

ALVIN COMMUNITY
COLLEGE
ASSOCIATE DEGREE
NURSING

STUDENT HANDBOOK
Associate Degree Nursing

July 2011



ALVIN COMMUNITY COLLEGE 3110 Mustang Road Alvin, Texas 77511-4898

Associate Degree Nursing
281-756-5630 Office
281-756-5606 Fax
sdurand@alvincollege.edu

Dear ADN Student:

Welcome! The faculty and I congratulate you on your acceptance to the Alvin Community College Associate Degree Nursing Program. We are proud of our tradition of graduating well-prepared, highly skilled nurses and look forward to including you among our many alumni.

We recognize the hard work and effort that it has taken for you to reach this point; however, your work has just begun. During the program you will be challenged both physically and intellectually. You will find that attaining a nursing education demands both time and energy.

Hopefully, this handbook will make your life a bit easier by providing a source of information on policies, procedures, and other areas that apply specifically to the nursing program. Please read it carefully. After reading, sign the Student Agreement/Release of Information Form and return it to the ADN office.

Good luck to you as you begin the journey to your career in nursing!

Sincerely,

A handwritten signature in cursive script that reads 'Sally Durand'.

Sally Durand, MSN, RN
Director- Associate Degree Nursing

ADN MISSION

The Alvin Community College Associate Degree Nursing Program strives to be a leader in the education of associate degree nurses in the Gulf Coast region.

Students are recruited and selected from the population at large, based on their potential to apply previously learned knowledge regarding concepts and principles of humanities, and biological and social sciences. Nursing educators are committed to guiding students and participating closely with students as mentors and role models.

Courses are presented according to their content and effectiveness toward successful fulfillment of state board competencies. Through testing, evaluation, and counseling, students are able to make informed decisions regarding experiences needed to fulfill program goals. Program courses are designed in collaboration with the dynamic needs of the health care delivery system and institutions of higher learning.

The program seeks to prepare graduates who are critical thinkers and competent practitioners. As ADN graduates, they will practice within the defined roles and competencies of the AD nurse. In response to community and societal needs, they will be prepared to care for individuals and families in structured settings.

PHILOSOPHY

We the faculty believe that the Associate Degree Nursing Program is an integral part of Alvin Community College and, as such, embraces the philosophy and mission of the parent institution. We believe that community needs for competent associate degree nursing can be met through quality education provided by this college.

We believe that nursing is a caring relationship built on a broad knowledge base, which is drawn from nursing and other disciplines. This relationship contributes to optimal health or a dignified death for the client. Nursing, as a profession, evolved to assist individuals and families when they cannot meet their own health needs. Thus, nursing has a responsibility to society to promote, maintain, and restore health and serve as an advocate for clients and their families throughout the lifespan.

The knowledge base for nursing originates from content centered within the four concepts of society, client/family, health and nursing roles. They provide the foundation for the selection and sequence of courses and learning experiences as well as an understanding of the organization of the program. Content in the nursing courses integrates current knowledge of concepts of health and acute and chronic health alterations with focus on commonly occurring health problems. Progression through the nursing courses encourages assimilation of knowledge and creates a progressive program of learning. To ensure that the curriculum is consistent with current evidenced-based nursing practice and knowledge, evaluation of the program is ongoing. We further believe that nursing is an applied science, which incorporates knowledge of concepts and principles of the humanities and biological and social sciences. Therefore, these courses provide a rational basis for pre and co requisites support courses for the nursing curriculum.

We believe that learning is an individualized and lifelong process, which is the responsibility of the learner with the faculty serving as facilitators. We further believe that learning is an active process which provides opportunities for students to acquire the knowledge, attitudes, and competencies necessary for practice. The faculty plans, implements, and evaluates learning experiences which provide the student with opportunities to acquire the necessary cognitive, psychomotor, and affective skills to progress from the simple to the complex.

The curriculum is designed to focus on clients and families in structured health care settings. These settings may be within the structure of an acute care hospital or an alternative health care facility. The roles of the nurse encompass three areas: provider of care, coordinator of care and member of profession. Within these roles, the scope and practice of the associate degree nursing is defined. Throughout the curriculum students are provided experiences which prepare them to care for clients and families with common, well-defined health problems and to practice both dependent and independent nursing functions in a variety of settings.

Professional nursing practice is based in a dynamic and ever changing environment which is characterized by critical thinking and decision making. As providers of care, nurses integrate concepts and principles of the humanities and behavioral, biological, and social sciences. The nursing process is an integral part of this role. The professional nurse utilizes the nursing process to assess both the internal and external environment, plan, implement, and evaluate the nursing care in response to the needs of clients and families in a variety of settings. As coordinator of care, nurses collaborate with clients, families and other health care team members to plan, implement and evaluate care and teaching plans for individuals so multiple clients and their families either through direct care or delegation to other members of the health care team.

We believe that nurses, as members of a profession, assume accountability and responsibility for the practice of nursing. Today's nurses practice in an ever changing society which combines the rich history of nursing with new and expanding roles. It is incumbent upon the nurse to be aware of societal forces and their present and future impact on nursing and health care. As client and family advocates, collaboration with health care team members is an essential part of the professional role.

Graduates of this program are expected to practice within limits of their nursing knowledge and experience as well as the ethical and legal standards of the nursing profession. In addition, they are expected to serve as positive role models for other members of the health team. It is their responsibility to participate in educational and professional endeavors which will advance knowledge and skills and promote the development of nursing and nursing practice.

3/80 Philosophy

Reviewed: 11/82, 10/83, 9/87, 9/91, 9/01, 5/10

Revised: 10/81, 10/82, 11/85, 11/87, 2/94, 3/97, 4/03; 1/08

DEFINITIONS

Advocate: One who pleads the cause of another. As client advocates, nurses provide clients and families information needed to make an informed decision and support them in their decision. Advocacy involves accepting and respecting the client's right to decide even if the nurse does not agree with this decision. This process fosters individual accountability thus empowering clients to assume responsibility for their health.

Client: Individual recipient of care across the lifespan in consideration of diversity of background. This includes the individual and the family.

Coordinator of Care: One who organizes and facilitates the delivery of comprehensive services to clients using other provider's services, human and material resources, and collaboration with clients, their support services, and a variety of providers.

Critical Thinking: The process of examining underlying assumptions about current evidence and interpreting and evaluating data for the purpose of reaching a conclusion from a new perspective. Nurses use critical thinking to make reliable observations, draw sound conclusions, create new information and ideas, evaluate rationales and improve self-knowledge.

Delegation: RN authorization of an unlicensed person to provide nursing services while the RN retains accountability for the outcome. It does not include situations in which an unlicensed person is directly assisting a RN by carrying out nursing tasks in the presence of a RN.

Dependent Nursing Functions: Those activities carried out on the order of the physician, under the physician's supervision, or according to specific routines.

Families: Two or more people who may share a residence, who possess common emotional bonds and perform/engage in interrelated social positions, roles and tasks. Within society, the family is the basic unit and plays an important role in forming the health beliefs and practices of its members. It is recognized that, in today's society, many types of families exist.

Health: A relative state in which the client is able to function within the environment in terms of physical, mental, social, and spiritual ability in order to achieve full potential. It is the individual's unique optimal level of wellness determined by his/her ability to meet basic needs. It is a dynamic process which exists on a continuum from optimal health to illness and family, to death. Clients move within this continuum through the life cycle.

Independent Nursing Functions: An activity that the nurse is licensed to initiate as a result of the nurse's own knowledge and skills.

Learning: An individualized process which results in a change of behavior. It is on-going throughout the life-span and cannot be solely accounted for by growth. It involves the acquisition of skills, knowledge, attitudes and values and results in a change of behavior, reorganization of thinking or the capacity for making changes. Students are viewed as adult learners, thus, the teaching methods utilized by faculty incorporate principles of adult learning theory.

Member of Profession: Someone who accepts responsibility for the quality of nursing care for clients; applies research findings and identification of further research; is aware of legislated, regulatory, ethical, and professional standards; aspires to improve the discipline of nursing and its contribution to society; and values the need for life-long learning.

Nursing Process: A client-centered framework through which nurses use their knowledge and skills to help clients and families meet their health needs. Its five components – assessment, analysis, planning, implementation and evaluation are cyclic and dynamic, thus allowing a response to changing client needs. The steps in the nursing process provide for the integration and application of knowledge from nursing and other disciplines. Students develop critical thinking skills and learn how to organize, synthesize, and evaluate pertinent data.

Provider of Care: One who provides nursing care to clients using a systematic process of assessment, analysis, planning, intervention, and evaluation.

Society: A community, nation, or broad grouping of people having common traditions, institutions, collective activities, and interest, and organized patterns of relationships through interacting with one another. These elements may include, but are not limited to, cultural beliefs and values, political and economic trends and advancing technologies.

Structured Settings: A geographical and/or situational environment where the policies, procedures and protocols for the provision of health care are established and in which there is recourse to assistance and support from the full scope of nursing expertise.

Reviewed 5/10

Revised 4/3/03

Organizing Framework

The organizing framework of the Associate Degree Nursing Program is based on the program's mission and philosophy: to equip future nurses with the tools they need to succeed providing care for individuals and families in structured settings.

The curriculum and field experiences cover these four key concepts: society, client/family relations, health and nursing. In addition to these areas of concentration, the student is given the chance to explore the three functions of a nurse: provider of care, coordinator of care and member of a profession. The first year of the program is a time for the students to familiarize themselves with these concepts. The second year of the program allows the student to delve deeper and understand the complexities and intricacies of the concepts.

Society

The impact of society is integrated at varying degrees throughout the program. The concept of society in nursing includes cultural beliefs and values, political and economic trends and advancing technologies. These impact health care, clients and the practice of nursing. A nurse who understands society's effect on a client's life and behaviors can better serve that client.

At first the student is introduced to the topics with a general overview. Each proceeding course explores these topics further as they are integrated into all areas of study. The students research and critically analyze these topics in depth during the Management course and the Legal-Ethical course as students formally presents their findings to their peers.

Client/Family

A client is a part of a family and plays an important role, whether it be as a mother, father, grandparent or child. This relationship affects the way to care for the client. This program acknowledges that the client is not the only one affected by the nurse's actions.

The first year focuses on understanding the interdependence between client and family. Family can affect the client's ability to adapt to internal and external environmental stressors. The students are given the tools to individually assess the client and family. These assessments allow the nurse to provide the best level of care. The second year gives the student a chance to make clinical decisions for individuals in acute and rapidly changing conditions.

Health

Health is a relative state in which the client is able to function within the environment in order to achieve full potential. This is a dynamic process. It is the nurse's job to be a promoter of good health practices. Students teach clients about ways to maximize health.

In the first year, the students are introduced to the concepts of health, health promotion, health education, levels of care, risk factors and desired outcomes. Chronic conditions are examined in the second semester. The second year provides the students the chance to apply this knowledge when caring for clients with differing alterations in health. The students are also given the tools to use advanced critical thinking and clinical decision making skills to care for clients with acute illness. Students study health teaching, which culminates in the development of presentations about health promotion or related topics.

Nursing

Nursing is a dynamic ever-changing profession. The nurse is responsible for a multitude of duties. The nurse performs three key roles: provider of care, coordinator of care and member of a profession. These are integrated throughout the coursework.

Provider of Care

In the role of provider of care, students implement their knowledge of the nursing process, along with communication and critical thinking skills. These skills provide a basis for clinical decision making

and evidenced-based practice within a legal-ethical framework. The students are given the tools to care for clients with varying levels of health.

In the first year, students care for an individual client with stable health. This progresses in the subsequent year to caring for multiple clients and acutely ill adults and children. These more complex assignments require the student to exhibit high level decision-making skills.

Coordinator of Care

In the role of coordinator of care the student coordinates resources for the health care of clients. The student collaborates with the client and interdisciplinary team for the provision of health care. The student provides care and locates the proper health care professionals to provide further, more specialized care. The student functions as a part of the organizational framework of varied health care settings.

The first course allows the students to familiarize themselves with this role. They learn their responsibilities as a coordinator of care. In subsequent courses, students are given the opportunity for hands-on practice. In the second year, the students study this role more in depth as they practice it in the clinical setting.

Member of a Profession

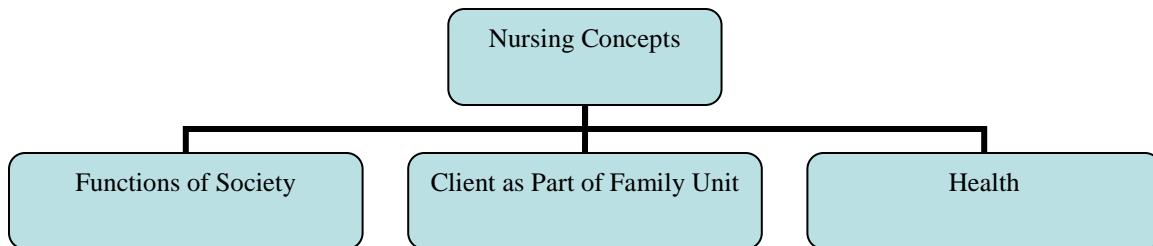
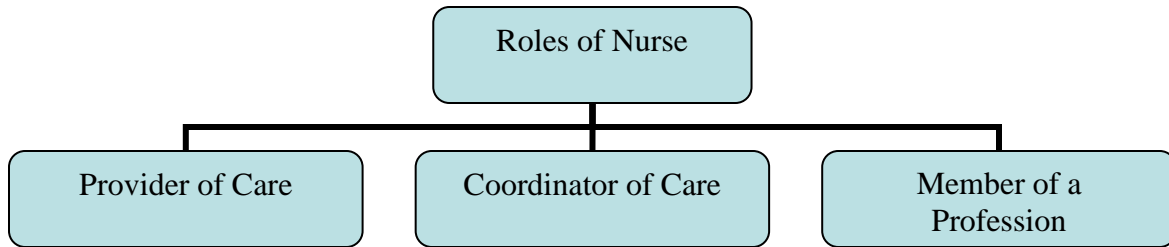
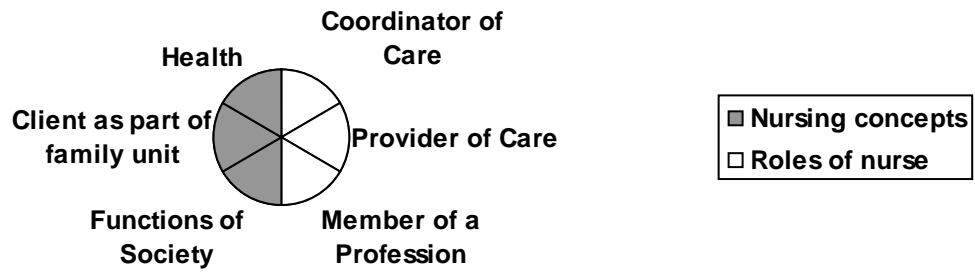
As a member of a profession, the nurse assumes accountability and responsibility for the quality of nursing care provided to the client. The nurse acts as an advocate to promote quality care. The nurse actively participates in activities that promote the development and practice of nursing.

During the first year, students become aware of their responsibilities as a member of the nursing profession. In the second year, the students explore the intricacies of the role of a nurse. To further the feeling of being part of the nursing profession, the students are encouraged to join professional organizations.

With a combination of classroom instruction, clinical simulation, and practical field experiences, the nursing student is provided a wealth of knowledge and opportunities for real-world application of that knowledge. The student will graduate from this program with a greater understanding of the concepts of: society, client/family relations, health and nursing. The student will also gain greater understanding of their roles as: provider of care, coordinator of care and as a member of the nursing profession-at large. The student will be equipped to work within the defined roles and competencies of the Associate Degree Nursing in an array of structured health care settings.

