information is given on an 'as needed basis' to:
	 Discipline faculty and staff (as needed) Clinical affiliates Classmates (within the rotation)
	4. Program use (accreditation reports, for graduation, etc.)
	ed by faculty at El Paso Community College and the clinical affiliates for placement of students in cilities/clinical areas. The schedules are also to notify students of messages received, especially in sies.
	, give my permission for El Paso Community to the healthcare facilities/clinical areas the following information that is relevant. The infidential and released only on an as needed basis.
	information that is needed by the healthcare facilities/clinical areas for a student to attend clinical tis at times required by accrediting agencies or other entities.
c. TB skin test re e. telephone num g. address (home i. references for a k. participation in	ber (home and/or cell) f. telephone (work)
If you do not agr	ee to the release of this information, please list the ones you do not want released below.
Healthcare facili patient care. The	e this information may result in non-admittance to healthcare facilities/clinical affiliates. ties and Clinical affiliates require some or all of this information of students providing information is confidential and released only on an as needed basis. e this information may result in a processing delay of data required by the healthcare affiliates.
Student Signatur	e: Date:
Printed name:	Student ID number
School email	personal email

Course/ Semester (required): _____