Approved 5/3/05

Reviewed 5/10



Approved 5/3/05
Reviewed 5/10

EDUCATIONAL OBJECTIVES
ASSOCIATE DEGREE NURSING COMPETENCIES

The competencies are written for nursing programs to meet the approval criteria established by the Board of Nurse Examiners for the State of Texas. These are essential competencies for the graduate of Alvin Community College Associate Degree Nursing Program.

A. Provider of Care

1. Determine the health status and health needs of clients (individual and family) based upon interpretation of health data and preventative health practices in collaboration with clients (individual and family) and interdisciplinary health care team members.
2. Formulate goals/outcomes and plan of care based on nursing diagnoses in collaboration with clients (individual and family) and interdisciplinary health care members.
3. Implement the plan of care within legal and ethical parameters, including scope of practice, in collaboration with the client (individual and family) and other interdisciplinary health care team to assist client (individual and family) in meeting health care needs.
4. Develop and implement teaching plans for clients (individual and family) concerning promotion, maintenance, and restoration of health.
5. Evaluate clients' (individual and family) responses and outcomes to therapeutic interventions.
6. Provide for the care of multiple clients (individual and family) either through direct care or assignment and/or delegation of care to other members of the health care team.
7. Use critical thinking approach to analyze clinical data and current literature as a basis for decision-making in nursing practice.

B. Coordinator of Care

1. Coordinate human and material resources for the provision of care for clients (individual and family).
2. Collaborate with clients (individual and family) and the interdisciplinary health care team for the planning and delivery of care.
3. Refer clients (individual and family) to resources that facilitate continuity of care.
4. Function within the organizational framework of various health care settings.

C. Member of a Profession

1. Assume accountability and responsibility for the quality of nursing care provided to clients (individual and family).
2. Act as an advocate to promote the provision of quality health care for clients (individual and family).
3. Participate in activities that promote the development and practice of nursing.

Reviewed 5/10

Revised 4/03

SCANS

The Secretary's commission on Achieving Necessary Skills (SCANS) was developed by the U.S. Department of Labor. These are the foundation skills and workplace competencies required in today's workplace. Within the Associate Degree Nursing Program, these skills will be incorporated throughout the curriculum.

COMPETENCIES

Resources

1. Allocates Time – Selects relevant, goal-related activities, ranks them in order of importance, allocates time to activities, and understands, prepares, and follows schedules.
2. Allocates Money – Uses or prepares budgets, including making cost and revenue forecasts, keeps detailed records to track budget performance, and makes appropriate adjustments.
3. Allocates Material and Facility Resources – Acquires, stores, and distributes materials, supplies, parts, equipment, space, or final products in order to make the best use of them.
4. Allocates Human Resources – Assesses knowledge and skills and distributes work accordingly, evaluates performance and provides feedback.

Information

5. Acquires and Evaluates Information – Identifies need for data, obtains them from existing sources or creates them, and evaluates their relevance and accuracy.
6. Organizes and Maintains Information – Organizes, processes, and maintains written or computerized records and other forms of information in a systemic fashion.
7. Interprets and Communicates Information – Selects and analyzes information and communicates the results to others using oral, written, graphic, pictorial, or multi-media methods.
8. Uses Computers to Process Information – Employs computers to acquire, organize, analyze, and communicate information

Interpersonal

9. Participates as a Member of a Team – Works cooperatively with others and contributes to group with ideas, suggestions, and effort.
10. Teaches Others – Helps others learn.
11. Serves Clients/Customers – Works and communicates with clients and customers to satisfy their expectations.
12. Exercises Leadership – Communicates thoughts, feelings, and ideas to justify a position; and encourages persuades, convinces, or otherwise motivates an individual or group, including responsibly challenging existing procedures, policies, or authority.
13. Negotiates – Works toward an agreement that may involve exchanging specific resources or resolving divergent interests.
14. Works with Cultural Diversity – Works well with men and women, and with a variety of ethnic, social or educational backgrounds.

Systems

15. Understand Systems – Knows how social, organizational, and technological systems work and operates effectively within them.
16. Monitors and Corrects Performance – Distinguishes trends, predicts impact of actions on system operations, diagnoses deviations in the function of a system/organization, and takes necessary action to correct performance.
17. Improves and Designs Systems – Makes suggestions to modify existing systems to improve products or services, and develops new or alternative systems.

Technology

18. Selects Technology – Judges which set of procedures, tools, or machines, including computers and their programs, will produce the desired results.
19. Applies Technology to Tasks – Understands the overall intent and the proper procedures for setting up and operating machines, including computers and their programming systems.
20. Maintains and Troubleshoots Technology – Prevents, identifies, or solves problems in machines, computers, and other technologies.

Nursing Degree Program

281-756-5630

Degree: Associate in Applied Science (A.A.S.)

Length: Two Year Program

Purpose: The program seeks to prepare graduates who are critical thinkers and competent practitioners. As Associate Degree Nursing (ADN) graduates, they will practice within the defined roles and competencies of the Associate Degree nurse. In response to community and societal needs, they will be prepared to care for individuals and families in structured settings. Courses are presented according to their content and effectiveness toward successful fulfillment of state board competencies.

At the successful completion of a minimum of two (2) academic years and all program requirements, the graduate is qualified to make application to write the National Council Licensure Exam for Registered Nurses (NCLEX-RN).

The program is approved by the Texas Board of Nursing (BON) and accredited by the National League for Nursing Accrediting Commission (NLNAC). The mission of the BON is to protect and promote the welfare of the people of Texas by ensuring that each person holding a license as a nurse in the State of Texas is competent to practice safely. The NLNAC is recognized by the U.S. Department of Education as the national accrediting body for all types of nursing education programs.

Texas Board of Nursing (BON)
333 Guadalupe #3-460
Austin, TX 78701
512-305-7400
www.bon.state.tx.us

NLNAC
3343 Peachtree Road NE, Suite 500
Atlanta, GA 30326
404-975-5000
www.nlnac.org

A person who has been convicted of or received deferred adjudication for anything other than a minor traffic violation, has been diagnosed with mental illness, or has a history of substance abuse, should contact the Texas Board of Nursing for licensure eligibility criteria. Individuals with felonies are ineligible for admission to the the ADN Program.

Admission Requirements:

A new class begins each fall and spring semester. Application periods are from January until March for fall admission and September to mid-October for spring admission. Applications are available from the ADN department or www.alvincollege.edu during the application period. Qualified applicants are admitted according to space available. To be considered for admission to the Associate Degree Nursing (ADN) Program, the applicant must:

1. Be fully admitted to Alvin Community College.
2. Submit an ADN application to the ADN department during the application period.
3. Submit, at the time of application, proof to the ADN department of having met the following minimum admission standards:
 - a. Combined English and Reading score of 38 or higher on the ACT or 460 on the Critical Reading section of the SAT test. No exemptions. Scores must be from tests administered no earlier than 1996.
 - b. TSI (Texas Success Initiative) requirement satisfied as determined by ACC's testing and placement policies. Transfer students must meet the transfer institution's TSI requirements if not enrolled at ACC.
 - c. Cumulative GPA of 2.5 or better in nursing and nursing curriculum courses.
 - d. The Hepatitis B series must at least be started upon application. Series must be completed by the start date of the program.
4. Attend one of the mandatory ADN Applicant meetings discussing specific program policies and requirements held during the application period.
5. Submit to both the ADN office and ACC Registrar's office official transcripts from all colleges/universities attended. No academic course with a grade below C is accepted for transfer credit in the ADN program. Academic courses include composition/written communication, social/behavioral/biological sciences, humanities, and visual/performing arts.
6. Complete BIOL 2401, BIOL 2402 and ENGL 1301 prior to start of the 2 year ADN program or BIOL 2401, BIOL 2402, BIOL 2420, ENGL 1301, PSYC 2301, and PSYC 2314 prior the start of the LVN-ADN transition program.
7. Students are ineligible for admission if at the time of application transcripts reflect more than one (1) D or F in a nursing or nursing curriculum science course (BIOL 2401, 2402, and 2420) taken in the past five years. The student is ineligible even if the course is repeated and the student earns an A, B, or C in the subsequent attempt.

Selection for Admission

Admission to the program is competitive. Ranking criteria include the number of required courses completed in the ADN curriculum plan, GPA in those courses, and standardized test reading scores (ACT- English and Reading or SAT- Critical Reading). Additional consideration is given to applicants who 1) completed coursework without repeating courses within the last five years, 2) completed curriculum coursework at ACC, 3) earned a Bachelors or higher degree from an accredited college or university, 4) reside in the College district.

Program information:

1. BIOL 2401, 2402, and 2420 must be taken within five years at the time of application. Courses completed more than five years prior to the time the student is accepted must be repeated or the student may demonstrate competency through a written examination. Contact the ADN department for information about the examination.
2. Requirements to be completed after initial acceptance and before the start of the program include:
 - a. Satisfactory criminal background check as determined by the requirements of clinical affiliates and by the eligibility criteria established by the BON. A person with a criminal history may be eligible to be considered for admission if 1) the ADN clinical affiliates permit the person to practice in their agency and 2) the Texas Board of Nursing indicates in a letter that a "Declaratory Order" was received and the individual is eligible to apply to take the licensure examination. The BON website, www.bon.state.tx.us, contains eligibility questions and the petition for the declaratory order. Individuals with felonies are ineligible for admission to the Alvin ADN program.
 - b. CPR Certification American Heart Association class "C" for Health Care Providers
 - c. Physical examination (form provided by the department)
 - d. Up-to-date immunizations as required by the Texas Department of Health (measles, mumps, rubella, tetanus, diphtheria, pertussus, varicella, hepatitis "B" series of 3 immunizations)

- e. Negative tuberculin screen (yearly)
 - f. Negative drug test.
 - g. Purchase of a school uniform and lab supplies
 - h. Purchase of an I-pod touch or smart phone if the student does not have one already. The device enables access to medical and nursing information when the student is at clinical sites.
3. Each student is required to pay for standardized, computerized tests that are administered throughout the program.
 4. Students attend various clinical sites in the Houston/Galveston region throughout the program. Clinical times/days vary each semester and include weekend and evening hours.

Transfer of Nursing Credits:

1. Courses accepted for transfer must be similar in content and credit to the ACC course(s).
2. No grade below a "B" in any nursing course is accepted for transfer.
3. Students must demonstrate competency through an examination in nursing content for courses without a clinical component that were completed more than three (3) years prior to the time of application..
4. Transfer applicants who, in the last 3 years, were enrolled in a professional nursing program and attempted/completed nursing course(s) with clinical component(s), must:
 - a. meet the criteria for admission to the ADN program at ACC;
 - b. have a written recommendation from the Dean/Director of their previous nursing program;
 - c. demonstrate competency in previously completed nursing courses prior to admission through a written examination and a clinical skills competency demonstration. The tests will be administered once per semester and evaluated by a faculty review committee. Contact the department for test dates.

Readmission of Former ACC ADN Students:

A student not enrolled in a nursing course for one (1) or more semesters (excluding summer), for any reason, is termed a withdrawal from the ADN Program and must apply for readmission.

1. A student who has withdrawn from the ADN program and wishes to re-enter must submit a new application at least eight (8) weeks prior to the requested date of readmission. Students wishing to re-enter the first semester must reapply during the program application period in the spring and be ranked with that applicant pool.
2. Evidence of competency in previously completed nursing courses will be required prior to readmission. This will be accomplished through an examination and a clinical skills competency demonstration. Tests will be administered once per semester and evaluated by a faculty review committee. Contact the department for test dates.
3. Re-entering students must abide by the current admission, curriculum and program requirements of the department.
4. Students are readmitted on a space available basis.
5. Following a second (2nd) withdrawal from the program, a student will not be readmitted. Students may petition for re-admission when a withdrawal occurs because of a catastrophic event. The student must have had a passing grade in the RNSG course at the time of withdrawal. Petition will be considered by a faculty review committee.
6. The department reserves the right to deny readmission to a student who discontinued the program due to academic dishonesty or exhibited unsafe and/or unprofessional behavior in clinical. The decision to deny or accept readmission will be made by a faculty review committee.
7. Students who are unsuccessful in the ADN program and subsequently complete a vocational nursing program are eligible to apply to the LVN-ADN Transition track. Eligibility penalties for the "D's, F's or W's" earned in nursing courses while previously enrolled in the ADN. program are eliminated for these students.

Progression Policies:

1. Students will abide by the current ADN admission, curriculum and program requirements at the time they are admitted or readmitted to the Associate Degree Nursing Program.
2. Once a student has enrolled in the ADN Program, all nursing courses and related courses must be completed in proper sequence as shown in the catalog and degree plan. The program must be completed within five (5) years of the initial acceptance.
3. No grade below a C in nursing curriculum science and nursing courses will be acceptable for progression.
4. In order to receive a grade of C, a minimum grade of 75% must be attained in each nursing course.
5. Once enrolled in the ADN program, a student who receives a D, F, or W in a nursing course or drops a nursing course, must, if eligible, re-enroll in that course before enrolling in a subsequent nursing course.
6. A student who withdraws from a nursing course with a related clinical component must withdraw from the corresponding course.
7. A student who receives a grade of D or F in a nursing course with a related clinical component will be assigned the grade of "R" in the corresponding course. The student must, if eligible, re-enroll in both the theory and clinical sections of that course. Each semester's co-requisite RNSG courses must be completed with a minimum grade of C in order to progress.
8. A student must achieve an overall GPA of 2.0 in all courses in the nursing curriculum in order to progress to the next nursing course.
9. Once enrolled in the ADN program, it is expected that enrollment is continuous. Students with a break in enrollment must apply for readmission. A break in enrollment includes: 1) Receipt of a grade of D, F, or W in a nursing course requiring a repeat of the course, 2) Withdrawal from a nursing course with a clinical component, and 3) Non-enrollment in a nursing course for one (1) or more semesters (excluding summer).
10. A student will be readmitted only once to the program. Following a second D, F, or break in enrollment during the program, a student is ineligible for readmission. Students may petition for re-admission when a withdrawal from an RNSG course occurs due to a catastrophic event. The student must have had a passing grade in the RNSG course at the time of withdrawal. Petition will be considered by a faculty review committee.
11. Consideration for readmission will be on an individual basis and as space permits. A student not enrolled in a nursing course for one or more semesters (excluding summer) will be required to demonstrate competency in previously completed nursing courses prior to readmission. Refer to section "Readmission of Former ACC/ADN Students".
12. A student will be terminated from the ADN Program if they have received more than one (1) D or F in a nursing course, and/or in BIOL 2401, BIOL 2402 and/or BIOL 2420. This includes courses which have been repeated and a passing grade (A, B or C) received in a subsequent attempt, regardless of the college or university where the initial grade (D or F) was received. The student is ineligible even if the course is repeated and the student earns an A, B, or C in the subsequent attempt.
13. Co-Requisite courses must be completed for a student to progress to the next semester.

Associate in Applied Science Nursing Degree Program

281-756-5630

Nursing - ADN

Course Number	Course Title	Lecture Hours	Lab Hours	Credits
Prerequisite Courses				
ENGL 1301	Composition I	3	0	3
BIOL 2401	Anatomy & Physiology I	3	3	4
BIOL 2402	Anatomy & Physiology II	<u>3</u>	<u>3</u>	<u>4</u>
		9	6	11
Semester One				
RNSG 1215*	Health Assessment	1	2	2
RNSG 1108*	Dosage Calculations for Nursing	1	0	1
RNSG 1513	Foundations for Nursing Practice	4	3	5
RNSG 1260	Clinical: Foundations for Nursing Practice	0	6	2
PSYC 2314*	Life-Span Growth & Development	<u>3</u>	<u>0</u>	<u>3</u>
		9	11	13
Semester Two				
RNSG 1441	Common Concepts of Adult Health	3	2	4
RNSG 1561	Clinical: Common Concepts of Adult Health	0	15	5
PSYC 2301*	General Psychology	<u>3</u>	<u>0</u>	<u>3</u>
		6	17	12
Summer ***				
BIOL 2420*	Microbiology	3	3	4
RNSG 2213	Mental Health Nursing	2	0	2
RNSG 1162	Clinical: Mental Health Nursing	<u>0</u>	<u>3</u>	<u>1</u>
		5	6	7
Semester Three				
RNSG 1512**	Nursing Care of Childbearing & Childrearing Family	4	2	5
RNSG 2121	Management of Client Care			
RNSG 2463**	Clinical: Nursing Care of Childbearing & Childrearing Family	1	0	1
		0	12	4
Elective*	Visual and Performing Arts / Humanities	<u>3</u>	<u>0</u>	<u>3</u>
		8	14	13
Semester Four				
RNSG 1246	Legal and Ethical Issues for Nurses	2	0	2
RNSG 1443**	Complex Concepts of Adult Health	3	2	4
RNSG 2563**	Clinical: Complex Concepts of Adult Health	0	15	5
ENGL 1302*	Composition II	<u>3</u>	<u>0</u>	<u>3</u>
		8	17	14

Total Credits Required for A.A.S. Nursing70

* May be taken prior to admission to the ADN program.

** RNSG 1443 / 2563 and RNSG 1512 / 2463 are taught both Fall and Spring semesters. Students may be assigned to 1443 / 2563 in either the Fall or Spring semester.

*** Summer courses are taken after semester one for spring admits.

**ALVIN COMMUNITY COLLEGE
ASSOCIATE DEGREE NURSING
APPROXIMATE COST for ADN PROGRAM**

Semester	RNSG Credit Hours	ACC Tuition		ACC Fees	Course Fees	Required Texts	Additional Expenses <i>see below</i>	In/Out of District Totals	
		In-district	Out-of-district					In-district	Out-of-district
1st Fall	10	400	800	193	244	624	580	2,041	2,441
2nd Spring	9	360	720	188	138	135		821	1,181
3rd Summer	3	120	240	158	48	55		381	501
4th Fall	10	400	800	193	163	109	889	1,754	2,154
5th Spring	11	440	880	198	143	225		1,006	1,446
TOTAL	43	\$1,720	\$3,440	\$930	\$736	\$1,148	\$1,469	\$6,003	\$7,723

*Costs are approximate and subject to change without notice
Credit hours for nursing courses only (courses starting with "RNSG")
Approximate costs for required nursing texts only; recommended nursing texts are extra*

ADDITIONAL EXPENSES

Beginning of Program	
Uniform (varies by size and gender)	70.00
Nurse Pack	104.98
Supplies-(Stethoscope, Scissors, etc)	90.00
ANSA dues	10.00
Criminal Background Check	49.50
Apple iTouch or Smart Phone	216.00
Drug Screen	39.50
Subtotal	\$579.98
Last Semester	
Licensure Application- Texas BON	139.00
Pictures for Licensure	25.00
Alvin A.D.N. Pin	35.00
NCLEX-RN Registration	200.00
Lamp for Pinning Ceremony	25.00
Diploma Fee	35.00
Graduation Cap and Gown	30.00
NCLEX-RN Review Course	400.00
Subtotal	\$889.00
TOTAL	\$1,468.98

COSTS ARE APPROXIMATE AND SUBJECT TO CHANGE WITHOUT NOTICE

CURRICULUM DESCRIPTION

The aim of the Associate Degree Nursing Program is to prepare the graduate to give direct patient care as a member of the health team in hospitals and other structured health care facilities. The program includes a background in general education and competencies related to patient care. The graduate is prepared to function in structured patient care settings.

The curriculum requirements for the ADN Program consists academic courses and nursing courses. Nursing content and clinical/laboratory experiences are sequenced and taught over a period of four (4) long and one (1) summer semesters. The nursing courses are planned and taught by the Associate Degree Nursing Faculty.

NURSING COURSE COMPONENTS

Nursing courses have a theoretical component (classroom) and may have a laboratory component. The major nursing courses each have a clinical co-requisite course. Theoretical content focuses on information essential for the safe, effective delivery of nursing care. The clinical component provides the student the opportunity to apply theoretical content in client care settings. In order to be successful in the program students are expected to spend 2-3 hours preparation time for each hour spent in class or clinical.

Each course has unique aspects as well as common concepts. These unique aspects will vary depending upon the objectives of each course, the focus upon specific categories of clients and their needs and the clinical settings utilized. For each course, a Syllabus and a Student Information Plan (SIP) will be available. The faculty will facilitate the learning experiences via lecture/discussion, audiovisual materials, selected clinical/laboratory experiences, computer simulations, etc. Each student is expected to read the syllabus and the SIP, complete the assignments, and request clarification when necessary. It is the student's responsibility to learn the required competencies and to seek help when needed.

THEORY

The theory portion of each course will generally require a minimum of four (4) classroom hours/week. Each course has a coordinator who has overall responsibility for the course. Courses may be taught by either a single instructor or by a team of two or more instructors. The student is responsible for being present and on time and for preparing adequately for each class by reading all assigned materials prior to class.

CLINICAL

Students attend various clinical sites in the Houston/Galveston region throughout the program. Clinical times/days vary each semester and include evening and weekend hours. Clinical courses provide the opportunity to apply knowledge and skills. Each course generally requires one (1) to two (2) clinical laboratory sessions per week or the equivalent. The number of clinical laboratory hours per week will vary from course to course (6 – 16 hours/week.)The clinical instructor is responsible for making patient assignments, supervising students, conducting pre and post-conferences, being available for assistance, and evaluating student's performance. The clinical instructor serves as a professional role model, and as the liaison between the college and the hospital. The student is responsible for being present, punctual, and properly attired. The student is to carry out the assigned responsibilities to the best of his/her ability and to seek assistance when needed. Each student is expected to be familiar with hospital policy in the assigned agency. Orientation to each hospital is provided. Students are to be in the clinical agency only during their designated clinical hours, or by permission of the instructor/agency.

SKILLS LABORATORY

Skills laboratories are located in Rooms S-128 and S-160 in the Health Science Building. They are designed to provide the practice setting and experience needed for clinical competency. Selected units of study in the curriculum may have a skills component as a part of the clinical evaluation. Students may be required to attend assigned skills sessions while enrolled in nursing courses. Absence from an assigned skills lab session will be considered a clinical absence.

COMPUTER LAB

Two computer labs are located in the Health Science Building. It is equipped with student workstations. Students have access to various nursing simulations and tutorials via the lab network. In addition, PC applications and the Internet are available on the campus network. The computer lab is for the use of nursing students only. It is to be used solely for computer applications and not as a study room. Food and beverages in the lab are prohibited. The hours during which the lab is open are posted.

FACULTY OFFICE HOURS

Each faculty member is available to the student for conference, counseling, etc., during specified hours. Office hours are posted by each instructor's door.

GRADING SYSTEM

Nursing courses in the ADN Program are planned to include both classroom and clinical participation. Each of these courses has an evaluation component. The grade for the theory portion of the course will be determined primarily by scores on tests and written work. In most nursing courses, a test grade average of 75 or above must be achieved to pass a course. Evaluation methods will be described in the SIP for each nursing course. Clinical courses may include practice in the hospital, community agencies and in the skills lab on campus.

Clinical performance is evaluated by the student's individual clinical instructor. A letter grade will be given for the clinical component. Clinical evaluation methods will be described in the SIP for each nursing course. At the discretion of the clinical instructor, a student may be dropped from a course if the student cannot demonstrate ability to consistently deliver safe care at the level required in that course. This action may be taken at any time during the semester.

An ADN student is required to satisfactorily complete both theory and clinical courses in order to progress. In the event that either the final grade of theory or clinical is below the established passing criteria, the student will receive a course grade of D or F and not be allowed to progress to the next nursing course. If eligible, the student may make application to reenter the program. If accepted, the student will be required to repeat both theory and clinical portions of the course.

GRADING SCALE

90 – 100 = A
80 – 89 = B
75 – 79 = C
60 – 74 = D
Below 60 = F

Grades will not be rounded up, i.e., a 74.7 is not a 75!

TEST POLICY

1. The ACC Academic Integrity Policy is enforced.
2. Unit objectives from the syllabi provide a blueprint as a study-guide for testing.
3. Personal items must be placed in a designated area.
4. No electronic devices are permitted in the testing area. All cell phones and pagers must be turned off.
5. If absent for the exam, the student must notify the instructor prior to the exam. The student is responsible for scheduling a makeup exam to be taken on or before the next scheduled class day. The makeup exam will be an alternative format that may include essay questions.
6. Grades will be released within a reasonable amount of time after the exam.
7. Students scoring lower than 75% on an exam must schedule an appointment with the instructor to review the exam and create a plan of remediation utilizing the Academic Conference sheet. (see below)
8. If a scantron is used for scoring, the scantron is the official scoring tool.
9. Formats vary for testing. Additional information regarding these formats can be found in the course syllabus.

ACADEMIC CONFERENCE

NAME: _____

DATE: _____

TEST GRADE: _____

Hours work per week: _____

Hours study per week: _____

Interruptions to study: _____

Methods used prepare for the test: _____

Attitude toward testing _____

Reasons you think you did poorly _____

Recommendations: _____

Faculty Signature: _____

Student Signature: _____

ATI EXAMINATIONS

At the completion of each semester, comprehensive specialty standardized exams are administered. Students scoring minimum scores on the exams are awarded additional course points added to their examination grade as designated in course SIPs/Syllabi. In addition to the specialty exams, during the final semester of the Program, each student will take an exit exam. The results of the exit exam are utilized during academic advising for all graduates.

ATTENDANCE

Students are expected to attend all scheduled theory classes, clinicals and assigned skills labs. The student is responsible for all material presented during an absence. Since clinical assignments may be made prior to the student's arrival in the hospital, it is essential that the clinical instructor be notified of a student's expected absence before the scheduled starting time of the clinical experience. Specific instructions regarding the procedure for notifying the instructor will be outlined in the Student Information Plan (SIP) for each course or by the individual clinical instructor. Policies regarding clinical absences are outlined in the Student Information Plan (SIP) for each course. Employed students must schedule work around their classroom, lab and clinical schedule so that they are able to attend scheduled classes. The nursing courses are very demanding. Students should expect to spend a minimum of 40 hours a week in classes and studying.

STUDENT WITHDRAWAL

Associate Degree Nursing adheres to the withdrawal policy of the college. It is recommended that a student talk to the instructor before withdrawing. The procedure begins in the Admissions and Academic Advising Office. *Student CAN NOT drop classes online – WebACCess does not process course withdrawals once registration has ended.* The student must take the form to the Financial Aid and Registrar's Office by the published deadline. Failure to withdraw in writing will result in a failing grade.

If the student cannot withdraw in person, a request may be mailed to the Office of Admissions Academic Advising or faxed to 281-756-3843. Include name, social security number or student ID, course number(s), phone number where you can be reached and signature. Confirm receipt of the faxed withdrawal at 281-756-3531. Students who reduce their semester hours may jeopardize their insurance coverage, Financial Aid, Veterans benefits or enrollment in other courses.

GRADES FOR WITHDRAWALS

Courses dropped on or before the census date each semester are not recorded on the student's transcript. Course withdrawals received in the Records Office after the census date and before the withdrawal deadline for each semester are recorded on the student's transcript with a grade of W.

FINANCIAL AID

Several departmental scholarships are available to qualified associate degree nursing students each fall and spring. To be eligible, the student must have completed twelve (12) college-level credit-hours at Alvin Community College, be enrolled in a minimum of eight (8) credit-hours and have a cumulative minimum GPA (grade point average) of 3.0. Application is made through the ADN office. A list of available scholarships and applications are on the website at http://www.alvincollege.edu/Current/PDFs/ADN/Nursing_Dept_Scholarship.pdf

Announcements of other scholarships are announced in class, posted on bulletin boards or distributed to students electronically. Financial aid from other sources is available to qualified students. Information may be obtained through the Financial Aid Office. Individuals who receive loans are responsible for repayment. A default may result in loss of the professional license.

ALCOHOL AND DRUG ABUSE

Alvin Community College specifically forbids the on-campus use of or possession of alcoholic beverages, intoxicants, hallucinogenics, or materials which might produce effects which alter the mental processes or normal physical functions. Violation of this regulation leaves the student liable to disciplinary action by college authorities. Alvin Community College has established a Code of Conduct for all its students. Each student should review this Code which may be found in the Student Handbook located on the ACC Website at www.alvincollege.edu.

CHEMICAL DEPENDENCY POLICY FOR CLINICAL AREAS

The Alvin Community College Associate Degree Nursing Program enforces a “drug free” policy. A negative toxicology screen may be required as a final step in the admission process and before the student is allowed to participate in the clinical component of the program. A student with a positive screen is not allowed in the clinical setting and will be unable to fulfill the required clinical competencies of nursing program. Any student exhibiting behavior which suggests impairment related to drugs and/or alcohol will be subject to mandatory chemical dependence assessment. The student will be escorted to the nearest emergency room or drug testing agency by the faculty member for drug screen testing. All testing costs are the responsibility of the student. A student who tests positive for drugs or alcohol must participate in a recognized chemical dependence program in order to continue in the program. Each student will be evaluated on an individual basis for continuance and/or readmission to the program.

POLICY FOR DRUG SCREENING

PURPOSE

- Promote And Protect Patient/Client Safety
- Comply With Clinical Affiliates Drug Screen Requirements
- Detect Illegal Drug Use

DEFINITIONS

- **Positive Drug Test:** A positive drug test means a medically acceptable drug test, approved by Alvin Community College, the results of which indicate the use of illegal drugs.
- **Illegal Drugs:** Illegal drugs include those drugs made illegal to possess, consume, or sell by Texas and Federal statutes. An illegal drug also includes those drugs taken by an individual which **exceed the prescribed limits of a lawful prescription or the taking of a prescription drug without a valid prescription.**

DRUG SCREENING PROCEDURE

Drug screening is conducted on all student applicants prior to acceptance into the program and a Positive Drug Test will bar admission to the program for a minimum of 12 months. The results of the drug test are generally accepted for the duration of the student’s **uninterrupted** enrollment in the program unless allegations are made to support reasonable cause that the student is not free of illegal drug use; with reasonable cause the student may be required to submit to further drug screening at his/her own expense. Alvin Community College is responsible for designating and approving the drug testing procedures. The student must complete drug screening at the scheduled time. An unscheduled drug screen will result in an additional expense to the student and conducted at a time and place designated by the college. The student must pre-pay for the drug screen as directed by the Program. The student is required to complete a release directing the company/agency conducting the drug screen test to send the results directly to the Program Director.

When the drug test results are reported by the Medical Review Officer, they are final. Within 10 days of learning of a positive result, a student can request to have their original specimen retested. The request must be stated in writing to Alvin Community College. There will be an additional cost for this process. If the final results change, the student will receive a refund for the requested second testing. Once the drug screen and the GC/MS (Gas Chromatography / Mass Spectrometry) confirmation are completed, and the Medical Review Officer has reported the results of the second set of testing, those results are final and cannot be appealed.

POLICY

When the college determines that a student has a positive drug test, the student is not allowed to attend any clinical agency/rotation for a minimum of twelve months and may affect his/her re-admission to the program. The student with the positive drug test is required to withdraw from the clinical course and all concurrent health, nursing or allied health programs. Prior to returning to the program, the student must re-apply and be accepted to the program (including re-testing), have a negative drug test, and provide satisfactory documentation to the college of successful drug counseling and treatment, all at the expense of the student. When a student with a previously positive drug test is accepted back into the program he/she will be subjected to unannounced random drug screening at their expense.

HEALTH

Students are responsible for their own health and the expenses of health care. It is recommended that health and accident insurance be carried by the student. Injuries incurred while on campus or in the clinical area are not covered by the College's or hospital's insurance.

A physical examination is required prior to the start of the program. A chest x-ray or TB skin test, up-to-date immunizations, including the complete series of Hepatitis B, are required. Students must be in good health or they may be denied entrance into the clinical agency. Forms will be provided for the physicals, and the student must use these forms. A student will be denied admittance to a clinical agency if the completed physical examination form, required vaccinations, and TB screening are not presented to the nursing office by the dates announced. This will result in a clinical absence.

In the event of a major illness or orthopedic problems, a physician's release indicating that the student can safely continue to give patient care is required. The release must indicate the student's ability to perform the physical activities listed in the "Performance Requirements". The student will be denied entrance into the clinical agency if the physician's release slip is not submitted.

PREGNANCY

Within two-weeks of confirmation of pregnancy, the student must discuss her plans for completion of the program with the Associate Degree Nursing Director. At that time, she must submit a statement from her physician indicating the estimated date of delivery and ability to perform the physical activities required in the nursing program. Specifically, the student must have the

1. physical ability to stand for prolonged periods of time, perform cardiopulmonary resuscitation, lift patients and objects of 35 lbs. or more, and move from room-to-room or maneuver in limited space;
2. ability to function safely under stressful conditions with the ability to adapt to ever-changing environment inherent in clinical situations involving patient care.

Permission to perform physical activities must be obtained and submitted in writing to the clinical instructor and the nursing office with each monthly/weekly medical visit to physician and following delivery. The student will be denied entrance into the clinical agency if the permission slip is not submitted.

CPR CERTIFICATION

All students are required to be CPR certified by the American Heart Association. A copy of current certification must be on file in the nursing office in order to attend clinical practice. Certification must be CPR/HealthCare Providers (AHA). No other course will be accepted.

ADA and PERFORMANCE REQUIREMENTS

The Associate Degree Nursing Program complies with College policies regarding Civil Rights and the Rights of Individuals with Disabilities. Purpose of the ADA; to provide a clear and comprehensive national mandate for the elimination of discrimination against individuals with disabilities; to provide clear, strong, consistent enforceable standards addressing discrimination against individuals with disabilities; to ensure that the Federal government plays a central role in enforcing the standards established in this act on behalf of individuals with disabilities and to invoke the sweep of congressional authority, including the power to enforce the fourteenth amendment and to regulate commerce, in order to address the major areas of discrimination faced day-to-day by people with disabilities. (Americans with Disabilities Act, 1991)

An individual with a disability is a person who has a physical or mental impairment that substantially limits a "major life activity," or has a record of such impairment, or is regarded as having such impairment. A qualified individual with a disability is one who meets the essential eligibility requirements for the program or activity offered by a public entity with or without reasonable accommodation. (ADA 1630.20) Essential functions are: those functions that the individual who holds the position must be able to perform unaided or with the assistance of a reasonable accommodation. (ADA 1630.2m) Reasonable accommodation: "Change in the way things are customarily done that will enable an individual with a disability to enjoy equal opportunities." (ADA 1620.20)

- equal opportunity in the application process
- enable the disabled to perform essential functions of the position held or desired
- accommodations that enable disabled to enjoy equal benefits and privileges of persons without disabilities.

Performance requirements are the basic activities a student must be able to complete in a reasonably independent manner. A student who poses a direct threat to the health or safety of others or to themselves will not meet the clinical/skills competencies required in the Associate Degree Nursing Program. A “direct threat” is defined as a significant risk to the health or safety of others that cannot be eliminated or reduced to an acceptable level by modification of policies, practices or procedures, by the provision of auxiliary aids or services. Determination will be made on an individual basis.

The following is a list of performance requirements for all students enrolled in the Associate Degree Nursing Program:

- A. Visual acuity, depth perception and peripheral vision adequate with corrective lenses to see objects more than 20 feet away, see objects less than 20 inches away, read small print on containers and withdraw medications from small containers.
- B. Hearing ability with auditory aids to distinguish faint sounds with variations, understand the normal speaking voice without viewing the speaker’s face, hear auditory alarms, emergency signals, and communicate via the telephone.
- C. Gross motor skills and physical endurance to be able to stand and maintain balance for prolonged periods of time, lift objects of 35 lbs. or more, reach above shoulders and below waist, move from room-to-room, maneuver in limited spaces, and squeeze with hands.
- D. Communicate effectively in verbal and written form by speaking clearly and succinctly when explaining treatment procedures, describing patient conditions, implement health teaching, and write legibly.
- E. Fine motor skills with manual dexterity to write with a pen or pencil, type on a computer keyboard, pick up and manipulate small objects with hands, screw on caps, perform actions using two hands simultaneously, and pinch small objects with fingers
- F. Function safely under stressful conditions with the ability to adapt to ever-changing environments.

ALVIN NURSING STUDENT ASSOCIATION (ANSA)

Alvin Nursing Students Association ANSA is the organization for nursing students at Alvin Community College. All current nursing students and entering nursing students are invited to join. ANSA members are involved in both campus and community activities. Monies accumulated from various fund raising activities are used primarily to provide scholarships for ANSA members.

UNIFORM REGULATIONS

The wearing of the uniform identifies the students as a member of ACC ADN Nursing Program and should be worn properly. The uniform, sold at **Adaptive Medical Equipment** is to be worn only in the clinical area. Only the uniform lab coat may be worn with the uniform. Students may wear a long sleeve body shirt in navy or white only under the uniform. Sweaters or other lab coats are not permitted. The ID badge must be plainly visible on either the uniform or lab coat. There will be a charge to the student for replacement of lost ID badges. The patch is worn 2” down from the seam on the left arm. Add 8.25% tax to the cost listed below.

Style	Color	Type	Cost *XL sizes extra
WOMEN-4350	White	Jacket	20.09
WOMEN-4770	Navy	Top	18.49
WOMEN-4101	Navy	Pants	12.16
WOMEN’S Total		Uniform Total (Tax Included)	*54.16
MEN-4350	White	Jacket	20.09
MEN-4770	Navy	Top	18.49
MEN-4100	Navy	Pants	10.39
MEN’s Total		Uniform Total (Tax Included)	*52.27
	White	Professional Style Shoes- Leather, no open toes or heels	
		Picture ID Badge- Student obtained the first week of class	

All students must have the following items:

1. Analog watch with second hand; modest style without ornamentation
2. Red and black ballpoint pens
3. Stethoscope
4. Bandage scissors
5. Penlight
6. Hemostat

Students who go to the clinical facility during non-clinical hours (i.e., to select clients or obtain client data) must wear appropriate street clothes with the jacket and picture ID badge. Shorts, blue jeans, T-shirts, tank tops, etc. are not to be worn. No open toe or heel shoes are to be worn. Appropriate grooming is expected. The uniform should be clean, in good repair, and unwrinkled. Personal grooming will include attention to cleanliness, neatness, use of deodorant, nails cut short, hands and nails well cared for, and good oral hygiene. Shoes should be polished and laces clean.

Heavily scented after-shaves, colognes, and perfumes are not to be worn in the clinical area. Jewelry worn with the uniform should be limited to wedding bands, watch, and simple post-style earrings, gold or silver. Only one (1) pair of earrings may be worn – multiple earrings will not be permitted. These are to be worn only in the lobes of the ears. Visible body piercing jewelry is not to be worn – this includes tongue studs. Chain necklaces should not be worn. All tattoos must be appropriately covered so as not to be visible.

WOMEN STUDENTS

The skirt of the uniform should be hemmed no higher than the bottom of the kneecap to prevent undue exposure while performing nursing activities. Long hair must be worn away from the face and held securely at the back of the neck. Ornamental ribbons, barrettes, and combs should not be worn with the uniform. If bobby pins, combs, or barrettes are necessary to restrain the hair, they should be plain and inconspicuous. Heavy makeup is inappropriate while in uniform. Colored nail polish is not to be worn.

MALE STUDENTS

Moustaches and beard must be neatly trimmed. They should be short enough to be covered by a surgical mask. Long hair must be held securely at the back of the neck.

SMOKING REGULATIONS

The use of tobacco products is not permitted in any building in campus or in any college vehicle. The sale of tobacco products on campus is prohibited. Students must adhere to the no smoking policies of the clinical facilities to which they are assigned.

EATING/DRINKING REGULATIONS

Eating and drinking in classrooms, labs, and other college meeting places is prohibited. Please help keep these areas free of litter and insects by observing the no eating/drinking signs.

CELLULAR PHONES/PAGERS

Students who carry cellular phones or pagers must turn any audible signal off while in the classroom and labs. Students should advise their families, childcare providers, etc., of their schedules so that they can be contacted during non-class or non-clinical times.

USE OF TELEPHONE

Telephone messages will be given to students only in the case of emergency, i.e., illness/accident of family member. Personal phone calls are not allowed in clinical. Please provide your family, child care providers, etc., copies of your class and hospital schedules as emergency messages will be delivered to students only during on-campus nursing classes.

CONFIDENTIALITY

Students are responsible for maintaining strict confidentiality of patient information. A breach will result in disciplinary action and possible dismissal from the nursing program. Patient confidentiality includes oral and written communication about the patient. It also includes electronic documentation systems utilized by the hospitals. The Health Insurance Portability and Accountability Act (HIPAA) is a Federal Law that prohibits unauthorized disclosure of private patient information. HIPAA provides both civil and criminal penalties for violations that can range up to fines of \$250,000 and 10 years in prison.

PROFESSIONAL RELATIONSHIPS

Students are expected to remain within the limits of professional boundaries in their relationships with clients, hospital staff, and nursing faculty. This permits a professional relationship that allows for a safe and effective association. In the clinical setting, a therapeutic nurse-client environment is established; in the educational setting an appropriate learning atmosphere is maintained. To this end, students should not accept gifts or tips from clients or their families, nor are faculty permitted to accept gifts from students. Avoid giving personal information about yourself to clients.

STUDENT CONDUCT

Whenever the student is in the classroom, a clinical agency, on a College-sponsored field trip, off-campus activity, or meeting, he/she is a representative of the Associate Degree Nursing Program at Alvin Community College and is expected to behave in an appropriate manner. The Code of Student Conduct from the ACC Student Handbook will be in effect for all nursing related activities. Disciplinary action will be taken against any student(s) who violates this code. The Student Handbook is available on the ACC website at www.alvincollege.edu.

Classroom Contract

I agree to:

Read, understand, and adhere to all course policies and schedules;
Adhere to the ACC code of academic integrity and honesty;
Follow the course attendance policy;
Complete all required coursework;
Arrive on time and prepared for class, and remain in class for the entire period;
Give my full attention and participation to the class activities;
Avoid *any* behavior that may disrupt other students' learning:

- Electronic devices will be turned off or on silent mode and will not be *used* in the classroom;
- No devices shall be on during tests or quizzes;
- Refrain from talking with other students unless instructed;
- Demonstrate respect in expressing opinions and listening to others;

Notify the instructor (outside of class) regarding problems with any of the above regulations, or notify the instructor about situations that interfere with learning.

As required by the Board of Nursing for the State of Texas and written in the Texas Administrative Code Rule 215.8, students may be dismissed from the program for demonstration of the following, including, but not limited to:

- (1) evidence of actual or potential harm to patients, clients, or the public;
- (2) criminal behavior whether violent or non-violent, directed against persons, property or public order and decency;
- (3) intemperate use, abuse of drugs or alcohol, or diagnosis of or treatment for chemical dependency, mental illness, or diminished mental capacity; and
- (4) the lack of good professional character as evidenced by a single incident or an integrated pattern of personal, academic and/or occupational behaviors which, in the judgment of the Board, indicates that an individual is unable to consistently conform his or her conduct to the requirements of the Nursing Practice Act, the Board's rules and regulations, and generally accepted standards of nursing practice including, but not limited to, behaviors indicating honesty, accountability, trustworthiness, reliability, and integrity.

TRANSPORTATION

Transportation to and from the hospital or other assigned agencies, field trips, and off-campus meetings is the responsibility of the student. The student is also responsible for parking fees charged by the hospital/agency. Students must adhere to parking regulations of the clinical facility to which the student is assigned.

LIABILITY INSURANCE

All students are required to carry liability (malpractice) insurance. Arrangements for the purchase of insurance have been made by the college. The fee is collected as a part of the registration fee when the student registers for nursing courses. This policy will cover students only while they are in assigned clinics.

STUDENT RECORDS

Records for each student are kept in the nursing office. Records include the application, physical exam and vaccination records, official transcripts, clinical evaluations, photo, correspondence, and counseling records. The student is responsible for providing the nursing department, as well as the ACC Registrars Office, with official transcripts of work completed at all other colleges and universities attended. Failure to provide up-to-date transcripts will result in a "hold" being placed on the student's records and blocking of future registrations until transcripts are received.

CHANGE OF IDENTIFYING INFORMATION

Report any change of name, address, email or phone number to the ADN Office and the Registrar immediately. It is imperative that we have accurate, up-to-date contact information in your file.

EMPLOYMENT

Students are often employed during the time they are enrolled in the nursing program at Alvin Community College. The work schedule must be adjusted so that the student may attend the full time of both academic classes and clinical assignments. The scheduling of the nursing courses must take precedence over that of the employment. If work interferes with academic or clinical performance, the student will be counseled and requested to limit the number of work hours. Each student retains the responsibility for maintaining satisfactory academic status. Students must not wear the school uniform or picture ID badge while working for wages in any institution.

SOCIAL NETWORKING SITES

The Nursing Department at Alvin Community College recognizes that social networking websites are used as a means of communication. **Future employers** often review these network sites when considering potential candidates for employment. No privatization measure is perfect. Information can "**live on**" beyond its removal from the original website and continue to circulate in other venues.

In your professional role as a care-giver, do not:

- Present the personal health information of other individuals. Removal of an individual's name does not constitute proper de-identification of protected health information. Inclusion of data such as age, gender, race, diagnosis, date of evaluation, or type of treatment or the use of a highly specific medical photograph may still allow the reader to recognize the identity of a specific individual.
- Present yourself as an official representative or spokesperson for the Alvin Community College Nursing Department.
- Utilize websites and/or applications in a manner that interferes with your clinical commitments.

Individuals should make every effort to present themselves in a mature, responsible, and professional manner. Discourse should always be civil and respectful. The actions listed below are strongly discouraged.

- Display of language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity, or sexual orientation.
- Presentation of information that may be interpreted as condoning irresponsible use of alcohol, substance abuse, or sexual promiscuity.

Therefore, think carefully before you post any information on a website or application.

GRIEVANCE PROCEDURE

Any student wishing to present a grievance for possible action should first bring the matter before his/her Instructor. If a satisfactory solution is not reached, the grievance should then be presented sequentially to: the Course Coordinator, ADN Program Director (in writing), Provost, Dean of Instruction, and the Academic Affairs Committee. If the student should feel that the matter is still unresolved, he/she may then request, through the President of ACC, a hearing before the Board of Trustees of the College.

DEGREE AUDIT

Students are responsible to ensure that course degree requirements are met. A degree audit is a review of courses which apply toward the student's major. The student should obtain audit information from the college website using WebACCESS.

GRADUATION REQUIREMENTS

The college may award a degree or certificate when a student has completed the requirements. To receive a diploma for the degree or certificate, a student must apply for graduation in the Enrollment Services Center. Deadline and fees for graduation are published in the semester class schedule. To graduate from the Associate Degree Nursing Program at Alvin Community College, a student must fulfill the requirements of Alvin Community College and the course requirements of the Associate Degree Nursing Curriculum. Refer to "Graduation Requirements" outlined in the Alvin Community College Catalog.

LICENSURE APPLICATION/NCLEX-RN EXAMINATION

Candidates for graduation make application for initial licensure to the Board of Nurse Examiners (BON) for the State of Texas in the final semester of the program. Instructions for licensure application are provided by the ADN director or designate during the final semester of the program. Two (2) separate fees are required by the BON: one to a designated testing service company for the testing fee, and one to the Board of Nurse Examiners for the State of Texas for the licensure application fee and the background check.

**Alvin Community College
Associate Degree Nursing
Policy for Criminal Background Screening**

The purpose of this policy is to:

1. Comply with clinical affiliates who may require a student background check as a condition of their contract
2. Provide early identification of students who may have difficulty meeting Texas Board of Nurse Examiners (BON) eligibility for licensure requirements
3. Promote early submission by students of petition for a declaratory order by the BON
4. Promote and protect patient/client safety

Conduct of Criminal Background Check

Background checks will be conducted as a condition of full acceptance into the Associate Degree Nursing program. Alvin Community College designates the agency selected to do the criminal background screening. Results of the background check are sent directly to the nursing program director. The student pays the cost of the background directly to the agency. The student indicates knowledge of this policy and their belief that they do not have any criminal history that would disqualify them from clinical rotations on their ADN application for admission.

Satisfactory criminal background check is determined by the licensure eligibility criteria established by the BON and standards mandated by clinical affiliates. A person with a criminal history may be considered for admission if the BON indicates in a letter that a “Declaratory Order” was received and the individual is eligible to apply to take the licensure examination. The BON website, www.bon.state.tx.us, contains eligibility questions and the petition for declaratory order. Individuals with felonies are ineligible.

Student Rights

If the student believes his or her background information is incorrect, the student is responsible for providing the evidence of the inaccuracy of the information to the investigating agency. The student will not be able to enroll in the nursing program until the question is resolved.

Background checks are conducted as a condition of full acceptance into the Associate Degree Nursing Program.

A background check is conducted after a student's initial acceptance into the program but before the student is allowed to enroll in nursing courses. A student with a significant criminal background screen is eligible to receive full acceptance and enrollment in the nursing program **only if** the student has: 1) Submitted a "Declaratory Order" to the Texas Board of Nursing (BON) **and** 2) Received BON verification of eligibility for future licensure. Individuals with felonies are ineligible.

Students interested in the ADN program who have **a significant criminal history** as described in Eligibility Questions 1, 2, & 3 must petition the Texas BON in advance of their anticipated start date for nursing. Depending on the crime, it may take a **minimum of 6 months to two years** for the Board to process Declaratory Order for eligibility. Eligibility is determined in a case by case basis and the BON considers the severity of the offense, how long ago the offense was committed, and the behavior of the individual since the incident.

The Declaratory Order and other information regarding eligibility for licensure is available from the Texas BON website: www.bon.state.tx.us under the section "Forms".

If you answer no to all questions below, you are **not** required to submit a Declaratory Order to the BON.

Texas Board of Nursing Licensure **Eligibility Questions:**

1)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<p>For any criminal offense, including those pending appeal, have you:</p> <p>A. been convicted of a misdemeanor? B. been convicted of a felony? C. pled nolo contendere, no contest, or guilty? D. received deferred adjudication? E. been placed on community supervisor or court-ordered probation, whether or not adjudicated guilty? F. been sentenced to serve jail or prison time? Court- ordered confinement? G. been granted pre-trial diversion? H. been arrested or any pending criminal charges? I. been <u>cited</u> or charged with any violation of the law? J. been subject of a court-martial; Article 15 violation; or received any form of military judgment/punishment/action?</p> <p><u>(You may only exclude Class C misdemeanor traffic violations.)</u></p> <p>NOTE: Expunged and Sealed Offenses: While expunged or sealed offenses, arrests, tickets, or citations need to be disclosed, it is your responsibility to ensure the offense, arrest, ticket or citation has, in fact, been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in question to our office with your application. Failure to reveal an offense, arrest, ticket, or citation that is not in fact expunged or sealed, will at a minimum, subject your license to a disciplinary fine. Non-disclosure of relevant offenses raises questions related to truthfulness and character.</p> <p>NOTE: Orders of Non-disclosure: Pursuant to Tex. Gov't Code § 552.142(b), if you have criminal matters that are the subject of an order of non-disclosure you are not required to reveal those criminal matters on this form. However, a criminal matter that is the subject of an order of non-disclosure may become a character and fitness issue. Pursuant to other sections of the Gov't Code chapter 411, the Texas Nursing Board is entitled to access criminal history record information that is the subject of an order of non-disclosure. If the Board discovers a criminal matter that is the subject of an order of non-disclosure, even if you properly did not reveal that matter, the Board may require you to provide information about that criminal matter.</p>
2)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Are you currently the target or subject of a grand jury or governmental agency investigation?
3)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Has any licensing authority refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a professional license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?
4)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Within the past five (5) years have you been addicted to and/or treated for the use of alcohol or any other drug?*
5)	<input type="checkbox"/> No	<input type="checkbox"/> 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:			<input type="checkbox"/> schizophrenia and/or psychotic disorders <input type="checkbox"/> bipolar disorder <input type="checkbox"/> paranoid personality disorder <input type="checkbox"/> antisocial personality disorder <input type="checkbox"/> borderline personality disorder
*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.			

Texas Administrative Code

TITLE 22
PART 11
CHAPTER 213
RULE §213.30

EXAMINING BOARDS
BOARD OF NURSE EXAMINERS
PRACTICE AND PROCEDURE
Declaratory Order of Eligibility for Licensure

- (a) A person enrolled or planning to enroll in an educational nursing program that prepares a person for an initial license as a registered or vocational nurse or an applicant who seeks licensure by endorsement pursuant to §217.5 of this title (relating to Temporary License and Endorsement) who has reason to believe that he or she may be ineligible for licensure, may petition the Board for a declaratory order or apply for a license by endorsement as to his or her eligibility.
- (b) The person must submit a petition or application on forms provided by the Board which includes:
- (1) a statement by the petitioner or applicant indicating the reason(s) and basis of potential ineligibility;
 - (2) if the potential ineligibility is due to criminal conduct and/or conviction, any court documents including, but not limited to, indictments, orders of deferred adjudication, judgments, probation records and evidence of completion of probation, if applicable;
 - (3) if the potential ineligibility is due to mental illness, evidence of evaluation, including a prognosis, by a psychologist or psychiatrist, evidence of treatment, including any medication;
 - (4) if the potential ineligibility is due to chemical dependency including alcohol, evidence of evaluation and treatment, after care and support group attendance; and
 - (5) the required fee which is not refundable.
- (c) An investigation of the petition/application and the petitioner's/applicant's eligibility shall be conducted.
- (d) The petitioner/applicant or the Board may amend the petition/application to include additional grounds for potential ineligibility at any time before a final determination is made.
- (e) If an applicant under §217.5 of this title has been licensed to practice professional or vocational nursing in any jurisdiction and has been disciplined, or allowed to surrender in lieu of discipline, in that jurisdiction, the following provisions shall govern the eligibility of the applicant under §213.27 of this title (relating to Good Professional Character).
- (1) A certified copy of the order or judgment of discipline from the jurisdiction is prima facie evidence of the matters contained in such order or judgment, and a final adjudication in the other jurisdiction that the applicant has committed professional misconduct is conclusive of the professional misconduct alleged in such order or judgment.
 - (2) An applicant disciplined for professional misconduct in the course of nursing in any jurisdiction or an applicant who resigned in lieu of disciplinary action is deemed to not have present good professional character under §213.27 of this title and is therefore ineligible to file an application under §217.5 of this title during the period of such discipline imposed by such jurisdiction, and in the case of revocation or surrender in lieu of disciplinary action, until the applicant has filed an application for reinstatement in the disciplining jurisdiction and obtained a final determination on that application.
- (f) If a petitioner's/applicant's potential ineligibility is due to criminal conduct and/or conviction, the following provisions shall govern the eligibility of the applicant under §213.28 of this title (relating to Licensure of Persons with Criminal Convictions):
- (1) The record of conviction or order of deferred adjudication is conclusive evidence of guilt.
 - (2) Upon proof that a felony conviction or felony order of probation with or without adjudication of guilt has been set aside or reversed, the petitioner or applicant shall be entitled to a new hearing before the Board for the purpose of determining whether, absent the record of conclusive evidence of guilt, the petitioner or applicant possesses present good professional character and fitness.
- (g) If the executive director proposes to find the petitioner or applicant ineligible for licensure, the petitioner or applicant may obtain a hearing before the State Office of Administrative Hearings. The Executive Director shall have discretion to set a hearing and give notice of the hearing to the petitioner or applicant. The hearing shall be conducted in accordance with §213.22 of this title (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 title (relating to Decision of the Board).

Note: 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 person'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 application for licensure until after the expiration of three years from the date of the Board's order denying the petition or application for licensure. If the applicant or petitioner does not appeal or request a formal hearing at SOAH after a letter proposal to deny eligibility made by the E&D Committee or the executive director, the applicant or petitioner may re-petition after the expiration of one year from the date of the proposal to deny eligibility, in accordance with this rule and §301.257, Texas Occupations Code.

- (i) The following disciplinary and eligibility sanction policies and guidelines shall be used by the Executive Director, the State Office of Administrative Hearings (SOAH), when recommending a declaratory order of eligibility; and the Board in determining the appropriate declaratory order in eligibility matters:
- (1) Disciplinary Sanctions for Fraud, Theft and Deception approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1646) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.
 - (2) Disciplinary Sanctions for Lying and Falsification approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1647) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.
 - (3) Disciplinary Sanctions for Sexual Misconduct approved by the Board and published on February 22, 2008 in the *Texas Register* (33 TexReg 1649) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.
 - (4) Eligibility and Disciplinary Sanctions for Nurses with Substance Abuse, Misuse, Substance Dependency, or other Substance Use Disorder and published on February 22, 2008 in the *Texas Register* (33 TexReg 1651) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.
 - (5) Disciplinary Guidelines for Criminal Conduct approved by the Board and published on March 9, 2007 in the *Texas Register* at (32 TexReg 1409) and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/discp-guide.html>.

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

NURSING PRACTICE ACT SECTIONS 301.252, 301.257, and 301.452 – 301.469

Sec. 301.252. License Application.

(a) Each applicant for a registered nurse license or a vocational nurse license must submit to the Board a sworn application that demonstrates the applicant's qualifications under this chapter, accompanied by evidence that the applicant:

- (1) has good professional character;
- (2) has successfully completed a program of professional or vocational nursing education approved under Section 301.157(d); and
- (3) has passed the jurisprudence examination approved by the Board as provided by Subsection (a-1).

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

- (1) the development of the examination;
- (2) applicable fees;
- (3) administration of the examination;
- (4) reexamination procedures;
- (5) grading procedures; and
- (6) notice of results.

(b) The board may waive the requirement of Subsection (a)(2) for a vocational nurse applicant if the applicant provides satisfactory sworn evidence that the applicant has completed an acceptable level of education in:

- (1) a professional nursing school approved under Section 301.157(d); or
- (2) a school of professional nurse education located in another state or a foreign country.

(c) The board by rule shall determine acceptable levels of education under Subsection (b).

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

Sec. 301.257. Declaratory Order of License Eligibility.

(a) A person may petition the board for a declaratory order as to the person's eligibility for a license under this chapter if the person as reason to believe that the person is ineligible for the license and:

- (1) is enrolled or planning to enroll in an educational program that prepares a person for an initial license as a registered nurse or vocational nurse; or
- (2) is an applicant for a license.

(b) The petition must state the basis for the person's potential ineligibility.

(c) The Board has the same powers to investigate the petition and the person's eligibility that it has to investigate a person applying for a license.

(d) The petitioner or the Board may amend the petition to include additional grounds for potential ineligibility at any time before a final determination is made.

(e) If the Board determines that a ground for ineligibility does not exist, instead of issuing an order, the Board shall notify the petitioner in writing of the Board's determination on each ground of potential ineligibility. If the Board proposes to find that the petitioner is ineligible for a license, the petitioner is entitled to a hearing before the State Office of Administrative Hearings.

(f) The Board's order must set out each basis for potential ineligibility and the Board's determination as to eligibility. In the absence of new evidence known to but not disclosed by the petitioner or not reasonably available to the Board at the time the order is issued, the Board's ruling on the petition determines the person's eligibility with respect to the grounds for potential ineligibility set out in the written notice or order.

(g) The Board may require an individual accepted for enrollment or enrolled in an educational program preparing a student for initial licensure as a registered nurse or vocational nurse to submit information to the Board to permit the Board to determine whether the person is aware of the conditions that may disqualify the person from licensure as a registered nurse or vocational nurse on graduation and of the person's right to petition the Board for a declaratory order under this section. Instead of requiring the

person to submit the information, the Board may require the educational program to collect and submit the information on each person accepted for enrollment or enrolled in the program.

(h) The information required under Subsection (g) must be submitted in a form approved by the Board.

(i) If, as a result of information provided under Subsection (g), the Board determines that a person may not be eligible for a license on graduation, the Board shall notify the educational program of its determination. [Amended by Acts 2009 (H.B. 3961), 80th Leg., eff. June 19, 2009]

Sec. 301.452. Grounds for Disciplinary Action.

(a) In this section, "intemperate use" includes practicing nursing or being on duty or on call while under the influence of alcohol or drugs.

(b) A person is subject to denial of a license or to disciplinary action under this subchapter for:

- (1) a violation of this chapter, a rule or regulation not inconsistent with this chapter, or an order issued under this chapter;
 - (2) fraud or deceit in procuring or attempting to procure a license to practice professional nursing or vocational nursing;
 - (3) a conviction for, or placement on deferred adjudication community supervision or deferred disposition for, a felony or for a misdemeanor involving moral turpitude;
 - (4) conduct that results in the revocation of probation imposed because of conviction for a felony or for a misdemeanor involving moral turpitude;
 - (5) use of a nursing license, diploma, or permit, or the transcript of such a document, that has been fraudulently purchased, issued, counterfeited, or materially altered;
 - (6) impersonating or acting as a proxy for another person in the licensing examination required under Section 301.253 or 301.255;
 - (7) directly or indirectly aiding or abetting an unlicensed person in connection with the unauthorized practice of nursing;
 - (8) revocation, suspension, or denial of, or any other action relating to, the person's license or privilege to practice nursing in another jurisdiction;
 - (9) intemperate use of alcohol or drugs that the Board determines endangers or could endanger a patient;
 - (10) unprofessional or dishonorable conduct that, in the board's opinion, is likely to deceive, defraud, or injure a patient or the public;
 - (11) adjudication of mental incompetency;
 - (12) lack of fitness to practice because of a mental or physical health condition that could result in injury to a patient or the public; or
 - (13) failure to care adequately for a patient or to conform to the minimum standards of acceptable nursing practice in a manner that, in the Board's opinion, exposes a patient or other person unnecessarily to risk of harm.
- (c) The Board may refuse to admit a person to a licensing examination for a ground described under Subsection (b).
- (d) The Board by rule shall establish guidelines to ensure that any arrest information, in particular information on arrests in which criminal action was not proven or charges were not filed or adjudicated, that is received by the board under this section is used consistently, fairly, and only to the extent the underlying conduct relates to the practice of nursing.

Sec. 301.4521. Physical and Psychological Evaluation.

(a) In this section:

(1) "Applicant" means:

- (A) a petitioner for a declaratory order of eligibility for a license; or
- (B) an applicant for an initial license or renewal of a license.

(2) "Evaluation" means a physical or psychological evaluation conducted to determine a person's fitness to practice nursing.

(b) The board may require a nurse or applicant to submit to an evaluation only if the board has probable cause to believe that the nurse or applicant is unable to practice nursing with reasonable skill and safety to patients because of:

- (1) physical impairment;
- (2) mental impairment; or
- (3) chemical dependency or abuse of drugs or alcohol.

- (c) A demand for an evaluation under Subsection (b) must be in writing and state:
- (1) the reasons probable cause exists to require the evaluation; and
 - (2) that refusal by the nurse or applicant to submit to the evaluation will result in an administrative hearing to be held to make a final determination of whether probable cause for the evaluation exists.
- (d) If the nurse or applicant refuses to submit to the evaluation, the board shall schedule a hearing on the issue of probable cause to be conducted by the State Office of Administrative Hearings. The nurse or applicant must be notified of the hearing by personal service or certified mail. The hearing is limited to the issue of whether the board had probable cause to require an evaluation. The nurse or applicant may present testimony and other evidence at the hearing to show why the nurse or applicant should not be required to submit to the evaluation. The board has the burden of proving that probable cause exists. At the conclusion of the hearing, the hearing officer shall enter an order requiring the nurse or applicant to submit to the evaluation or an order rescinding the board's demand for an evaluation. The order may not be vacated or modified under Section 2001.058, Government Code.
- (e) If a nurse or applicant refuses to submit to an evaluation after an order requiring the evaluation is entered under Subsection (d), the board may:
- (1) refuse to issue or renew a license;
 - (2) suspend a license; or
 - (3) issue an order limiting the license.
- (f) The board may request a nurse or applicant to consent to an evaluation by a practitioner approved by the board for a reason other than a reason listed in Subsection (b). A request for an evaluation under this subsection must be in writing and state:
- (1) the reasons for the request;
 - (2) the type of evaluation requested;
 - (3) how the board may use the evaluation;
 - (4) that the nurse or applicant may refuse to submit to an evaluation; and
 - (5) the procedures for submitting an evaluation as evidence in any hearing regarding the issuance or renewal of the nurse's or applicant's license.
- (g) If a nurse or applicant refuses to consent to an evaluation under Subsection (f), the nurse or applicant may not introduce an evaluation into evidence at a hearing to determine the nurse's or applicant's right to be issued or retain a nursing license unless the nurse or applicant:
- (1) not later than the 30th day before the date of the hearing, notifies the board that an evaluation will be introduced into evidence at the hearing;
 - (2) provides the board the results of that evaluation;
 - (3) informs the board of any other evaluations by any other practitioners; and
 - (4) consents to an evaluation by a practitioner that meets board standards established under Subsection (h).
- (h) The board shall establish by rule the qualifications for a licensed practitioner to conduct an evaluation under this section. The board shall maintain a list of qualified practitioners. The board may solicit qualified practitioners located throughout the state to be on the list.
- (i) A nurse or applicant shall pay the costs of an evaluation conducted under this section.
- (j) The results of an evaluation under this section are:
- (1) confidential and not subject to disclosure under Chapter 552, Government Code; and
 - (2) not subject to disclosure by discovery, subpoena, or other means of legal compulsion for release to anyone, except that the results may be:
 - (A) introduced as evidence in a proceeding before the board or a hearing conducted by the State Office of Administrative Hearings under this chapter; or
 - (B) included in the findings of fact and conclusions of law in a final board order.
- (k) If the board determines there is insufficient evidence to bring action against a person based on the results of any evaluation under this section, the evaluation must be expunged from the board's records.
- (l) The board shall adopt guidelines for requiring or requesting a nurse or applicant to submit to an evaluation under this section.
- (m) The authority granted to the board under this section is in addition to the board's authority to make licensing decisions under this chapter.
- [Added by Acts 2009 (H.B. 3961), 81st Leg., eff. June 19, 2009]

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

- (a) If the Board determines that a person has committed an act listed in Section 301.452(b), the Board shall enter an order imposing one or more of the following:
- (1) denial of the person's application for a license, license renewal, or temporary permit;
 - (2) issuance of a written warning;
 - (3) administration of a public reprimand;
 - (4) limitation or restriction of the person's license, including:
 - (A) limiting to or excluding from the person's practice one or more specified activities of nursing; or
 - (B) stipulating periodic board review;
 - (5) suspension of the person's license;
 - (6) revocation of the person's license; or
 - (7) assessment of a fine.
- (b) In addition to or instead of an action under Subsection (a), the Board, by order, may require the person to:
- (1) submit to care, counseling, or treatment by a health provider designated by the Board as a condition for the issuance or renewal of a license;
 - (2) participate in a program of education or counseling prescribed by the Board, including a program of remedial education;
 - (3) practice for a specified period under the direction of a registered nurse or vocational nurse designated by the Board; or
 - (4) perform public service the Board considers appropriate.
- (c) The Board may probate any penalty imposed on a nurse and may accept the voluntary surrender of a license. The Board may not reinstate a surrendered license unless it determines that the person is competent to resume practice.
- (d) If the Board suspends, revokes, or accepts surrender of a license, the Board may impose conditions for reinstatement that the person must satisfy before the Board may issue an unrestricted license.
- [Amended by Acts 2009 (H.B. 3961), 81st Leg., eff. June 19, 2009]

Sec. 301.4531. Schedule of Sanctions.

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

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

- (a) The board shall suspend a nurse's license or refuse to issue a license to an applicant on proof that the nurse or applicant has been initially convicted of:
- (1) murder under Section 19.02, Penal Code, capital murder under Section 19.03, Penal Code, or manslaughter under Section 19.04, Penal Code;
 - (2) kidnapping or unlawful restraint under Chapter 20, Penal Code, and the offense was punished as a felony or state jail felony;

- (3) sexual assault under Section 22.011, Penal Code;
- (4) aggravated sexual assault under Section 22.021, Penal Code;
- (5) continuous sexual abuse of young child or children under Section 21.02, Penal Code, or indecency with a child under Section 21.11, Penal Code;
- (6) aggravated assault under Section 22.02, Penal Code;
- (7) intentionally, knowingly, or recklessly injuring a child, elderly individual, or disabled individual under Section 22.04, Penal Code;
- (8) intentionally, knowingly, or recklessly abandoning or endangering a child under Section 22.041, Penal Code;
- (9) aiding suicide under Section 22.08, Penal Code, and the offense was punished as a state jail felony;
- (10) an offense under Section 25.07, Penal Code, punished as a felony;
- (11) an offense under Section 25.071, Penal Code, punished as a felony;
- (12) an agreement to abduct a child from custody under Section 25.031, Penal Code;
- (13) the sale or purchase of a child under Section 25.08, Penal Code;
- (14) robbery under Section 29.02, Penal Code;
- (15) aggravated robbery under Section 29.03, Penal Code;
- (16) an offense for which a defendant is required to register as a sex offender under Chapter 62, Code of Criminal Procedure; or
- (17) an offense under the law of another state, federal law, or the Uniform Code of Military Justice that contains elements that are substantially similar to the elements of an offense listed in this subsection.

(a-1) An applicant or nurse who is refused an initial license or renewal of a license or whose license is suspended under Subsection (a) is not eligible for a probationary, stipulated, or otherwise encumbered license unless the board establishes by rule criteria that would permit the issuance or renewal of the license.

(b) On final conviction or a plea of guilty or nolo contendere for an offense listed in Subsection (a), the board, as appropriate, may not issue a license to an applicant, shall refuse to renew a license, or shall revoke a license.

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

[NOTE: Section 301.4535, Occupations Code, applies only to a person who is initially convicted of an offense or placed on deferred adjudication after a plea of guilty or nolo contendere for an offense on or after September 1, 2005. A person initially convicted of an offense or placed on deferred adjudication before that date is governed by the law in effect on the date the conviction or plea occurred, and the former law is continued in effect for that purpose. Amended by Acts 2009 (H.B. 3961), 81st Leg., eff. June 19, 2009]

Sec. 301.454. Notice and Hearing.

(a) Except in the case of a temporary suspension authorized under Section 301.455 or an action taken in accordance with an agreement between the Board and a license holder, the Board may not initiate a disciplinary action relating to a license unless:

- (1) the Board has served notice to the license holder of the facts or conduct alleged to warrant the intended action; and
- (2) the license holder has been given an opportunity, in writing or through an informal meeting, to show compliance with all requirements of law for the retention of the license.

(b) If an informal meeting is held, a board member, staff member, or board representative who attends the meeting is considered to have participated in the hearing of the case for the purposes of ex parte communications under Section 2001.061, Government Code.

(c) A person is entitled to a hearing conducted by the State Office of Administrative Hearings if the Board proposes to:

- (1) refuse to admit the person to examination;
- (2) refuse to issue a license or temporary permit;
- (3) refuse to renew a license; or
- (4) suspend or revoke the person's license or permit.

(d) The State Office of Administrative Hearings shall use the schedule of sanctions adopted by the Board for any sanction imposed as the result of a hearing conducted by that office.

(e) Notwithstanding Subsection (a), a person is not entitled to a hearing on a refusal to renew a license if the person:

- (1) fails to submit a renewal application; or
- (2) submits an application that:
 - (A) is incomplete;
 - (B) shows on its face that the person does not meet the renewal requirements; or
 - (C) is not accompanied by the correct fee.

Sec. 301.455. Temporary License Suspension or Restriction.

(a) The license of a nurse shall be temporarily suspended or restricted on a determination by a majority of the Board or a three-member committee of board members designated by the Board that, from the evidence or information presented, the continued practice of the nurse would constitute a continuing and imminent threat to the public welfare.

(b) A license may be temporarily suspended or restricted under this section without notice or hearing on the complaint if:

- (1) institution of proceedings for a hearing before the State Office of Administrative Hearings is initiated simultaneously with the temporary suspension or determination to restrict; and
- (2) a hearing is held as soon as possible under this chapter and Chapter 2001, Government Code.

(c) The State Office of Administrative Hearings shall hold a preliminary hearing not later than the 14th day after the date of the temporary suspension or restriction to determine whether probable cause exists that a continuing and imminent threat to the public welfare exists. The probable cause hearing shall be conducted as a de novo hearing.

(d) A final hearing on the matter shall be held not later than the 61st day after the date of the temporary suspension or restriction.

Sec. 301.4551. Temporary License Suspension for Drug or Alcohol Use.

The board shall temporarily suspend the license of a nurse as provided by Section 301.455 if the nurse is under a board order prohibiting the use of alcohol or a drug or requiring the nurse to participate in a peer assistance program, and the nurse:

- (1) tests positive for alcohol or a prohibited drug;
- (2) refuses to comply with a board order to submit to a drug or alcohol test; or
- (3) fails to participate in the peer assistance program and the program issues a letter of dismissal and referral to the board for noncompliance.

[Added by Acts 2009 (H.B. 3961), 81st Leg., eff. June 19, 2009]

Sec. 301.456. Evidence.

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

Sec. 301.457. Complaint and Investigation.

(a) The Board or any person may initiate a proceeding under this subchapter by filing with the Board a complaint against a nurse. The complaint must be in writing and signed by the complainant.

(b) Except as otherwise provided by this section, the Board or a person authorized by the board shall conduct each investigation. Each complaint against a nurse that requires a determination of nursing competency shall be reviewed by a board member, consultant, or employee with a nursing background the Board considers sufficient.

(c) On the filing of a complaint, the board:

- (1) may conduct a preliminary investigation into the identity of the nurse named or described in the complaint;
 - (2) shall make a timely and appropriate preliminary investigation of the complaint; and
 - (3) may issue a warning or reprimand to the nurse.
- (d) After any preliminary investigation to determine the identity of the subject of the complaint, unless it would jeopardize an investigation, the Board shall notify the nurse that a complaint has been filed and the nature of the complaint. If the investigation reveals probable cause to take further disciplinary action, the Board shall either attempt an informal disposition of the complaint or file a formal charge against the

nurse stating the provision of this chapter or board rule that is alleged to have been violated and a brief description of each act or omission that constitutes the violation.

(e) The Board shall conduct an investigation of the complaint to determine:

- (1) whether the nurse's continued practice of nursing poses a risk of harm to clients or other persons; and
- (2) whether probable cause exists that a nurse committed an act listed in Section 301.452(b) or that violates other law.

(f) In making a determination under Subsection (e), the board shall review the evidence to determine the extent to which a deficiency in care by the registered nurse was the result of deficiencies in the registered nurse's judgment, knowledge, training, or skill rather than other factors beyond the nurse's control. A determination that a deficiency in care is attributable to a registered nurse must be based on the extent to which the registered nurse's conduct was the result of a deficiency in the registered nurse's judgment, knowledge, training, or skill.

(g) If the board determines after investigating a complaint under Subsection (e) that there is reason to believe that a nurse's deficiency in care was the result of a factor beyond the nurse's control, the board shall report that determination to the patient safety committee at the facility where the nurse's deficiency in care occurred, or if the facility does not have a patient safety committee, to the chief nursing officer.

Sec. 301.458. Initiation of Formal Charges; Discovery.

(a) Unless there is an agreed disposition of the complaint under Section 301.463, and if probable cause is found under Section 301.457(e)(2), the Board or the Board's Authorized Representative shall initiate proceedings by filing formal charges against the nurse.

(b) A formal charge must:

- (1) be written;
 - (2) be specific enough to enable a person of common understanding to know what is meant by the formal charge; and
 - (3) contain a degree of certainty that gives the person who is the subject of the formal charge notice of each particular act alleged to violate a specific statute, board rule, or board order.
- (c) A copy of the formal charge shall be served on the nurse or the nurse's counsel of record.
- (d) The Board shall adopt reasonable rules to promote discovery by each party to a contested case.

Sec. 301.459. Formal Hearing.

(a) The Board by rule shall adopt procedures under Chapter 2001, Government Code, governing formal disposition of a contested case. The State Office of Administrative Hearings shall conduct a formal hearing.

(b) In any hearing under this section, a nurse is entitled to appear in person or by counsel.

Sec. 301.460. Access to Information.

(a) Except for good cause shown for delay and subject to any other privilege or restriction set forth by statute, rule, or legal precedent, the Board shall, not later than the 30th day after the date the board receives a written request from a license holder who is the subject of a formal charge filed under Section 301.458 or from the license holder's counsel of record, provide the license holder with access to:

- (1) all known exculpatory information in the Board's possession; and
- (2) information in the Board's possession that the board intends to offer into evidence in presenting its case in chief at the contested hearing on the complaint.

(b) The Board is not required to provide:

- (1) Board investigative reports or investigative memoranda;
- (2) the identity of non-testifying complainants;
- (3) attorney-client communications;
- (4) attorney work product; or
- (5) other materials covered by a privilege as recognized by the Texas Rules of Civil Procedure or the Texas Rules of Evidence.

(c) The provision of information under Subsection (a) does not constitute a waiver of privilege or confidentiality under this chapter or other applicable law.

Sec. 301.461. Assessment of Costs.

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

Sec. 301.462. Voluntary Surrender of License.

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

Sec. 301.463. Agreed Disposition.

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

- (1) stipulation;
- (2) agreed settlement;
- (3) agreed order; or
- (4) dismissal.

(b) An agreed disposition of a complaint is considered to be a disciplinary order for purposes of reporting under this chapter and an administrative hearing and proceeding by a state or federal regulatory agency regarding the practice of nursing.

(c) An agreed order is a public record.

(d) In civil or criminal litigation an agreed disposition is a settlement agreement under Rule 408, Texas Rules of Evidence.

Sec. 301.464. Informal Proceedings.

(a) The Board by rule shall adopt procedures governing:

- (1) informal disposition of a contested case under Section 2001.056, Government Code; and
- (2) an informal proceeding held in compliance with Section 2001.054, Government Code.

(b) Rules adopted under this section must:

- (1) provide the complainant and the license holder an opportunity to be heard; and
- (2) require the presence of a representative of the Board's legal staff or of the Attorney General to advise the Board or the Board's employees.

Sec. 301.465. Subpoenas; Request for Information.

(a) The Board may request issuance of a subpoena to be served in any manner authorized by law, including personal service by a board investigator and service by certified mail.

(b) Each person shall respond promptly and fully to a request for information by the board or to a subpoena issued by the Board. A request or subpoena may not be refused, denied, or resisted unless the request or subpoena calls for information within the attorney-client privilege. No other privilege applies to a board proceeding.

(c) The Board may pay a reasonable fee for photocopies subpoenaed at the Board's request. The amount paid may not exceed the amount the Board charges for copies of its records.

(d) The Board shall protect, to the extent possible, the identity of each patient named in information received by the Board.

Sec. 301.466. Confidentiality.

(a) A complaint and investigation concerning a nurse under this subchapter and all information and material compiled by the board in connection with the complaint and investigation are:

- (1) confidential and not subject to disclosure under Chapter 552, Government Code; and
- (2) not subject to disclosure, discovery, subpoena, or other means of legal compulsion for release to anyone other than the Board or a board employee or agent involved in license holder discipline.

(b) Notwithstanding Subsection (a), information regarding a complaint and an investigation may be disclosed to:

- (1) a person involved with the Board in a disciplinary action against the nurse;
- (2) a nursing licensing or disciplinary board in another jurisdiction;
- (3) a peer assistance program approved by the Board under Chapter 467, Health and Safety Code;
- (4) a law enforcement agency; or
- (5) a person engaged in bona fide research, if all information identifying a specific individual has been deleted.

(c) The filing of formal charges against a nurse by the Board, the nature of those charges, disciplinary proceedings of the board, and final disciplinary actions, including warnings and reprimands, by the Board are not confidential and are subject to disclosure in accordance with Chapter 552, Government Code.

Sec. 301.467. Reinstatement.

(a) On application, the Board may reinstate a license to practice nursing to a person whose license has been revoked, suspended, or surrendered.

(b) An application to reinstate a revoked license:

(1) may not be made before the first anniversary of the date of the revocation; and

(2) must be made in the manner and form the Board requires.

(c) If the Board denies an application for reinstatement, it may set a reasonable waiting period before the applicant may reapply for reinstatement.

Sec. 301.468. Probation.

(a) The Board may determine that an order denying a license application or suspending a license be probated. A person subject to a probation order shall conform to each condition the Board sets as the terms of probation, including a condition:

(1) limiting the practice of the person to, or excluding, one or more specified activities of professional nursing or vocational nursing;

(2) requiring the person to submit to supervision, care, counseling, or treatment by a practitioner designated by the Board; or

(3) requiring the person to submit to random drug or alcohol tests in the manner prescribed by the board.

(b) At the time the probation is granted, the Board shall establish the term of the probationary period.

(c) At any time while the person remains subject to the probation order, the Board may hold a hearing and rescind the probation and enforce the Board's original action in denying or suspending the license. The hearing shall be called by the presiding officer of the Board, who shall issue a notice to be served on the person or the person's counsel not later than the 20th day before the date scheduled for the hearing that:

(1) sets the time and place for the hearing; and

(2) contains the charges or complaints against the probationer.

(d) Notice under Subsection (c) is sufficient if sent by registered or certified mail to the affected person at the person's most recent address as shown in the Board's records.

(e) A hearing under this section is limited to a determination of whether the person violated the terms of the probation order under Subsection (a) and whether the board should:

(1) continue, rescind, or modify the terms of probation, including imposing an administrative penalty; or

(2) enter an order denying, suspending, or revoking the person's license.

(f) If one of the conditions of probation is the prohibition of using alcohol or a drug or participation in a peer assistance program, violation of that condition is established by:

(1) a positive drug or alcohol test result;

(2) refusal to submit to a drug or alcohol test as required by the board; or

(3) a letter of noncompliance from the peer assistance program.

[Amended by Acts 2009 (H.B. 3961), 81st Leg., eff. June 19, 2009]

Sec. 301.469. Notice of Final Action.

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

BNE LICENSURE INSTRUCTIONS
213.27, 213.28, 213.29, 213.30, 217.11, 217.12, 217.2

§213.27. Good Professional Character.

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

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

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

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

(A) is able to distinguish right from wrong;

(B) is able to think and act rationally;

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

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

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

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

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

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

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

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

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

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

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

(1) A certified copy of the order, judgment of discipline, or order of adverse licensure action from the jurisdiction is prima facie evidence of the matters contained in such order, judgment, or adverse action and

is conclusive evidence that the individual in question has committed professional misconduct as alleged in such order of judgment.

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

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

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

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

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

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

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

(e) An individual who applies for initial licensure, reinstatement, renewal, or endorsement to practice professional or vocational nursing in Texas after the expiration of the three-year period in (c)(2) above and subsection (f) of this rule, or after the completion of the disciplinary period assessed or ineligibility period imposed by any jurisdiction under subsection (d) above shall be required to prove, by a preponderance of the evidence:

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

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

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

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

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

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

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

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

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

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

§213.28. *Licensure of Persons with Criminal Convictions.*

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

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

- (1) offenses against the person similar to those outlined in Title 5 of the Texas Penal Code.
 - (A) These offenses include, but are not limited to, the following crimes, as well as any crime that contains substantially similar or equivalent elements under another state or federal law:
 - (i) Abandonment/Endangerment of a Child {TPC §22.041}
 - (ii) Agree to Abduct Child for Remuneration: Younger than Eighteen {TPC §25.031}
 - (iii) Aiding Suicide: Serious Bodily Injury/Death {TPC §22.08}
 - (iv) Assault, Aggravated {TPC §22.02}
 - (v) Capital Murder {TPC §19.03}
 - (vi) Child Pornography, Possession or Promotion {TPC §43.26(a), (e) (Texas Rules of Criminal Procedure Ch. 62)}
 - (vii) Indecency with a Child {TPC §21.11 (TRCP Ch. 62)}
 - (viii) Indecent exposure (2 or more counts and/or required to register as sex offender) {TPC §21.08 (TRCP Ch. 62)}
 - (ix) Injury to Child, Elderly, Disabled {TPC §22.04}
 - (x) Kidnapping {TPC §20.03, §20.04 (TRCP Ch. 62)}
 - (xi) Manslaughter {TPC §19.04}
 - (xii) Murder {TPC §19.02}
 - (xiii) Online Solicitation of a Minor {TPC §33.021(b), (c), (f); (TRCP Ch. 62)}
 - (xiv) Prostitution, Compelling {TPC §43.05 (TRCP Ch. 62)}
 - (xv) Protective Order, Violation {TPC §25.07, §25.071}
 - (xvi) Sale or Purchase of a Child {TPC §25.08}
 - (xvii) Sexual Assault {TPC §22.011 (TRCP Ch. 62)}
 - (xviii) Sexual Conduct, Prohibited {TPC §25.02 (TRCP Ch. 62)}
 - (xix) Sexual Assault, Aggravated {TPC §22.021 (TRCP Ch. 62)}
 - (xx) Sexual Performance by Child {TPC §43.24 (d), §43.25(b) (TRCP Ch. 62)}
 - (xxi) Unlawful Restraint {TPC §0.02}
 - (xxii) Assault {TPC §22.01(a)(1), (b), (c)}
 - (xxiii) Criminally negligent homicide {TPC §19.05}
 - (xxiv) Improper Relationship between Educator and Student {TPC §21.12}
 - (xxv) Improper photography {TPC §21.15}

- (xxvi) Obscenity, Wholesale promotion {TPC §43.23(a), (h)}
- (xxvii) Prostitution (3 or more counts) or Aggravated Promotion {TPC §43.02, §43.04}
- (xxviii) Resisting Arrest, Use of Deadly Weapon {TPC §38.03(d)}
- (xxix) Stalking {TPC §42.072(b)}
- (xxx) Harassment {TPC §42.07}
- (xxxi) Prostitution or Promotion of {TPC §43.02}
- (xxxii) Protective Order, Violation {TPC §25.07, §38.112}
- (xxxiii) Resisting Arrest {TPC §38.03(a)}
- (xxxiv) Deadly conduct {TPC §22.05(a)}
- (xxxv) Obscenity, Participates {TPC §43.23(c), (h)}
- (xxxvi) Terroristic Threat {TPC §22.07}
- (xxxvii) Criminal Attempt or Conspiracy {TPC §15.01, §15.02}

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

(i) nurses have access to persons who are vulnerable by virtue of illness or injury and are frequently in a position to be exploited;

(ii) nurses have access to persons who are especially vulnerable including the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized and may be subject to harm by similar criminal behavior;

(iii) nurses are frequently in situations where they provide intimate care to patients or have contact with partially clothed or fully undressed patients who are vulnerable to exploitation both physically and emotionally;

(iv) nurses are in the position to have access to privileged information and opportunity to exploit patient vulnerability; and

(v) nurses who commit these crimes outside the workplace raise concern about the nurse's propensity to repeat that same misconduct in the workplace and raises concerns regarding the individual's ability to provide safe, competent care to patients.

(2) offenses against property, e.g., robbery, burglary and theft, etc.

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

- (i) Burglary (if punishable under Penal Code §30.02(d)) {TRCP Ch. 62 (§62.001(5)(D))}
- (ii) Robbery {TPC §29.02}
- (iii) Robbery, Aggravated {TPC §29.03}
- (iv) Arson {TPC §28.02(d)}
- (v) Burglary {TPC §30.02}
- (vi) Criminal Mischief {TPC §28.03}
- (vii) Money Laundering >= \$1500 {TPC §34.02(e)(1) - (4)}
- (viii) Theft >= \$1500 {TPC §31.03(e)(4) - (7)}
- (ix) Theft < 9 {TPC §31.03(e)(1) - (3)}
- (x) Vehicle, Unauthorized Use {TPC §31.07}
- (xi) Criminal Trespass {TPC §30.05(a),(d)}
- (xii) Cruelty to Animals {TPC §42.091}
- (xiii) Criminal Attempt or Conspiracy {TPC §15.01, §15.02}

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

(i) nurses have access to persons who are vulnerable by virtue of illness or injury and are frequently in a position to be exploited;

(ii) nurses have access to persons who are especially vulnerable including the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized and may provide easy opportunity to be victimized;

(iii) nurses have access to persons who frequently bring valuables (medications, money, jewelry, items of sentimental value, checkbook, or credit cards) with them to a health care facility with no security to prevent theft or exploitation;

(iv) nurses frequently provide care in private homes and home-like settings where all of the patient's property and valuables are accessible to the nurse;

(v) nurses frequently provide care autonomously without direct supervision and may have access to and opportunity to misappropriate property; and

(vi) nurses who commit these crimes outside the workplace raise concern about the nurse's propensity to repeat that same misconduct in the workplace and, therefore, place patients' property at risk.

(vii) certain crimes involving property, such as cruelty to animals and criminal trespass, may also concern the safety of persons and, as such, raise concerns about the propensity of the nurse to repeat similar conduct in the workplace, placing patients at risk.

(3) offenses involving fraud or deception.

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

(i) Attempt, Conspiracy, or Solicitation of Ch. 62 offense {TRCP Ch. 62}

(ii) Tampering with a Government Record {TPC §37.10}

(iii) Insurance Fraud: Intent to Defraud {TPC §35.02(a-1), (d)}

(iv) Insurance Fraud: Claim > \$500 {TPC §35.02(c)}

(v) Insurance Fraud: Claim < 0 {TPC §35.02 (c)(1) - (3)}

(vi) Medicaid Fraud > \$1500 {TPC §35A.02(b)(4) - (7)}

(vii) Medicaid Fraud < \$1500 {TPC §35A.02(b)(2) - (3)}

(viii) Criminal Attempt or Conspiracy {TPC §15.01, §15.02}

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

(i) nurses have access to persons who are vulnerable by virtue of illness or injury and are frequently in a position to be exploited;

(ii) nurses have access to persons who are especially vulnerable including the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized;

(iii) nurses are in the position to have access to privileged information and opportunity to exploit patient vulnerability;

(iv) nurses are frequently in situations where they must report patient condition, record objective/subjective information, provide patients with information, and report errors in the nurse's own practice or conduct;

(v) the nurse-patient relationship is of a dependent nature; and

(vi) nurses who commit these crimes outside the workplace raise concern about the nurse's propensity to repeat that same misconduct in the workplace and, therefore, place patients at risk.

(4) offenses involving lying and falsification.

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

(i) False Report or Statement {TPC §32.32, §42.06}

(ii) Forgery {TPC §32.21(c), (d), (e)}

(iii) Tampering with a Governmental Record {TPC §37.10}

(B) These crimes are related to nursing because:

(i) nurses have access to persons who are vulnerable by virtue of illness or injury;

(ii) nurses have access to persons who are especially vulnerable including the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized;

(iii) nurses are frequently in situations where they must report patient condition, record objective/subjective information, provide patients with information, and report errors in the nurse's own practice or conduct;

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

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

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

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

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

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

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

(i) Drug Violations under Health and Safety Code Chs. 481, 482, 483; or

(ii) Driving While Intoxicated (2 or more counts) {TPC §49.09}

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

(i) nurses have access to persons who are vulnerable by virtue of illness or injury;

(ii) nurses have access to persons who are especially vulnerable including the elderly, children, the mentally ill, sedated and anesthetized patients, those whose mental or cognitive ability is compromised and patients who are disabled or immobilized;

(iii) nurses provide care to critical care, geriatric, and pediatric patients who are particularly vulnerable given the level of vigilance demanded under the circumstances of their health condition;

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

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

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

(vii) DWI offenses involve the use and/or abuse of mood altering drugs while performing a state licensed activity affecting public safety; repeated violations suggest a willingness to continue in reckless and dangerous conduct, or an unwillingness to take appropriate corrective measures, despite previous disciplinary action by the state.

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

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

(2) any felony or misdemeanor involving moral turpitude;

(3) the nature and seriousness of the crime;

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

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

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

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

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

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

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

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

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

- (3) the amount of time that has elapsed since the person's last criminal activity;
- (4) the conduct and work activity of the person before and after the criminal activity;
- (5) evidence of the person's rehabilitation or rehabilitative effort while incarcerated or after release; and
- (6) other evidence of the person's present fitness, including letters of recommendation from: prosecutors and law enforcement and correctional officers who prosecuted, arrested, or had custodial responsibility for the person; the sheriff or chief of police in the community where the person resides; and any other persons in contact with the convicted person.

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

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

(h) The fact that a person has been arrested will not be used as grounds for disciplinary action. If, however, evidence ascertained through the Board's own investigation from information contained in the arrest record regarding the underlying conduct suggests actions violating the Nursing Practice Act or rules of the Board, the board may consider such evidence as a factor in its deliberations regarding any decision to grant a license, restrict a license, or impose licensure discipline.

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

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

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

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

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

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

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

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

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

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

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

Source Note: The provisions of this §213.28 adopted to be effective September 1, 1998, 23 TexReg 6444; amended to be effective July 20, 1999, 24 TexReg 5473; amended to be effective November 14, 2002, 27 TexReg 10594; amended to be effective May 17, 2004, 29 TexReg 4884; amended to be effective March 14, 2007, 32 TexReg 1304; amended to be effective October 10, 2007, 32 TexReg 7058; amended to be effective July 2, 2008, 33 TexReg 5007

§213.29. Criteria and Procedure Regarding Intemperate Use and Lack of Fitness in Eligibility and Disciplinary Matters.

(a) A person desiring to obtain or retain a license to practice professional or vocational nursing shall provide evidence of current sobriety and fitness consistent with this rule.

(b) Such person shall provide a sworn certificate to the Board stating that he/she has read and understands the requirements for licensure as a registered or vocational nurse and that he/she has not:

- (1) within the past five years, become addicted to or treated for the use of alcohol or any other drug; or
- (2) within the past five years, been diagnosed with, treated or hospitalized for schizophrenia and/or other psychotic disorders, bi-polar disorder, paranoid personality disorder, antisocial personality disorder or borderline personality disorder.

(c) If a registered or vocational nurse is reported to the Board for intemperate use, abuse of drugs or alcohol, or diagnosis of or treatment for chemical dependency; or if a person is unable to sign the certification in subsection (b) of this section, the following restrictions and requirements apply:

(1) Any matter before the Board that involves an allegation of chemical dependency, or misuse or abuse of drugs or alcohol, will require at a minimum that such person obtain for Board review a chemical dependency evaluation performed by a licensed chemical dependency evaluator or other professional approved by the executive director;

(2) Those persons who have become addicted to or treated for alcohol or chemical dependency will not be eligible to obtain or retain a license to practice as a nurse unless such person can demonstrate sobriety and abstinence for the preceding twelve consecutive months through verifiable and reliable evidence, or can establish eligibility to participate in a peer assistance program created pursuant to Chapter 467 of the Health and Safety Code;

(3) Those persons who have become addicted to or treated for alcohol or chemical dependency will not be eligible to obtain or retain an unencumbered license to practice nursing until the individual has attained a five-year term of sobriety and abstinence or until such person has successfully completed participation in a board-approved peer assistance program created pursuant to Chapter 467 of the Health and Safety Code.

(4) Those persons who have been diagnosed with, treated, or hospitalized for the disorders mentioned in subsection (b) of this section shall execute an authorization for release of medical, psychiatric, and treatment records.

(d) It shall be the responsibility of those persons subject to this rule to submit to and pay for an evaluation by a professional approved by the executive director to determine current sobriety and fitness. The evaluation shall be limited to the conditions mentioned in subsection (b) of this section.

(e) Prior intemperate use, mental illness, or diminished mental capacity is relevant only so far as it may indicate current intemperate use or lack of fitness.

(f) With respect to chemical dependency in eligibility and disciplinary matters, the executive director is authorized to:

- (1) review submissions from a movant, materials and information gathered or prepared by staff, and identify any deficiencies in file information necessary to determine the movant's request;
- (2) close any eligibility file in which the movant has failed to respond to a request for information or to a proposal for denial of eligibility within 60 days thereof;
- (3) approve eligibility, enter eligibility orders and approve renewals, without Board ratification, when the evidence is clearly insufficient to prove a ground for denial of licensure; and
- (4) propose conditional orders in eligibility, disciplinary and renewal matters for individuals who have experienced chemical/alcohol dependency within the past five years provided:

(A) the individual presents reliable and verifiable evidence of having functioned in a sober/abstinent manner for the previous twelve consecutive months; and

(B) licensure limitations/stipulations and/or peer assistance program participation can be implemented which will ensure that patients and the public are protected until the individual has attained a five-year term of sobriety/abstinence.

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

(1) the individual presents reliable and verifiable evidence of having functioned in a manner consistent with the behaviors required of nurses under the Nursing Practice Act and Board rules for at least the previous twelve consecutive months; and

(2) licensure limitations/stipulations and/or peer assistance program participation can be implemented which will ensure that patients and the public are protected until the individual has attained a five-year term of controlled behavior and consistent compliance with the requirements of the Nursing Practice Act and Board rules.

(h) In renewal matters involving chemical dependency use, mental illness, or diminished mental capacity, the executive director shall consider the following information from the preceding renewal period:

- (1) evidence of the licensee's safe practice;
- (2) compliance with the NPA and Board rules; and
- (3) written verification of compliance with any treatment.

(i) Upon receipt of items (h)(1) - (3) of this section, the executive director may renew the license.

(j) The following disciplinary and eligibility sanction policies and guidelines shall be used by the Executive Director, the State Office of Administrative Hearings (SOAH), or the Board in evaluating the appropriate licensure determination or sanction in eligibility and disciplinary matters:

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

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

Source Note: The provisions of this §213.29 adopted to be effective September 1, 1998, 23 TexReg 6444; amended to be effective July 20, 1999, 24 TexReg 5473; amended to be effective November 14, 2002, 27 TexReg 10594; amended to be effective May 17, 2004, 29 TexReg 4884; amended to be effective October 10, 2007, 32 TexReg 7058; amended to be effective July 2, 2008, 33 TexReg 5007

§213.30 Declaratory Order of Eligibility for Licensure

(a) A person enrolled or planning to enroll in an educational nursing program that prepares a person for an initial license as a registered or vocational nurse or an applicant who seeks licensure by endorsement pursuant to §217.5 of this title (relating to Temporary License and Endorsement) who has reason to believe that he or she may be ineligible for licensure, may petition the Board for a declaratory order or apply for a license by endorsement as to his or her eligibility.

(b) The person must submit a petition or application on forms provided by the Board which includes:

- (1) a statement by the petitioner or applicant indicating the reason(s) and basis of potential ineligibility;

(2) if the potential ineligibility is due to criminal conduct and/or conviction, any court documents including, but not limited to, indictments, orders of deferred adjudication, judgments, probation records and evidence of completion of probation, if applicable;

(3) if the potential ineligibility is due to mental illness, evidence of evaluation, including a prognosis, by a psychologist or psychiatrist, evidence of treatment, including any medication;

(4) if the potential ineligibility is due to chemical dependency including alcohol, evidence of evaluation and treatment, after care and support group attendance; and

(5) the required fee which is not refundable.

(c) An investigation of the petition/application and the petitioner's/applicant's eligibility shall be conducted.

(d) The petitioner/applicant or the Board may amend the petition/application to include additional grounds for potential ineligibility at any time before a final determination is made.

(e) If an applicant under §217.5 of this title has been licensed to practice professional or vocational nursing in any jurisdiction and has been disciplined, or allowed to surrender in lieu of discipline, in that jurisdiction, the following provisions shall govern the eligibility of the applicant under §213.27 of this title (relating to Good Professional Character).

(1) A certified copy of the order or judgment of discipline from the jurisdiction is prima facie evidence of the matters contained in such order or judgment, and a final adjudication in the other jurisdiction that the applicant has committed professional misconduct is conclusive of the professional misconduct alleged in such order or judgment.

(2) An applicant disciplined for professional misconduct in the course of nursing in any jurisdiction or an applicant who resigned in lieu of disciplinary action is deemed to not have present good professional character under §213.27 of this title and is therefore ineligible to file an application under §217.5 of this title during the period of such discipline imposed by such jurisdiction, and in the case of revocation or surrender in lieu of disciplinary action, until the applicant has filed an application for reinstatement in the disciplining jurisdiction and obtained a final determination on that application.

(f) If a petitioner's/applicant's potential ineligibility is due to criminal conduct and/or conviction, the following provisions shall govern the eligibility of the applicant under §213.28 of this title (relating to Licensure of Persons with Criminal Convictions):

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

(2) Upon proof that a felony conviction or felony order of probation with or without adjudication of guilt has been set aside or reversed, the petitioner or applicant shall be entitled to a new hearing before the Board for the purpose of determining whether, absent the record of conclusive evidence of guilt, the petitioner or applicant possesses present good professional character and fitness.

(g) If the executive director proposes to find the petitioner or applicant ineligible for licensure, the petitioner or applicant may obtain a hearing before the State Office of Administrative Hearings. The Executive Director shall have discretion to set a hearing and give notice of the hearing to the petitioner or applicant. The hearing shall be conducted in accordance with §213.22 of this title (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 title (relating to Decision of the Board).

(h) 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 person'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 application for licensure until after the expiration of three years from the date of the Board's order denying the petition or application for licensure. If the applicant or petitioner does not appeal or request a formal hearing at SOAH after a letter proposal to deny eligibility made by the E&D Committee or the executive director, the applicant or petitioner may re-petition after the expiration of one year from the date of the proposal to deny eligibility, in accordance with this rule and §301.257, Texas Occupations Code.

(i) The following disciplinary and eligibility sanction policies and guidelines shall be used by the Executive Director, the State Office of Administrative Hearings (SOAH), when recommending a

declaratory order of eligibility; and the Board in determining the appropriate declaratory order in eligibility matters:

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

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

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

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

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

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§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 care environments, and Chapter 225 of this title, relating to independent living environments for clients with stable and predictable conditions.

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

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

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

Source Note: The provisions of this §217.11 adopted to be effective September 28, 2004, 29 TexReg 9192; amended to be effective November 15, 2007, 32 TexReg 8165

§ 217.12. *Unprofessional Conduct.*

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

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

(A) Carelessly failing, repeatedly failing, or exhibiting an inability to perform vocational, registered, or advanced practice nursing in conformity with the standards of minimum acceptable level of nursing practice set out in Rule 217.11.

(B) Carelessly or repeatedly failing to conform to generally accepted nursing standards in applicable practice settings;

(C) Improper management of client records;

(D) Delegating or assigning nursing functions or a prescribed health function when the delegation or assignment could reasonably be expected to result in unsafe or ineffective client care;

(E) Accepting the assignment of nursing functions or a prescribed health function when the acceptance of the assignment could be reasonably expected to result in unsafe or ineffective client care;

(F) Failing to supervise the performance of tasks by any individual working pursuant to the nurse's delegation or assignment; or

(G) Failure of a clinical nursing instructor to adequately supervise or to assure adequate supervision of student experiences.

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

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

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

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

(6) Misconduct--actions or conduct that include, but are not limited to:

(A) Falsifying reports, client documentation, agency records or other documents;

(B) Failing to cooperate with a lawful investigation conducted by the board;

(C) Causing or permitting physical, emotional or verbal abuse or injury or neglect to the client or the public, or failing to report same to the employer, appropriate legal authority and/or licensing board;

(D) Violating professional boundaries of the nurse/client relationship including but not limited to physical, sexual, emotional or financial exploitation of the client or the client's significant other(s);

(E) Engaging in sexual conduct with a client, touching a client in a sexual manner, requesting or offering sexual favors, or language or behavior suggestive of the same;

(F) Threatening or violent behavior in the workplace;

(G) Misappropriating, in connection with the practice of nursing, anything of value or benefit, including but not limited to, any property, real or personal of the client, employer, or any other person or entity, or failing to take precautions to prevent such misappropriation;

(H) Providing information which was false, deceptive, or misleading in connection with the practice of nursing;

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Source Note: The provisions of this §217.12 adopted to be effective September 28, 2004, 29 TexReg 9192

§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) Licensed vocational nurse applicants:

(A) must hold a high school diploma issued by an accredited secondary school or equivalent educational credentials as established by the General Education Development Equivalency Test (GED);

(B) who have graduated from another U.S. jurisdiction's nursing education program must satisfactorily have completed curriculum comparable to the curriculum requirements for graduates of board-approved vocational nurse education programs.

(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, (see §213.30 of this title relating to Declaratory Order of Eligibility for Licensure and Texas Occupations Code §301.257 relating to Declaratory Order of License Eligibility) then the application will be treated and processed as a Petition for Declaratory Order and the applicant will be required to pay the appropriate non-refundable fees for determination of eligibility. Should the Board in its final determination find that the individual is not eligible for licensure, then that individual is precluded from again petitioning, or applying to the Board for admission to the examination except when the impediment to eligibility has been removed. In no event, may an applicant repetition for a declaratory order before the first anniversary of the date of the Board's determination to deny eligibility. Any subsequent petition must be made in the manner and form the Board requires.

(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

Student Name- Print

Alvin Community College is required to follow the guidelines set forth in the Family Educational Rights and Privacy Act (FERPA). This act mandates that we safeguard and maintain the privacy and confidentiality of all student records.

By signing below, you give us permission to send information from your student records to clinical affiliates.

Released information may include, but is not limited to:

- Driver's license information;
- Health information including documentation of vaccinations, TB screen and negative drug screen;
- Results of background investigation;
- Verification of CPR certification

In the event you wish to cancel this release, you must do so in writing with the Associate Degree Nursing Office. Alvin Community College will not be responsible for disclosure of information made before written cancellation is received by the Associate Degree Nursing office.

I hereby authorize the college to send student information to my assigned clinical agency as required for my participation in the clinical rotation.

Student's Signature_____

Date_____

STUDENT AGREEMENT

This certifies that I have received a copy of the Associate Degree Nursing Student Handbook. I have read the handbook. I understand the procedures and policies set forth in the Handbook and accept them as a condition of my enrollment in the Associate Degree Nursing Program.

Student Name (Print)

Student Signature

Date

RELEASE OF INFORMATION

(CHECK ONE OF THE FOLLOWING)

_____ I GIVE permission

_____ I DO NOT GIVE permission

to the Associate Degree Nursing Department to give my name and address to hospitals and other health-related agencies for the purpose of recruiting and sending information. I understand that I am in no way obliged to the contacting agency. In the event that I withdraw from the nursing program, I understand that my name will no longer be made available.

Signature

Date

LICENSURE ELIGIBILITY NOTIFICATION FORM

I hereby verify that I have received and have had the following documents regarding licensure eligibility for Registered Professional Nursing in Texas explained to me) Texas Occupation Code 302.252, 301.257 and 301.542-302.469 and Sections 213.27 -213.30 of Texas Administrative Code (relating to Good Professional Character, Licensure of Persons with Criminal Offenses, Criteria and Procedure Regarding Inteparate Use and Lack of Fitness in Eligibility and Disciplinary Matters, Declaratory Order of Eligibility for Licensure.)

Student Name (Print) _____
Social Security # _____
Date of Birth _____
Signature _____
Date Signed _____

This form is to be signed, dated, and turned in to the ADN office. The form will be placed in your student file in the nursing office.

Alvin Community College Associate Degree Nursing Student Release Form

Student Name: _____

Date: _____

In order to run for an ANSA office or to miss a class day for an ANSA or Alvin College sponsored activity without penalty, a student must have a grade average of 85% or above in his/her nursing courses.

Instructions: The student is responsible for contacting course faculty to obtain the grade & faculty signature(s). The student must turn the completed form into the ADN director.

Students: Please indicate the desired activity by completing the information requested in the blanks:

1) Running for an ANSA office of: _____

2) Attending an ANSA or Alvin College related activity:

a. Name of conference: _____

b. Dates: _____

c. Indicate number of days you will be absent due to this conference:
Lecture _____ Clinical _____

Nursing Course (list all including clinical)	Grade Average greater than 85% ? Circle one	Date	Instructor Signature
	Yes No		
	Yes No		
	Yes No		
	Yes No		
	Yes No		
	Yes No		
	Yes No		

Instructor comments and recommendations: