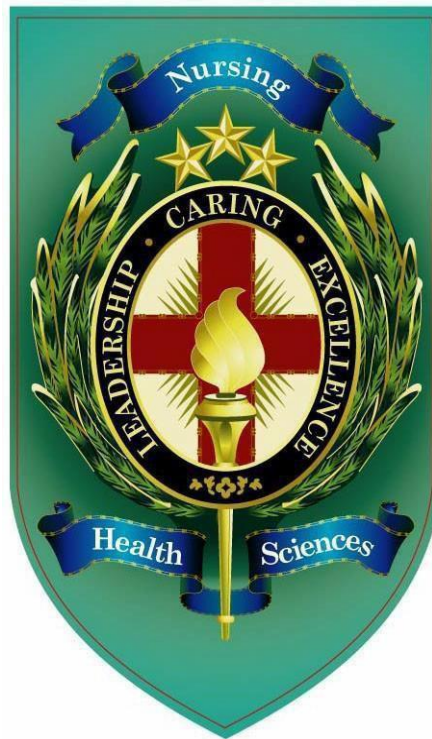


Texas A&M University Corpus Christi  
College of Nursing and Health Sciences



Student Handbook

Revised 2017



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## I. Introduction

### Brief History of the College of Nursing & Health Sciences

In 1972, a delegation of community nursing leaders led by Elizabeth Willis, Chairperson of Registered Nurses Education at Del Mar College, met with the first Dean of the College of Science and Technology, Dr. Ralph Gilchrist, to study a number of successful upper-level nursing programs in the United States. Application for an Upper-Level Nursing Program at University of Corpus Christi (UCC) was made to the Coordinating Board, Texas College and University System. In July 1974, University of Corpus Christi (UCC) one of three universities in the state approved to implement the multiple entry/exit model curriculum designed by the Study Committee on Nursing Education of the Coordinating Board.

**The Baccalaureate Nursing Program:** The Baccalaureate Nursing Program at Texas A&M University-Corpus Christi (TAMUCC) then known as University of Corpus Christi (UCC) was established in 1974. Research conducted by the Study Committee of Nursing Education of the Coordinating Board, Texas College and University System, had identified the need for increased numbers of nurses in Texas at all educational levels, especially those prepared for teaching and leadership. The results also indicated the need for an upper-level nursing program in South Texas. Graduates of the five associate degree nursing programs in the region who wanted to further their education found that the nearest baccalaureate nursing programs were 160 to 220 miles away. The majority of those who moved away from the area to go to college never returned. This migration left an even greater deficit in the numbers of available graduates. (Toward Quality Health Care: The Improvement of Nursing and Nursing Education in Texas, 1974.)

The Baccalaureate Program for Registered Nurses at the University of Corpus Christi (UCC) (Texas A&M University-Corpus Christi) began on a limited scale in the fall of 1974, becoming fully operational in the fall of 1975. Dr. Ruth M. Bakke was the first director of the Baccalaureate Nursing Program. Initial accreditation by the National League for Nursing (NLN) was attained December, 1979, retroactive for eight months. The Baccalaureate Nursing Program was the first RN-BSN program in Texas to be accredited by NLN. Continuing accreditation was granted by the NLN Board of Review in March, 1985. The program was reaccredited in fall, 1992 by NLN with full accreditation to 2002. Accreditation occurred in 1998 by CCNE, with reaccreditation in 2005 and scheduled visit for reaccreditation in Oct 2015.

In 2001, the College of Nursing and Health Sciences received a grant from the Learning Anytime Anywhere Partnership (LAAP) and from the Fund for the Improvement of Postsecondary Education (FIPSE) for the development of an online nursing education track. Through collaboration between Associate's Degree in Nursing (ADN) and Bachelor of Science in Nursing (BSN) educational partnerships, the eLine© track was established and became operational in 2003. The online modular-based nursing education became first online generic Bachelor of Science in Nursing (BSN) in the nation.

In 2010 the CONHS received a grant from the Health Resources and Services Administration (HRSA). The White House and the Department of Defense has repeatedly recognized the

program for its unique mission to fill two critical needs in our nation: a nursing shortage and civilian employment for military veterans. The eLine© Military (ELM) track, is a competency-based online program with face-to-face clinical experience, which facilitates access to a full curriculum to obtain a Bachelor's of Science in Nursing (BSN) degree and pathway to Registered Nurse (RN) licensure. The program developed an individualized Prior Learning Assessment (PLA), awarding the maximum amount of college credit based upon prior learning from medical training and experience obtained while serving in the military.

The eLine© Military Nursing track at Texas A&M University-Corpus Christi, was the recipient of the 2013 American Association of Colleges of Nursing (AACN) Innovations in Professional Nursing Education Award.

**The Graduate Nursing Program:** The Graduate Nursing Program at the Texas A&M University-Corpus Christi was established in 1984 as one of the Corpus Christi State University graduate programs. The program offered registered nurses the opportunity to expand their scope of practice in one of three specialty areas: advanced clinical practice, nursing administration, or nursing education. Students earn their Master of Science in Nursing (MSN) upon completion of core and specialty course work in tracks now known as Family Nurse Practitioner, Leadership in Nursing Systems, and Nurse Educator areas of study. Starting in 1996, nurses who have not earned the BSN degree were also admitted to the MSN program through the RN-MSN entry option. The MSN program initially was accredited by the National League for Nursing in the academic year 1988-89. The Master of Science in Nursing program has maintained accreditation since 1989 and is now currently accredited by CCNE. The MSN program will undergo program review again in October 2015.

With the goal of meeting regional and state needs and as a component of the faculty's commitment to educating the nursing and healthcare leaders for tomorrow, the graduate nursing program has been offered to students in distant sites. Outreach sites supported students living and working in the Rio Grande Valley, Laredo, Temple, Victoria and Weslaco, Texas. The faculty initially drove to these sites, moving shortly to incorporating audio-conferencing technology, then fixed image transmission, progressing to slow scan video-conferencing as the method of course delivery. Faculty had access to the slow scan television after Corpus Christi State University joined the A&M University System in 1989. At that time, the Texas legislature authorized the name change from Corpus Christi State University to Texas A&M University-Corpus Christi. Enrollment in A&M University-Corpus Christi MSN program grew with access to televised real-time classes. Faculty supplemented these televised class interactions through regular travel to the regional sites. By 2002 web-based computer delivery of classes was the norm. The interactive high-definition distance education technology available through the Internet provided access to graduate nursing education for working nurses living and working in rural areas. Neither students nor faculty had to travel to engage in learning activities. The MSN program now offers all of its tracks only through web-based course management systems. The MSN programs were initially was accredited by the National League for Nursing in the academic year 1988-89. The Master of Science in Nursing program has maintained accreditation since 1989 and is now currently accredited by CCNE. The MSN program will undergo CCNE re-accreditation in October 2015 Accreditation.

After Dr. Ruth Bakke was named Dean of Science & Technology, in the 80's, the BSN and MSN programs were chaired by Dr. Susan Nelson and Dr. Elizabeth Erkel. In August, 1989, Dr. Noreen C. O'Neill was invited to Texas A&M University-Corpus Christi to direct the Division of Nursing. Her mission was to reorganize its administrative structure, fortify its infrastructure and help develop new programs. In 1990, after receiving the approval of multiple oversight groups, the generic BSN option was implemented as a four-semester, upper-division nursing major. After Dr. O'Neil retired in 1994, Dr. Rebecca A. Jones (August 1994) assumed the directorship. In spring, 1995, the Division became a School of Nursing and two program coordinator positions were approved. Dr. Mary Jane Hamilton was appointed by the Director as Undergraduate Program and Dr. Claudia Johnston was appointed as Graduate Program Coordinator.

**Health Care Administration and Health Sciences:** An interdisciplinary committee began the Health Care Administration (HCA) minor in 1992. The minor is available to students choosing health care as a focus for future administrative positions in support of the Master's in Public Administration or Business Administration programs. A certificate in Health Care Administration is available for those students who hold a Master's degree in another field and wish to complete a short course of study focused on Health Care Administration. The first group of students to complete the minor graduated with their M.P.A. in May of 1995. Dr. Claudia Johnston served as the founding Program Coordinator. The Bachelor of Science in Health Sciences provides enrichment opportunities at the baccalaureate level for students with technical degrees in Allied Health. The program has been revised to accommodate freshmen choosing Health Science as a major which prepares graduates for a variety of career opportunities in the health care field by providing the management skills necessary for success.

The program was approved by the Texas Higher Education Coordinating Board and the first group of students was admitted in the fall, 1994. The first graduates completed the program in December 1996. Dr. Whitney Bischoff served as the first program coordinator and Dr. William Koprowski joined the faculty in the fall of 1995 as the program coordinator. The current program coordinator, Dr. Sherdeana Owens, joined the faculty in 2010. The Health Sciences Student Association was established in the Fall, 2011 semester. This organization provides opportunities for leadership, networking, community service and socialization.

In fall of 2003, the university administration, with the rapid growth in the School of Nursing proposed to the A&M system and the Texas Higher Education Coordinating Board that the School become a College of Nursing and Health Sciences. In October 2004 the Convocation celebrating the College of Nursing and Health Sciences took place. Dean Mary Jane Hamilton was installed by President Dr. Robert Furgason as the Founding Dean. Dr. Bunny Forgione was appointed Associate Dean and Dr. Karen Koozer-Olson was appointed the Outreach Coordinator. Dr. Linda Cook was appointed Undergraduate Chair and Dr. Eve Layman was appointed Graduate Chair.

The CONHS in 2012) expanded its graduate programs to include a cooperative Doctor of Philosophy in Nursing Science program through a partnership with the Denton campus of the Texas Woman's University (TWU). Students enrolled in this program earn their degree from TWU. Members of the A&M University-Corpus Christi faculty provide student support through their roles on advisory and research committees. The first student graduated from this partnership



in 2013. The College added a new doctoral program with the approval of the Doctor of Nursing Practice program. The first cohort of students will be admitted in fall 2016.

Currently (2015) the administrative structure consists of the Dean (Dr. Mary Jane Hamilton), Associate Dean (Dr. Bunny Forgione), Associate Dean for Graduate Nursing Programs (Dr. Eve Layman), Undergraduate Chair (Dr. Christina Murphey) and Graduate Chair (Dr. Linda Gibson-Young).

### **Accreditation**

The BSN, MSN, and post-graduate APRN certificate at Texas A&M-Corpus Christi is accredited by the Commission on Collegiate Nursing Education (CCNE) (<http://www.aacn.nche.edu/ccne-accreditation>).

The Commission on Collegiate Nursing Education (CCNE)  
One Dupont Circle, NW, Suite 530  
Washington, DC 20036-1120  
Phone: (202) 887-6791  
Fax: (202) 887-8476

Approved by the Texas Board of Nursing (<https://www.bon.texas.gov/>)  
The Texas Board of Nursing (BON)  
333 Guadalupe Street, Suite #3-460  
Austin, TX 78701-3944  
Phone: (512) 305-7400  
Fax: (512) 305-7401

Texas A&M University – Corpus Christi is accredited by Southern Association of Colleges and Schools (SACS) (<http://www.sacs.org/>)

## **II. College Mission, Philosophy, Goals and Conceptual Framework**

**Vision:** Envisioning the future....transforming healthcare through education, research, innovation, & practice.

**Mission Statement:** The College of Nursing & Health Sciences positively impacts the health of the global population through the education of health care leaders and providers of tomorrow with innovative educational programs in the nursing and health professions. The College identifies, attracts, and graduates students of high potential, especially from groups who have been historically under-represented in the organization and provision of health care. This work is enhanced through faculty contributions to community service, leadership, practice and research. These activities are fostered in a collaborative inter-professional and multicultural learning environment promoting a sense of community and caring.

**Philosophy:** The faculty believes that learning is a life-long, interactive process in which both teachers and students are learners. The faculty endeavor to create a learning environment that is flexible and intellectually stimulating, encourages scholarship and promotes self-directed

learning. Student learning is built upon an existing knowledge base and is directed toward socialization into the practice of professional nursing and the health sciences.

Nursing and health science are professions as well as disciplines. Therefore, the faculty strive to maintain expertise in practice. Faculty influence student learning by being role models. (Practice is defined as clinical specialty expertise, research, leadership and other forms of scholarly endeavor.)

Service is of great value to the nursing and health science faculty. As such, they interact and contribute to the internal and external communities that surround them. Through service, the faculty develop a sensitivity to the context in which the nursing and health science programs exist and evolve. This active participation reflects a commitment to the community and serves as a professional standard for the student.

Research and scholarly activity are important parts of the faculty role and the curriculums. Each member of the faculty is involved in research and/or scholarly activity. The research base for professional practice is an integral part of both undergraduate and graduate curriculums. At both levels of education, students utilize the research process to identify and study nursing and issues related to health care. Critical thinking is developed through a variety of assignments aimed at promoting scholarship.

### **College Of Nursing & Health Sciences Goals**

1. To develop within the student the knowledge and skills necessary for beginning professional and advanced health care practice, cultivating basic and specialized abilities needed to successfully pursue a career.
2. To promote the concept of caring and facilitate attainment of a care delivery system sensitive to multicultural diverse communities and their health values.
3. To offer individuals the opportunity to increase the breadth and depth of the theoretical base for health care practice, enhance and expand competence, prepare for role specialization and contribute to the discovery of new nursing knowledge.
4. To provide an educational environment of respect within which students may evolve as broadly educated, responsible and accountable professionals dedicated to the principles of lifelong learning.
5. To build a foundation for graduate education.
6. To ethically serve diverse communities as health care experts, leaders and consultants and advocates of resources.

### **Conceptual Framework**

**Person:** The faculty of the Texas A&M University-Corpus Christi College of Nursing and Health Sciences believes that each individual has value, dignity and worth independent of special endowments or external circumstances and has the freedom to make choices. A person's development requires and is influenced by interaction with the environment. Each individual is characterized by certain life processes that the person uses to interact with the environment. Each person is unique and influenced by, but not determined by, heredity, environment, culture and life experiences.

**Environment:** The environment is viewed as physical, biological, psychological, cultural and social conditions that influence the individual. The relationship between the individual and the environment is dynamic, continuous and reciprocal.

**Health:** Health is multidimensional and encompasses varying states of well being. A health state is the result of an ability to adapt to change, to perceive in accordance with reality and to display a rational and integrated personality.

**Nursing:** Nursing is an applied science and an interpersonal process. Its essence is care. Texas A&M University-Corpus Christi faculty describes this essence in cognitive, affective and psychomotor terms. Caring implies an informed knowledge of the client's condition, behaviors and preferences. It implies emotional responses such as empathy, concern for comfort and respect for human dignity. Caring behaviors include the skillful use of the nursing process directed toward preservation of cultural differences, freedom of choice, promotion of human and environmental growth and development, and the adherence to ethical principles. Nursing's ultimate goal is promoting optimal states of health in individuals, families and communities at all stages of development. Nurses assist clients to help themselves in maintaining and restoring health or in experiencing a peaceful death. These activities create relationships within which the nurse enacts complimentary roles categorized as professional, provider of care or coordinator of care.

Responsible and accountable nursing practice is characterized by the utilization and application of theory and research from nursing and a variety of other related disciplines to plan comprehensive care, implement care based on a high level of expertise and creativity, systematically plan evaluations, identify researchable nursing problems, and provide leadership to improve health care. Peer and interdisciplinary collaboration are sought to facilitate implementation of effective problem solving and decision

### **III. Undergraduate Curricula**

#### **Nursing Undergraduate Program Student Outcomes**

The philosophical foundations of the Texas A&M University-Corpus Christi Baccalaureate Nursing Program are based on the belief that caring is the essence of nursing; that students are unique individuals with differing backgrounds, needs, and interests, and have the freedom and responsibility to make judicious choices. Nursing faculty subscribe to the belief that professional nurses must be well grounded in the arts, sciences, and humanities so that when functioning in roles of care provider or care coordinator, making critical clinical decisions, the nurse has a reservoir of knowledge from which to draw. There are various delivery tracks offered for pre-licensure: face to face, eLine/eMilitary (online) and accelerated. For licensed RN's pursuing a BSN – an RN/BSN track (online) is available.

The expected outcomes of the pre-licensure and RN-degree-completion tracks of the BSN are as follows:

Graduates of this program will:

1. Incorporate the philosophy, "Caring is the Essence of Nursing" into nursing practice.
2. Practice nursing utilizing the nursing process and other systematic approaches derived from the sciences and liberal arts to promote optimum health for individuals, families and communities from diverse populations.
3. Communicate and collaborate purposefully, using creative approaches that acknowledge interdependent roles and relationships.
4. Demonstrate leadership through the application and utilization of theories for the improvement and enhancement of care and health status.
5. Display critical thinking and independent decision-making that utilize and apply theory and research in practice.
6. Show awareness of political, ethical and social issues; accountability for professional practice and commitment for continuing professional development.
7. Accept nursing leadership roles that respond to a changing society and health care delivery system.

**PRE-LICENSURE BACCALAUREATE CURRICULUM PLAN**

**TEXAS A&M UNIVERSITY -- CORPUS CHRISTI  
COLLEGE OF NURSING AND HEALTH SCIENCES**

**SAMPLE GENERIC NURSING BACCALAUREATE CURRICULUM**

**UNIVERSITY CORE CURRICULUM & PRE-NURSING COURSES**

Fall Semester			Spring Semester			Summer Semester		
		hrs			hrs			hrs
ENGL 1301	English Composition I	3	ENGL 1302	English Composition II	3	ECON 2301	Macroeconomics	3
POLS 2305	US Government & Pol	3	MATH 1442	Statistics for Life	4			
<b>BIOL 2401 &amp; Lab</b>	<b>Anatomy &amp; Physiology I</b>	4	<b>BIOL 2402</b>	<b>Anatomy &amp; Physiology II</b>	4	Literature	ENGL 2332, 2333, 2334, 2335 or	3
UCCP 1101	Freshman Seminar	1	UCCP 1102	Freshman Seminar	1		PHIL 1301 or PHIL 2306	
Creative Arts	ARTS 1301, ARTS 1303, COMM 1305, MUSI 1306, MUSI 1307 or THEA 1310	3	HIST 1301	US History from 1865	3			
Students are required to enroll in a learning community. See Academic Advisor.			Students are required to enroll in a learning community. See Academic Advisor.			Maximum hours students are allowed to enroll per summer session =7		
14			15			6		

Fall Semester			Spring Semester			Summer Semester		
		hrs			hrs			hrs
<b>CHEM 1411</b>	<b>General Chemistry I &amp; Lab</b>	4	<b>BIOL 2420</b>	<b>Microbiology &amp; Lab</b>	4	<b>NURS 3342</b>	<b>Use of Pharmacology Principles (10-week course during summer)</b>	3
POLS 2306	State & Local Govt.	3	PSYC 2314	Human Growth & Development	3			
PSYC 2301	General Psychology	3	<b>NURS 4322</b>	<b>Health Alterations</b>	3			
HIST 1302	US History from 1865	3	COMM 1315	Public Speaking	3			
13			13			3		

University Core Curriculum & Pre Nursing = approximately 62-64 hours

**NURSING MAJOR COURSES**

Fall Semester			Spring Semester			Summer Semester		
		hrs			hrs			hrs
NURS 3614	Fundamentals	6	NURS 3550	Nursing Care of Parents/Newborns	5	NURS 4628	Nursing Care of Adults II	6
NURS 3435	Health Assessment	4				NURS 4150	Issues II	1
NURS 3318	Nurse, Therapeutic Communicator	3	NURS 3628	Nursing Care of Adults I	6			
			NURS 3150	Issues I	1			
13			12			7		

Fall Semester			Spring Semester					
		hrs			hrs			hrs
NURS 4318	Nurse as Research Consumer	3	NURS 4660	Community	6			
NURS 4564	Nursing Care Psychiatric Clients	5	NURS 4370	Nurse Coordinating Care	3			
NURS 3548	Nursing Care of Children/Family	5	NURS 4470	Professional Transition	4			
13			13					

<b>Nursing Major = 58 hours</b>			<b>Total BSN = 120</b>					
<b>Nursing Academic Advisors:</b>			Angelica Santillan (A-D)	361-825-2461	<a href="mailto:angelica.santillan@tamucc.edu">angelica.santillan@tamucc.edu</a>			
			Andrea Amaya (M-R)	361-825-3748	<a href="mailto:andrea.amaya@tamucc.edu">andrea.amaya@tamucc.edu</a>			
			Amanda Bocanegra (S-Z)	361-825-3617	<a href="mailto:amanda.bocanegra@tamucc.edu">amanda.bocanegra@tamucc.edu</a>			
			Sam Ramos (eMilitary, D-L)	361-825-3782	<a href="mailto:samuel.ramos@tamucc.edu">samuel.ramos@tamucc.edu</a>			
Revised 12/2017			Rachel Holman (Graduate)	361-825-5893	<a href="mailto:rachel.holman@tamucc.edu">rachel.holman@tamucc.edu</a>			
			Alexandra Shaw (Graduate)	361-8254234	<a href="mailto:alexandra.shaw@tamucc.edu">alexandra.shaw@tamucc.edu</a>			

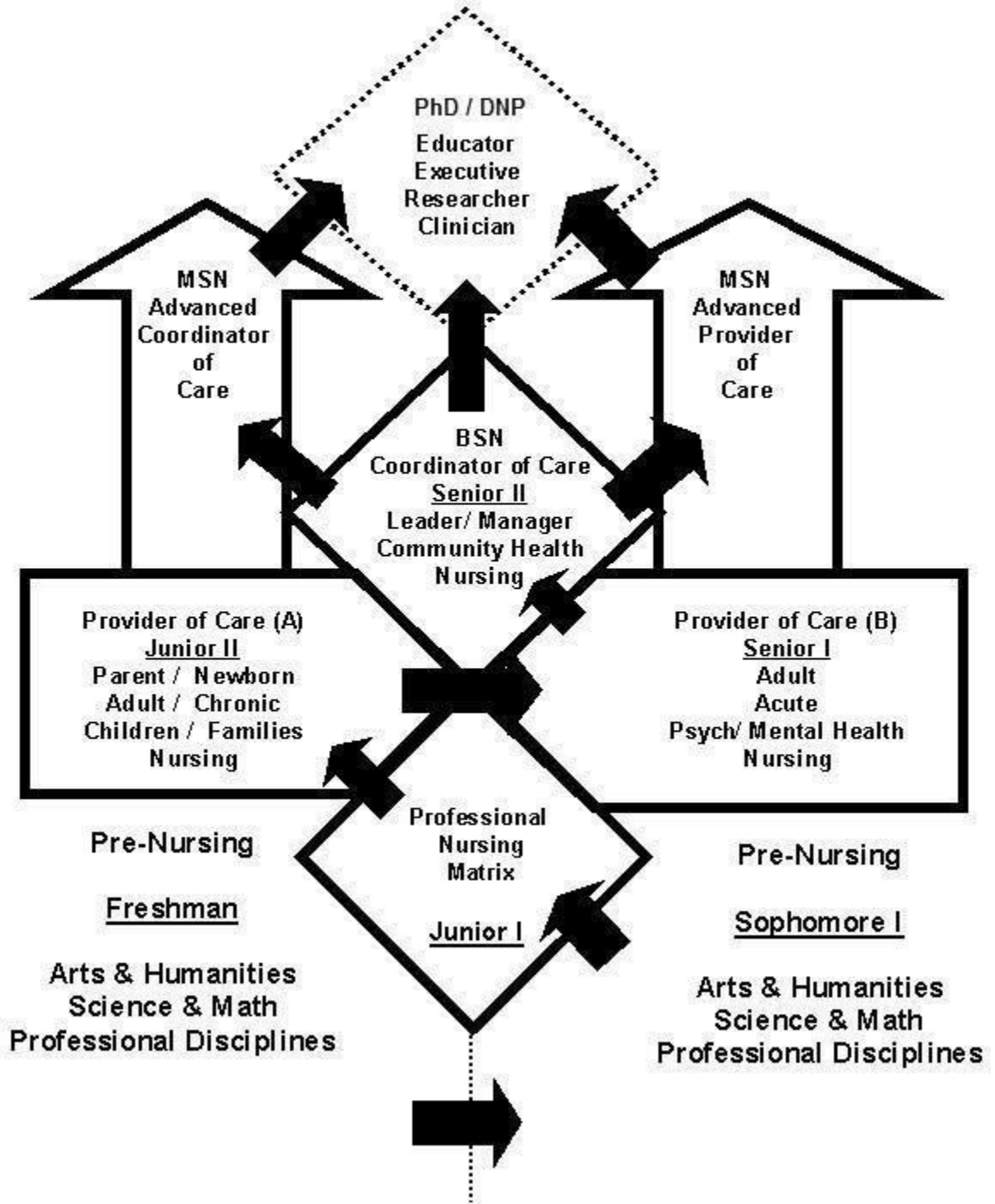
### **Organizational Principle**

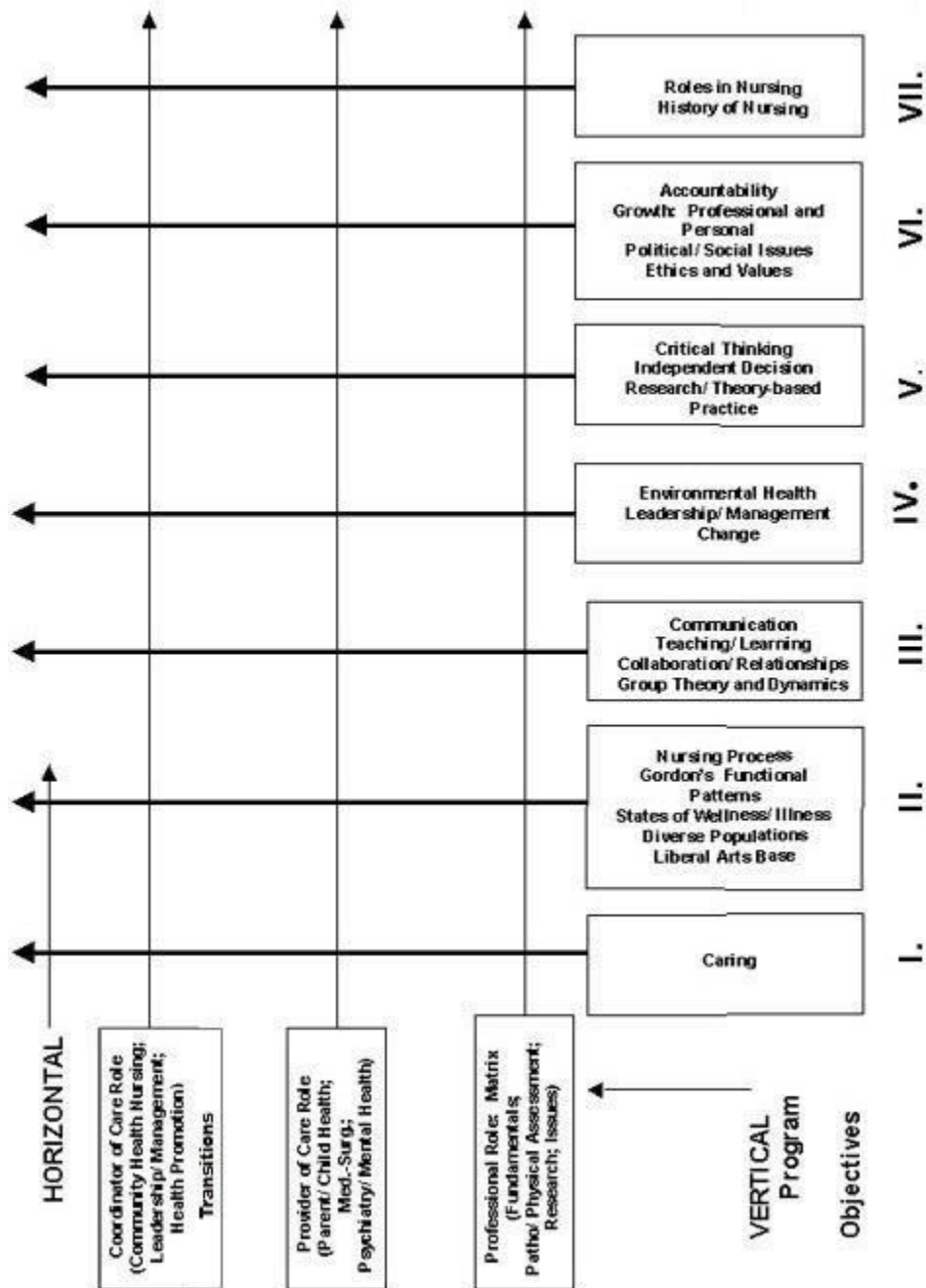
Because of the nurse's need to understand individuals and their environments in order to diagnose and treat human reactions to actual and potential health problems, students must be broadly educated in the classical disciplines of arts, humanities, mathematics, science, aspects of related professional disciplines and nursing. The Texas A&M University-Corpus Christi curriculum is conceptualized as having two years of support knowledge at the freshman and sophomore levels, upon which two subsequent years of nursing courses rest. The Generic Baccalaureate Curriculum on the following page shows the baccalaureate four-year schemata or sequence of courses.

The logic of content distribution and course sequencing was suggested by the AACN document *The Essentials of Baccalaureate Education for Professional Nursing Practice* (March, 1998, 2008). The nurse is described as having three complementary roles: **professional**, with knowledge and skills as a **provider** of care and a **coordinator** of care. Texas A&M University- Corpus Christi faculty designed the first junior semester to consist of professional matrix courses that would undergird provider-of-care courses (Nursing Care of Adults I & II, Nursing Care of Children & Families, Nursing Care of Parents/Newborns and Nursing Care of Psych/Mental Health clients) in the second junior semester as well as the first senior semester. The final semester is comprised of courses dealing with coordination of care in management and community settings. Other matrix courses are found in each semester: research, pharmacology, Health Assessment and issues. This organizational schema is depicted in **Figure 1**. It also demonstrates how the graduate program flows from the baccalaureate curriculum.

FIGURE 1. DEPICTION OF ORGANIZATIONAL PRINCIPLE

Reviewed 2017





**Progressive and Pervasive Themes**

In **Figure 2**, the Horizontal (Progressive) and Vertical (Pervasive) themes are depicted showing how terminal BSN objectives are expected to be threaded throughout each course of the curriculum.



**RN-BSN Track**

The RN-BSN track provides an opportunity for registered nurses who have completed a basic nursing education program to continue their pursuit of a baccalaureate degree with a major in nursing. Emphasis is placed on high-level clinical decision-making, increased therapeutic communication skills, community health care, leadership/management principles and practices, and research directing the professional to be a critical consumer who uses new discoveries to help patients and increase the systematized body of nursing knowledge. Completion of the nursing curriculum with the appropriate level of academic achievement enables the individual to proceed on to graduate study in nursing. The program is designed to utilize and build upon previous education, nursing and life experiences, and special interests and abilities. Its purpose is directed toward enhancing the development of individuals who can think and act for themselves as rational and creative human beings with the desire and courage to use ideas for their own well-being and for the general welfare. Please refer to the current university catalog for curricular elements for the RN-BSN program.

## RN-BSN OPTION CURRICULUM PLAN

### Texas A&M University-Corpus Christi

College of Nursing and Health Sciences

Bachelor of Science in Nursing

RN/BSN Degree Plan

Name:	Admitted:
Banner ID:	Catalog Year: 2015-16
	Fac. Mentor:
	Telephone:

TAMU-CC CORE CURRICULUM				NURSING MAJOR			
may substitute other Texas institution core curriculum						Sem.	Grade Hours
		Sem.	Grade Hours				
ENGL 1301			3	NURS 4318	Research		3
ENGL 1302			3	NURS 4324	Caregiver		3
Literature			3	NURS 3435	Health Assessment		4
HIST 1301			3	NURS 4671	Leadership		6
HIST 1302			3	NURS 4320	Nurse as Educator		3
POLS 2305			3	NURS 4322	Health Alterations		3
POLS 2306			3	NURS 4465	Family Nursing		4
Natural Science			4	NURS 4560	Comm. Health		5
Natural Science			4	NURS 4250	Issues		2
MATH 1442			4		Total		33
COMM 1315			3				
ECON 2301			3				
PSYC 2301			3				
Fine Arts			3				
	Total		45				

NURSING PRE-REQUISITES				NURSING ELECTIVES			
		Sem.	Grade Hours			Sem.	Grade Hours
BIOL 2401			4	NURS 4380	Honors		
BIOL 2402			4	NURS 4396	Ind. Study		
BIOL 2420			4				
CHEM 1411			4				
MATH 1442			4				
PSYC 2314			3				
	Total		23				

UNIVERSITY REQUIREMENTS FOR GRADUATION				ARTICULATION/TRANSFER COURSES			
Foreign Language*			6	30 hours credit			
UCCP 1101/1102			2	Applied Science AD in Nursing			
Computer Literacy *			3	HOURS FULFILLED: _____			
	Total		11				

\*See catalog for requirements

## Course Sequencing Schedule

### Completion within one year

Fall - Semester I	Spring - Semester II	Summer III
NURS 4322 Health Alterations	NURS 3435 Health Assessment	NURS 4320 Nurse as Educator
NURS 4318 Nurse as a Research Consumer	NURS 4250 Professional Nursing Issues	NURS 4671 Nurse as Coordinating Care
NURS 4465 Care of Individual within a Family	NURS 4390 Dimensions in Nursing	
NURS 4324 Nurse as Caregiver	NURS 4560 Nursing Care of Community Health Clients	

### Completion within two years

Fall - Semester I	Spring - Semester II	Summer III
NURS 4318 Nurse as a Research Consumer	NURS 3435 Health Assessment	NURS 4320 Nurse as Educator
NURS 4324 Nurse as Caregiver	NURS 4390 Dimensions in Nursing	NURS 4671 Nurse Coordinating Care
Fall - Semester IV	Spring - Semester V	
NURS 4322 Health Alterations	NURS 4560 Nursing Care of Community Health Clients	
NURS 4465 Care of Individual within a Family	NURS 4250 Professional Nursing Issues	

## **IV. Nursing Graduate Curriculum**

### **Program Goals and Expected Outcomes**

The Graduate Nursing Program aims to provide baccalaureate nurses with learning experiences that will increase the breadth and depth of the student's theory base for nursing practice, enhance and expand their competence, and prepare students for role specialization. Students may complete MSN degree in three different specialties: Family Nurse Practitioner, Nurse Educator, and Nursing Administration.

Registered nurses who have earned a diploma or associate degree in nursing and who meet all other requirements for admission into the MSN degree program are eligible to apply for admission under the RN-MSN option. RN-MSN students also must fulfill additional requirements specific to the RN-MSN option and then will complete the standard coursework in the MSN program.

Emphasis is placed on facilitating health care delivery within multicultural communities. The curriculum has been designed to meet the diverse needs of the nursing community in South Texas. The knowledge is transferable to a variety of settings and provides a foundation for doctoral study.

The expected outcomes of the MSN are as follows:

Graduates of this program will:

1. Critically analyze, interpret and integrate appropriate knowledge, research and theories to meet the health care needs of diverse populations.
2. Apply competent leadership and collaborative skills as members of a multi-professional health care workforce to promote high quality and safe patient care.
3. Design evidence-based plans to sustain quality initiatives that promote a transparent professional environment and contribute to the delivery of safe, high quality care.
4. Integrate research into professional practice through the implementation of translational processes.
5. Demonstrate competence and accountability as clinicians, educators, and leaders in advanced healthcare roles.
6. Model caring, sensitivity and respect in the delivery of health care to culturally diverse populations.
7. Operationalize principles of ethical, legal, financial and economic theories as applied to health care delivery systems.
8. Guide the adoption and use of information, communication technologies and resources to document patient care and improve patient outcomes.
9. Evaluate the effect of legal and regulatory processes on nursing practice, healthcare delivery, and outcomes using critical analyses of policies that influence health services.

### **MSN PROGRAM OVERVIEW**

Building on professional values faculty members select curricular content that contributes to learning, role development and goal achievement. The research process assists the student to critique and validate nursing knowledge.

for application and increased critical inquiry. Examples of practice-oriented research and application to the clinical area are utilized in every clinical course.

Each course selects experiences that are systematically arranged to provide the student with contact and interaction with clients who present diverse backgrounds, problems, needs and requirements for nursing care. Students experience increasing complexity in the planning and provision of care.

The graduate program is delivered primarily through computer technology. Various teaching-learning practices designed for the adult learner have been adapted through instructional technology principles for delivery through an Internet based process. Clinical laboratories provide students with experiences that help the professional nurse make the transition to the advanced practice role. Students are required to have computers and access to the Internet in order to communicate with faculty and each other. All students must have email accounts. A toll-free number is available for phone contacts with instructors. In clinical courses, full-time faculty members are paired with clinical faculty and share clinical supervision responsibilities. Students may be required to come to campus to attend group activities or to work with faculty members to complete course requirements. Required campus activities will be announced to students in a timely manner so their work schedules can be accommodated.

Students' clinical experiences offer a plethora of opportunities that are arranged to meet national standards, students' education and practice backgrounds, and the objectives of the course. Multiple clinical sites are utilized that afford students experiences that have a wide range of patients with differing race and heritage, age, clinical conditions and health needs, and benefit coverage. The clinics are in both rural and urban areas and the students work with a team that includes nurse practitioners, physicians, physician assistants, clinical nurse specialists, healthcare and nursing administrators, specialty providers and social services. South Texas is noted for its ethnic diversity, and the curriculum of the College integrates concepts about culture-specific care. The client/family/community plan of care integrates developmental, cultural, legal and ethical considerations as well as direct and indirect care in diverse clinical settings. Students also are involved with the faculty in the discovery and development of new clinical learning situations.

In order to progress, students must meet prerequisites for individual courses. Course prerequisites are based on sequencing of course content. Students who do not meet these requirements risk not successfully completing a course or slowing the course progression. Prerequisites are periodically reviewed by the faculty, and modified based on academic integrity. Safe practice is a basic component of many policies, and is integral to advanced practice. Students are not allowed to progress if they are unsafe. Students that have an encumbered or restricted license from the Texas State Board of Nursing are required to withdraw from the program until they have an unencumbered

### **Graduate Student Admission and Progression Requirements**

Graduate student admission requirements are documented in the Texas A&M University-Corpus Christi Catalog. Students are encouraged to read that section carefully to ensure that all admission requirements are complete.

Entrance requirements that frequently cause student admission delays are:

**Undergraduate Statistics Course:** All graduate students are required to have an undergraduate statistics course (minimum grade of C) for entry into the graduate program. Students are responsible to document this via a transcript that is submitted to the degree counselor.

**Undergraduate Health Assessment:** All graduate students are required to have an undergraduate health assessment course with minimum grade of C. If the course is not evident on the transcript, the student may present documentation from the undergraduate program that shows where this content was integrated into the curriculum. Course syllabi, course descriptions and letters from responsible faculty are usually provided to document integrated content.

**Transfer Credit:** Students in the MSN Program may transfer in up to 12 credits as long as those credits meet University limits (7 years, a B grade or higher). Faculty will evaluate all course work for transferability. If students wish to transfer course work from another university they must submit a transcript and documentation (of course descriptions, syllabi and/or letters from the university where the course was taken) to the advisor. It is the student's responsibility to submit all documentation in a timely manner for evaluation.

**Malpractice Insurance:** Each student is assessed a malpractice fee. This fee covers the student in the student role and cannot be waived if the student carries professional malpractice insurance, nor will it cover the student in a non-student situation. The fee is standardized for all students and is not prorated on the number of clinical hours.

**E-Mail Accounts:** All graduate students are required to have access to an E-mail account. Electronic communication is essential to the effective and efficient communication within the programs. Faculties primarily use Word for Windows for communication with the students. Students are responsible for checking their E-mail in a timely fashion.

**Figure 3 - Graduate Programs**

<b>Core Graduate Nursing Courses (12 sem. hrs.)</b>		<b>Sem. Hrs.</b>
NURS 5310	Science in Nursing	3
NURS 5314	Research Design in Nursing	3
NURS 5315	Diverse Care Environments	3
NURS 5316	Introduction to Advanced Practice Role Development	3
<b>Family Nurs Practitioner</b>		<b>Sem. Hrs.</b>
NURS 5322	Advanced Pharmacology	3
NURS 5323	Finance for the Nurse Practitioner	3
NURS 5326	Advanced Pathophysiology	3
NURS 5341	Wellness and Health Promotion	3
NURS 5624	Health Assessment and Differential Diagnosis	6
NURS 5644	Management of Acute and Chronic Conditions I	6
NURS 5645	Management of Acute and Chronic Conditions II	6
NURS 5746	Integrated Clinical Practice (Capstone Course)	7
<b>Total</b>		<b>49</b>
<b>Nurse Educator</b>		<b>Sem. Hrs.</b>
NURS 5324	Advanced Health Assessment	3
NURS 5326	Advanced Physiology with Pathophysiologic Applications	3
NURS 5351	Advanced Pharmacology for Nurse Educators	3
NURS 5352	Nursing Curriculum Planning and Development	3
NURS 5353	Theory and Nurse Concepts for Nurse Educator	3
NURS 5354	Assessment, Measurement & Evaluation in Nursing	3
<b>Education</b>		
NURS 5355	Instructional Methods / Strategies	3
NURS 5459	Education Practicum for the Nurse Educator	4
<b>Total</b>		<b>37</b>
<b>Nursing Administration</b>		<b>Sem. Hrs.</b>
NURS 5331	Nursing Informatics	3
NURS 5360	Health Care Financial Management / or HCAD 5325	3
<b>Healthcare Financial Management</b>		
NURS 5362	Leadership Theories in Nursing Practice	3
NURS 5364	Organizational Design and Behavior in Nursing	3
<b>Practice Environments</b>		
NURS 5365	Quality and Outcomes Management	3
NURS 5469	Patterns of Care Delivery (Capstone Course)	4
HCAD 5320	Health Economics and Policy	3
HCAD 5330	Health Law and Ethics	3
<b>Total</b>		<b>37</b>

## V. College Organization and Infrastructure

### Organization

Texas A&M University - Corpus Christi is a four-year comprehensive university composed of five colleges (Science & Engineering, Education, Business, Nursing and Health Sciences and Liberal Arts). There are more than 61 undergraduate and graduate degree programs among the colleges.

The College of Nursing and Health Sciences is administered by a Dean who reports to the Provost and Vice-President for Academic Affairs. The Associate Deans are responsible for the planning, development, administration and management of all undergraduate and graduate nursing, health sciences and health care administration programs.

The organizational structure of the College. See University website- College of Nursing and Health Sciences: [http://conhs.tamucc.edu/about/assets/org\\_chart\\_11-14-17.pdf](http://conhs.tamucc.edu/about/assets/org_chart_11-14-17.pdf)

Students are encouraged to interface within the structure on several different planes:

1. Student input to curriculum and policy is facilitated by a student representative on the curriculum committees at both the undergraduate and the graduate levels.
2. Students who have a concern about an individual course first should seek clarification with the course instructor. If the concern persists, then the student should consult with the Course Manager, Coordinator if applicable, Department Chair, and the Associate Dean - in that order.
3. If the student has concerns about issues related to the outreach site, the Site Clinical Coordinator should be contacted about the issues, then the Graduate and Undergraduate Department Chairs, and the Associate Dean.
4. Secretaries are available to the students for tasks that are delineated by the faculty, such as collecting papers or documenting immunizations.
5. The College and Health Sciences advisors work with students by appointment on degree plans, admission and graduation requirements.

### Undergraduate Department Committee

**Membership:** Members of the committee will be faculty with teaching 50% or greater responsibilities in the Undergraduate Program. Students, elected by the student body representing their program, will be non-voting participants on this committee. The chair of the Undergraduate Department will serve as Chair of the Undergraduate Department Committee. Two thirds eligible members shall constitute a quorum.

**Meetings:** Department meetings will be held monthly. Minutes of the meeting will be recorded and filed electronically to the designated repository.



## **Functions:**

- Handles issues related to the pre-licensure and articulated baccalaureate nursing and health science programs.
- Review and evaluate the undergraduate curriculum.
- Recommend new courses and program offerings.
- Present proposed curriculum changes to the FOW.
- Provide a forum for the review of student input regarding curricular matters.
- Maintain SACS, BON, CCNE, and other specialty standards.
- Establish academic standards for the undergraduate program.
- Conduct a systematic evaluation of the undergraduate program.

## **Graduate Department Committee**

**Membership** - Members of the faculty with teaching 50% or greater responsibilities in the graduate nursing program. Graduate students, elected by the student body, will be non-voting participants on this committee. The chair of the Graduate Department will serve as Chair of the Graduate Department Committee. Two thirds eligible members shall constitute a quorum.

**Meetings** - Department meetings held monthly. Minutes of meeting will be recorded and filed electronically in designated repository.

## **Functions -**

- Handles issues related to the graduate nursing programs
- Reviews and evaluates the graduate curriculum
- Recommends new course and program offerings to the FOW
- Presents proposed curriculum changes to the FOW
- Provide a forum for the review of student input regarding curricular matters
- Maintain SACS, BON, CCNE and other specialty accrediting standards.

## **VI. Resources**

### **Nursing Learning Resource Center**

The Nursing Learning Resource Center (NLRC) is composed of various rooms available to students. These are located on the second floor of Island Hall. The hours of availability are posted each semester. Staff available to assist you includes a Lab Manager/Coordinator and Research/Computer Graduate Students.

There are many computerized programs that can be utilized in the Nursing Learning Resource Center. A few are on reserve in the Media Center of the Bell Library. We also have a collection of videos that can be viewed in the Nursing Learning Resource Center as well as in the Bell Library Media Center. Your professors will assign various programs to be completed as part of your reading assignments.

## **Center for Academic Student Achievement (CASA)**

The Center for Academic Student Achievement (CASA) is an academic student support service program designed to improve the academic skills of University students. CASA offers a wide variety of services and all students are encouraged to take advantage of them. These programs are designed to improve the retention and graduation rates of the University students. The CASA's primary service is peer tutoring which provides free academic assistance to students.

## **Success Counselors**

The CONHS has three PhD students who provide support to students under the supervision of Johanna Dubose, in the areas of study skills, psycho-social support, test-taking and other support.

## **Study Guidelines**

- Rule of thumb: For every 1 hour in class, 2 to 3 hours should be spent in study time external to the class. NOTE: Arrive a few minutes before class with the appropriate class notes, etc.
- Read all assigned material before each class.
- During class, pay attention, take notes, and ask questions about material you do not understand.
- Review notes after each class. Record any unanswered questions to pose to professor at next class meeting.
- If difficulties are experienced in receiving passing grades on assignments, DO NOT WAIT UNTIL THE MID-TERM OR FINAL. Schedule an appointment with your professor. Use resources available in the NLRC and Center.
- If advice and counseling are needed regarding progression policies, see your faculty advisor, Program Coordinators or AssociateDean.
- If solutions are not obtained, make an appointment with the Dean.
- In attempting to resolve difficulties, use the following chain of communication: Professor, Course Manager, appropriate Program Coordinator, Associate Dean and Dean.

## **Other Resources**

The University has other resources available to the student. The University Student Handbook can be downloaded at [http://academicaffairs.tamucc.edu/rules\\_procedures/](http://academicaffairs.tamucc.edu/rules_procedures/)

The following are some of those services:

- Career Planning and Center
- University Center
- University Center
- Office of Student Financial Assistance
- Recreational Sports
- Tutoring and Center
- Office of Admissions

- Office of the Registrar
- The Office of Special Populations coordinates services for:
  - International Students
  - Students with Disabilities

## **VII. Student Organizations**

### **Student Nurses Association**

A Texas A&M University-Corpus Christi chapter of the Texas Student Nurses Association was established in the academic year 1992-93. All baccalaureate candidates are encouraged to join.

### **Student Government**

There is a fully functioning university-level Student Government (825-5745) on the Texas A&M University-Corpus Christi campus. All students are encouraged to participate in its activities and to run for elected office. See Student Life Director for more details.

### **American College of Healthcare Executives**

The American College of Healthcare Executives (ACHE) provides a Higher Education Network where students in health care administration, the health sciences and nursing administration can meet, exchange ideas and advance the goals of the ACHE on a local, regional and national level. These goals include remaining current on healthcare management issues, expanding healthcare management knowledge and helping to shape the current and future environment of healthcare management. The ACHE Higher Education Network sponsors student organizations in undergraduate and graduate programs. Applications and information can be obtained from the Coordinator of Programs in Health Sciences and Health Care Administration.

**Sigma Theta Tau International - Honor Society of Nursing, Eta Omicron Chapter**  
Sigma Theta Tau is the international honor society of nursing. Chapters exist at universities with nationally accredited baccalaureate nursing programs. The purposes of the society are to recognize superior achievement in nursing, recognize the development of leadership qualities, foster high professional standards in nursing, encourage creative work and strengthen commitment to the ideals and purposes of the nursing profession. Membership in Sigma Theta Tau is an honor conferred on baccalaureate and graduate students who have demonstrated excellence in the nursing programs and community leaders with baccalaureate degrees who demonstrate excellence in leadership positions.

## **VIII. Rights and Responsibilities**

### **Rights**

- Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.
- The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.
- Each institution has a duty to develop policies and procedures which provide and safeguard the students' freedom to learn.

- Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, life style, disability, or economic status.
- Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.
- Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.
- Information about student views, beliefs, political ideation, or sexual orientation which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.
- The student should have the right to have a responsible voice in the determination of his/her curriculum.
- Institutions should have a carefully considered policy as to the information which should be a part of a student's permanent educational record and as to the conditions of this disclosure.
- Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.
- Students should be allowed to invite and to hear any person of their own choosing within the institution's acceptable realm, thereby taking the responsibility of furthering their education.
- The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student council, student membership or representation on faculty committees.
- The institution has an obligation to clarify those standards of behavior which it considers essential to its educational mission, its community life, or its objectives and philosophy.
- Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.
- As citizens and members of an academic community, students are subject to the obligations which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.
- Students have the right to belong or refuse to belong to any organization of their choice.
- Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.
- Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.
- Dress code, if present in school, should be established with student input in conjunction with the school director and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.

- Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.
- Students should have a clear mechanism for input into the evaluation of nursing faculty.

Adopted from: The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).

### **Student Responsibilities Within the College of Nursing and Health Sciences**

Students should assume responsibility for:

- Representative participation in curriculum development by:
  - Attending all scheduled meetings
  - Preparing ideas, comments, reactions, and suggestions
  - Sharing ideas, comments, reactions and suggestions
  - Polling students for their views, comments, reactions and suggestions
  - Formulating mechanisms to increase input
  - Following through with assignments regarding curriculum activities
- Participation in curriculum implementation by:
  - Attending classes
  - Following through with class and laboratory assignments
  - Preparing in advance for scheduled classes and laboratory sessions
  - Maximizing all learning opportunities
  - Resisting a focus limited to minimal achievement
  - Sharing learning experiences with peers
  - Striving constantly to broaden their general education base
  - Transferring previous learning
  - Fostering effective relationships with members of the interdisciplinary health team
  - Abiding by the established policies and procedures
  - Assuming responsibility for their own learning experiences
  - Seeking new and different learning experiences
  - Finding opportunities for decision making, independent judgment and self-direction
  - Making fully operational the philosophy and conceptual frameworks
  - Contributing to research and scholarly activities
  - Preparing one's own projects, papers, thesis, dissertation and other assignments
  - Maximizing learning through independent study
- Participation in the evaluation of the curriculum by:
  - Appraising self in relation to stated course, level and end-of-program behavioral expectations
  - Appraising faculty and course structure in relation to their facilitation of the meeting of stated course, level and program goals
- Adhere to the following ethical principles:
  - Advocate for the rights of all clients
  - Maintain client confidentiality.

- Take appropriate action to ensure the safety of clients, self, and others.
- Provide care for the client in a timely, compassionate and professional manner.
- Communicate client care in a truthful, timely and accurate manner.
- Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
- Promote excellence in nursing by encouraging lifelong learning and professional development.
- Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
- Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care
- Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
- Encourage faculty, clinical staff, and peers to mentor nursing students.
- Refrain from performing any technique or procedure for which the student has not been adequately trained.
- Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
- Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorizations are obtained from clients regarding any form of treatment or research.
- Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
- Strive to achieve and maintain an optimal level of personal health.
- Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
- Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

See TAMUCC policy 13.02 below. Adapted form the Student Bill of Rights and Responsibilities adopted by the NSNA House of Delegates in April, 1991. Reviewed and Revised 2006.

**"The nurse provides services with respect for human dignity and the uniqueness of the client, unrestricted by considerations of social or economic status, personal attributes or the nature of health problems." - from *Nursing Code of Ethics***

### **Student Rights and Obligations**

University Rule 13.02

Approved February 27, 1995 (MO 44-95)

Revised September 26, 1997 (MO 181-97)

Revised September 26, 2008 (MO 328-2008)

Revised August 8, 2013 (MO 192-2013)

Next Scheduled Review: August 8, 2018

### **Policy Statement**

This policy outlines the core rights of students at the universities (academic institutions) of The Texas A&M University System (system) and the responsibilities with which they are associated.

### **Reason for Policy**

This policy provides students, faculty, and staff with a clear message regarding the value of students as individuals and the contributions they can make when given the freedom to do so. It also recognizes that their opportunity for education is only limited by the respect which they give to fellow students, faculty, staff and others.

### **Procedures and Responsibilities**

- The rights of students are to be respected. These rights include respect for personal feelings, freedom from indignity of any type, freedom from control by any person except as may be in accord with published rules of the system academic institutions, and conditions allowing them to make the best use of their time and talents toward the objectives which brought them to the system academic institutions. No officer or student, regardless of position or rank, shall violate those rights; no custom, tradition or rule in conflict will be allowed to prevail.
- Students are expected at all times to recognize constituted authority, to conform to the ordinary rules of good conduct, to be truthful, to respect the rights of others, to protect private and public property, and to make the best use of their time toward an education.

## **IX. POLICIES AND REGULATIONS**

### **UNIVERSITY CATALOG**

The Texas A&M University-Corpus Christi Catalog is available at: <http://catalog.tamucc.edu>. Students are responsible for the policies contained within the catalog.

### **UNIVERSITY STUDENT HANDBOOK**

The Texas A & M University-Corpus Christi Student Handbook is available at: [http://academicaffairs.tamucc.edu/rules\\_procedures/](http://academicaffairs.tamucc.edu/rules_procedures/)

## **ACADEMIC HONESTY AND PROFESSIONAL INTEGRITY POLICY COLLEGE OF NURSING AND HEALTH SCIENCES**

### **Academic Honesty and Professional Integrity Policy**

Texas A&M University-Corpus Christi strives to protect its educational community and to maintain social discipline among its students and student organizations. The University endeavors to foster the development of students who are ethically sensitive and responsible community members. Since students serve as representatives of the A&M- Corpus Christi campus community, inappropriate behavior, whether occurring on or off campus, will be investigated and adjudicated in a manner pursuant with the institution's educational and community development goals. Consistent with this purpose, reasonable efforts will be made to foster the personal and social development of those students who are found responsible for violations of University regulations and local, state, or federal law. The Texas A&M University-

Corpus Christi. Student Code of Conduct is available on-line:  
<http://judicialaffairs.tamucc.edu/studentcofc.html>.

Honesty is defined as truthfulness and integrity. Academic dishonesty is broadly defined as an act that functions to give a student unfair scholastic advantage. More specifically academic dishonesty is presenting any one or all course assignments as the student's original work when it/they are not; unless indicated by documented approval of the professor or pre-approved group work assignments. Course assignments include but are not limited to: examinations, written assignments, quizzes, research projects and oral presentations.

Article III of the Student Code of Conduct addresses academic honesty. Specific violations of the *Student Code of Conduct* include, but are not limited to:

**Academic Misconduct:** engaging in an act that violates the standards of the academic integrity policy as described in the *Student Code of Conduct* and *Procedure for Academic Misconduct Cases*. Any behavior specifically prohibited by a faculty member in the course syllabus or class discussion may be considered as academic misconduct.

Additionally, possessing, using, buying, stealing, transporting, selling or soliciting in whole or in part items including, but not limited to the contents of an un-administered test, test key, homework solutions or possession at any time of current or previous test materials without the instructor's permission will be considered academic misconduct.

**Cheating:** intentionally using or attempting to use unauthorized materials, information, notes, study aids or other devices or materials in any academic exercise.

*Examples:*

- Copying from another student's paper or receiving unauthorized assistance during a quiz, test or examination.
- Using books, notes or other devices (e.g. calculators, cell phones, or computers) when these are not authorized.
- The acquisition, without permission, of tests or other academic material belonging to a member of the University faculty or staff.
- Unauthorized collaboration on exams.
- Selling, giving or exchanging completed exams to a student who has not yet taken the test.

**Plagiarism:** intentionally and knowingly presenting the work of another as one's own with the exception of information that is generally accepted as common knowledge.

*Examples:*

- Using another's work from print, web or other sources without acknowledging the source.
- Quoting from a source without citation.
- Using facts, figures, graphs, charts or information without acknowledgement of the source.
- Using a past assignment, the student has completed as a portion of a new assignments, without providing citation. Please note that without instructor permission this is also considered a multiple submission violation.

**Multiple Submissions:** submission of substantial portions of the same work (including oral reports) for credit more than once without authorization from the instructors for which the student submits the work.



*Examples:*

- Submitting the same paper for credit in two courses without instructor permission.
- Making minor revisions in a credited paper or report (including oral presentations) and submitting it again as if it were new work.

**Collusion:** Intentionally or knowingly helping or attempting to help another to commit an act of academic dishonesty. This includes, but is not limited to, the unauthorized collaboration with another individual in progressing forward on academic assignments.

*Examples:*

- Knowingly allowing another to copy from one's paper during an examination or test.
- Distributing test questions or substantive information about the material to be tested before a scheduled exercise.
- Deliberately furnishing false information in regards to an academic integrity investigation.
- Working with another student on a take home test or homework assignments without permission from the instructor.
- Discussing the contents of a completed exam or other assignments with a student who will take the exam or complete the assignment in the future.

**Fabrication, Falsification, or Misrepresentation:** intentional altering or investing of any information or citation that is used in assessing academic work.

*Examples:*

- Inventing, counterfeiting or omitting data and/or results such that the research is not accurately represented in the research record.
- Falsely citing the source of information.
- Altering the record of or reporting false information about the practicum or clinical experiences.
- Altering grade reports or other academic records.

**Professional Integrity:** The student nurse enrolled in the College of Nursing at Texas A&M University – CC is preparing to enter the profession of nursing and is expected to demonstrate professional integrity in academic and clinical practice areas. Professional conduct includes but is not limited to the following: university, college of nursing, hospital, agency and community guidelines, rules, regulations and laws related to behavior as determined by these entities.

- For specific University Code of Conduct, see <http://judicialaffairs.tamucc.edu/studentcofc.html>.
- For the Texas Board of Nursing student conduct guidelines, see the Nurse Practice Act available at: <https://www.bon.texas.gov/>, and the guidelines for Unprofessional Conduct at: [http://www.bon.texas.gov/rr\\_current/217-12.asp](http://www.bon.texas.gov/rr_current/217-12.asp)

### **Violations of Professional Integrity**

According to the College of Nursing, violations of professional integrity (unprofessional conduct) include those identified by the University Student Code of Conduct, College of Nursing and the assigned clinical area such as hospital, agency and community. Additionally, unprofessional conduct includes but is not limited to:

- Untimely submission of academic and/or clinical practice assignments.
- Classroom misconduct that is disruptive of the environment including but not limited to: tardiness, talking among students during lectures, challenging the classroom behavioral

guidelines identified in the syllabus, sleeping, continual arguing of test questions and rudeness to the faculty/guest speaker.

- Clinical misconduct that is disruptive to the practice area includes but is not limited to: tardiness, unprofessional dress, taking longer than the assigned breaks, rudeness/insubordination to hospital staff and unprofessional or inappropriate language or behaviors.

### **Sanctions for Violations**

Consistent with the University's Policy on Student Conduct the following actions may be instituted when a violation occurs:

- Verbal warning
- Written reprimand (See Appendix A)
- Requirement to re-do or make up the work in question
- Requirement to submit additional work
- Dismissal from the classroom or clinical area
- Diminishing the grade on the work in question
- Assignment of a failing grade (an "F") to the work in question
- Assignment of a failing grade (an "F") for the course in question
- Referring the student to the University Judicial Review System (Student Code of Conduct)

The faculty will determine the appropriate level/s of sanctions consistent with their judgment about the seriousness of the violation. The faculty will notify the appropriate Department Chair and Associate Dean.

### **See Appendix A for Written Reprimand Form**

**Grade Appeal Policy and Process** (in accordance with Texas A&M University-Corpus Christi Student Grade Appeal Procedure 13.02.99.C2.01)

#### **1. College Grade Appeal Committee**

1.1 Each of the academic colleges will have a College Grade Appeal Committee (CGAC) made up of no fewer than three faculty members, one of whom will serve as Chair of the CGAC, and two students to consider student grade appeals. At minimum, college policy will specify each of the following:

- 1.1.1 Appointment of Faculty Members: the process of selecting faculty members for the CGAC, qualifications, required training, and term of service.
- 1.1.2 Appointment of Student Members: the process of selecting student members for the CGAC, qualifications, required training, and term of service.
- 1.1.3 Summer Appointments: provisions for summer appointments to the CGAC in the event that regularly appointed members are unavailable.
- 1.1.4 Replacement or substitutions: provisions for replacement of Committee members unable to serve, or substitutions for any member of the Committee in any way involved in a particular case.

## 2. The Appeal Process

2.1 With the advice of the Office of Judicial Affairs and the approval of the Office of the Provost, each of the academic colleges will establish procedures to include the steps and actions indicated below:

### 2.1.1 Presentation of Grievance to Instructor (Informal)

2.1.1.1 The instructor of the class is the primary authority with respect to a student's proficiency and final grade in that course. Most problems or complaints can be resolved through discussions between the student and the instructor. Therefore, before beginning the formal appeal process the student must discuss the matter with the instructor unless the instructor is, for any reason, unavailable.

### 2.1.2 Appeal to Department Chair

2.1.2.1 If the student believes the matter is not satisfactorily resolved at the student-faculty level, or if the instructor is unavailable or no longer with the university, an appeal of the final grade in the class may be submitted, in writing, to the appropriate Department Chair in the college in which the course is taught. (If the course is a First-year seminar, the student may submit the appeal to the Director of University Core Curriculum Programs.)

This formal written appeal should be initiated no later than, for traditional on campus courses, 15 business days of the start of the next regular long (15 week) semester. For courses offered in short-term format, the College may set other appropriate limits for the initiation of a formal written appeal.

The Department Chair will consult with the student and the instructor to attempt a successful resolution of the grievance. If successful, the Department Chair will issue to the student and instructor a written statement of the findings and any actions agreed to and follow up to see that any such actions are executed.

If no satisfactory resolution can be found, the Department Chair will refer the matter, normally within 5 business days, to the Associate Dean for a hearing by the College Grade Appeal Committee. The Department Chair will secure from all parties whatever information he or she deems helpful to making a decision and will issue to the student, instructor, and Associate Dean of the college a written statement of findings indicating that this stage of the appeal process is completed. If the instructor in the case is the Department Chair the role of this officer, as described above, will be assumed by the appropriate college Associate Dean.

### 2.1.3 Action by the Associate Dean of the College

2.1.3.1 The Associate Dean will schedule a hearing before the College Grade Appeal Committee normally within 20 business days. The case will be heard

at a time and place that does not conflict with class schedules of the students and faculty involved. If the hearing is set with the concurrence of the parties and the student or instructor decides he/she cannot attend, the hearing may proceed as scheduled. If the instructor in the case is the Associate Dean the role of this officer, as described above, will be assumed by the appropriate college Dean.

### 3. Proceedings of the College Grade Appeal Committee

3.1 Each of the academic colleges will include at least the following elements in the procedures of the College Grade Appeal Committee.

3.1.1 Burden of Proof: The burden of proof shall rest with the student.

3.1.2 Standard of Proof: The standard of proof shall be a preponderance of the evidence.

3.1.3 Quorum: A statement of what shall constitute a quorum of the College Grade Appeal Committee.

3.1.4 Objections to Panel Membership: While the student will have no right to preemptory challenge or challenge for cause of any Committee member, the CGAC may, by majority vote, recess to consider a student objection in closed session. In closed session the member in question may choose to recuse themselves, a majority of the Panel may vote to recuse the member, or a majority of the Panel may vote to continue with the member in question impaneled. If the member is recused for any reason and the remaining members of the Panel present constitute a quorum, the hearing will continue. If after such recusal the membership present does not constitute a quorum, the hearing will be rescheduled and a substitute member of the Panel will be appointed.

3.1.5 Privacy: The proceedings, findings, and recommendations shall not be open to the general public or available to any individuals other than those involved with the case.

3.1.6 Hearing Protocol: College procedures shall include at least the following elements of hearing protocol.

3.1.6.1 Role of the Chair: The Chair of a CGAC will preside at the hearing, maintain orderly proceedings and assure that all parties receive a fair hearing. The

Chair will be a voting member of the CGAC. The Chair will keep appropriate records of meetings and actions of the CGAC and is responsible for all communications by the CGAC with other officials and parties to a hearing. The Chair will have the right to adjust procedures, given the circumstances at issue, to ensure fairness.

- 3.1.6.2 Evidence and Testimony: The Committee shall hear all parties to the case and review all evidence presented. Both the faculty member and student shall be present at the same time during the formal hearing. Students not residing at or near Texas A&M University-Corpus Christi may request to attend the hearing via video conference call, as appropriate.
- 3.1.6.3 Counsel: All parties to the hearing may be accompanied by another person in an advisory capacity only. Such person may not testify or ask questions.
- 3.1.7 Decision: The College Grade Appeal Committee will determine the facts of the case and attempt to affect a fair and appropriate resolution to the complaint. Depending on the circumstances of the case, the CGAC may recommend to the Associate Dean of the College that 1) the original grade of the instructor be upheld, or 2) that the grade in question be changed to a specific alternate grade. (In cases where the instructor is no longer affiliated with Texas A&M University-Corpus Christi, the Dean may initiate the change of grade, if so requested).
- 3.1.8 Notification of Findings: The Chair of the CGAC will present its findings and recommendations, in writing, to the Associate Dean (or Dean, if the Associate Dean is a party to the case) normally within five business days after completion of its hearings and deliberations. The notification should include a short summary of the facts of the case, the hearing, and the specific recommendations of the committee. The Associate Dean (or Dean) will send written notification of the decision to the student and the faculty member involved normally within five business days after receiving the CGAC's findings and recommendations. This decision is final.

## **College of Nursing and Health Sciences Student Grade Appeal**

The College of Nursing and Health Sciences (CONHS) adheres to the University's student grade appeal procedures and follows those guidelines. (**University Website, Section 13.02.99.C2.01**). (**Revised May 13, 2013**).

### **1. General Assumptions**

**1.1** The CONHS faculty in the classroom environment and clinical area should encourage discussion, inquiry, and expression. Student performance, however, should be evaluated solely on an academic basis and the Standards of Care upheld in the rules and regulations of the Texas Board of Nursing and not on opinions or conduct in matters unrelated to academic standards.

**1.2** Faculty are responsible for documenting objectives in the syllabus, setting standards for each course, and making clear the means of evaluation for purposes of grading students. Students are responsible for class attendance and/or online participation, for learning the content of any course of study and for maintaining standards of academic performance established for each course in which they are enrolled. Students who *violate academic integrity and regulations (see current University Catalog and Student Handbook) or demonstrate disruptive behavior will be held accountable by faculty and may have their grades adjusted accordingly.*

**1.3 Student Grade Appeal Procedure does not apply to grades that may be affected by academic misconduct or dishonesty cases. Academic misconduct is defined in the University Student Handbook Article III, Section I, the procedure is outlined in University Procedure 13.02.99.C3.01**

**1.4** The University and the CONHS has the duty and corollary disciplinary power to maintain standards of scholarship and conduct for students who attend classes. Students shall have protection through orderly procedures against prejudices or capricious academic evaluation.

**1.5** A student who believes that he or she has not been held to appropriate academic standards as outlined in the class syllabus—equitable evaluation procedures or appropriate grading—may appeal the final grade given in the course.

The student should note the following tenets when deciding whether or not to appeal a grade:

- The basis of the appeal request must focus on specific departures from guidelines and standards in the course syllabus. (TBON)
- The burden of proof shall rest with the student.
- The standard of proof shall be a preponderance of the evidence.

## **2. The Grade Appeal Process**

**2.1** Most problems or complaints can be resolved through discussions between the student and the faculty. Therefore, the student is encouraged to first discuss the matter with the faculty. In those instances in which the problem cannot be resolved at this level, the student may initiate the appeal process.

**2.2** The student has the right to withdraw an appeal or grievance at any time during the process. If an appeal is not processed in a timely manner in accordance with the procedures, the student may proceed to the next level. **If the student does not follow the timeline for the appeal, the grade appeal will be dismissed by the CONHS. This dismissal report will be documented in the student's record and sent to the Provost of the University.**

**2.3** The student will present the matter of grievance, in writing, to the faculty through the appropriate Department Chair. (Using the Student Report Form) This must be done within fifteen business calendar days after the beginning of the next semester. (Spring, Summer and Fall).

**2.4** Within 7 business days after receiving the written grievance, the faculty member will either sustain the original grade assigned or make a change. The faculty member will notify the student in writing or by email regarding this action. If the faculty does not act within this period, the student may appeal to the department Chair.

**2.5** If the faculty member is no longer employed at the University, the College Dean will determine the appropriate procedure for submission to the College.

**2.6** If the student believes the matter is not satisfactorily resolved at the student- faculty level, the grievance may be submitted to the appropriate Department Chair . The student will present the appeal in writing within one week ( five business days) after the faculty has acted, or, if there has been no action by the faculty, within two weeks ( ten business days) after the time period for action has ended. If the student does not submit an appeal by these dates, the University is not required to process the grievance.

**2.7** The Department Chair will review all facts and evidence in the grievance, consulting with the student and the faculty, and attempt a successful mediation within fifteen business calendar days of receiving the grievance.

**2.8** The Department Chair will issue to the student and faculty a written statement of findings, indicating that this stage of the appeal process is completed. If the grievance is not further appealed, (within five business days of the decision) it will be considered resolved.

### **2.2.1 Preliminary Review and Advising**

If the student wishes to further appeal the decision of the Chair, the Chair will refer the student and faculty member to the Associate Dean of the college. The Associate Dean is not part of the College Grade Appeals Committee. Rather her/his role is to objectively analyze the case and advise the principals involved as to possible ways to mediate the issue before going through a formal grade appeal. The student may withdraw the appeal at any time in the process.

### **2.2.2 Submission**

Upon notification by the Associate Dean that a grade appeal has been received, the Department Chair will furnish the Associate Dean the student appeal file within seven business calendar days. This file will include the written appeal , the course description and syllabus, course criteria for grading, student work submitted for evaluation, the grade distribution for the course, and the statement of findings. Any other available and appropriate correspondence and documentation pertaining to the appeal will also be furnished. Along with the written appeal, the student must deliver any graded course work that was returned to the student by the instructor or provide a copy of the work. The request must be submitted within fifteen business calendar days following the issuance of the statement of findings in step 2.2.1. If the student does not submit a written appeal within fifteen business calendar days, the University is not required to process the grievance.

The Associate Dean will notify the Chair of the College Grade Appeals Committee, the Department Chair, and the faculty member of record that a grade appeal has been received. The Chair of the Appeals Committee will convene the committee and the hearing within fifteen business days from the Associate Dean's notification of the Appeal.

## **3. The College Grade Appeal Committee**

**3.1** The College Grade Appeal Committee (CGAC) will be made up of three faculty members (one of whom will serve as Chair of the CGAC) and two students. A total of four members will constitute a quorum.

**3.2** The CONHS Dean will appoint three faculty members at the beginning of the Academic year (September – August) to serve on the CGAC. Three alternate faculties will also be appointed to fill any vacancies during the academic year. All fulltime, clinical, tenured and tenure track faculty are eligible for appointment to the CGAC. All appointee’s will serve one academic year. The Associate Dean will be excluded from the pool of applicants because of his/her role in the appeal process. If the Associate Dean is named in the appeal as a faculty participant, the Associate Dean for Graduate Studies will review the appeal and call for the convening of the CGAC.

**3.3** Students participating on the CGAC will be selected from a pool of students from all departments (HS, Undergraduate and Graduate Nursing). All students except those in their respective first semester of study (in their major) who meet criteria are eligible for election into the pool. Students must be classified as a junior or higher and have no less the a 2.5 GPA. The pool will be selected at the beginning of the academic year. Each course (except first semester courses) will elect one student who meets the specific criteria to be entered into the pool of students for the GAC. The student who is bringing forth the grade appeal to the CGAC will have the opportunity to draw four names. The first two names will be appointed to the CGAC. The second two names will be alternates. The drawing of the names will be done in the presence of the Associate Dean.

**3.4** All faculty appointments and alternates are to make every effort to meet the requirements of service on the CGAC. If appointed faculty or alternate faculties are unable to serve on a scheduled CGAC grade appeal the Dean will appoint a replacement for the particular appeal.

#### **4. College Grade Appeals Committee Process**

**4.1** During the appeal process, the burden of proof rests with the student. The standard of proof shall be a preponderance of the evidence.

**4.2** The proceedings, findings, and recommendations shall not be open to the general public or available to any individuals other than those involved with the case.

**4.3** The Chair of the CGAC will preside at the hearing, maintain orderly proceedings and assure that all parties receive a fair hearing. The Chair will be a voting member of the CGAC. The Chair will keep appropriate records of meetings and actions of the CGAC and is responsible for all communications by the CGAC with other officials and parties to a hearing. The Chair will have the right to adjust procedures, given the circumstances at issue, to ensure fairness.

**4.4 Evidence and Testimony:** The Committee shall hear all parties to the case and review all evidence presented. Both the faculty member and student shall be present at the same time during the formal hearing. Students not residing at or near Texas A&M University-Corpus Christi may request to attend the hearing via video conference call, as appropriate.

**4.5 Counsel:** All parties to the hearing may be accompanied by another person in an advisory capacity only. Such person may not testify or ask questions.



**4.6 Decision:** The College Grade Appeal Committee will determine the facts of the case and attempt to affect a fair and appropriate resolution to the complaint. Depending on the circumstances of the case, the CGAC may recommend to the Associate Dean of the College that 1) the original grade of the instructor be upheld, or 2) that the grade in question be changed to a specific alternate grade. (In cases where the instructor is no longer affiliated with Texas A&M University-Corpus Christi, the Dean may initiate the change of grade, if so requested).

**4.7 Notification of Findings:** The Chair of the CGAC will present its findings and recommendations, in writing, to the Associate Dean (or Dean, if the Associate Dean is a party to the case) within five business days after completion of its hearings and deliberations. The notification should include a short summary of the facts of the case, the hearing, and the specific recommendations of the committee. The Associate Dean (or Dean) will send written notification of the decision to the student and the faculty member involved within five business days after receiving the CGAC's findings and recommendations.

***The decision of the CGAC is final and may not be appealed***

**4.8** The College of Nursing and Health Sciences will maintain a log providing a record of all grade appeals. The CONHS will collect and maintain all files documenting the individual appeals. These records which will be housed in the Dean's suite and will be retained for a period of time consistent with the Texas A&M System Records Retention Policy. Logs and records will be available upon request to demonstrate compliance with Southern Association of Colleges and Schools accreditation standards.

**See Appendices B for Grade Appeal Forms**

### **Academic Advisement**

Academic advisement for students enrolled in the nursing programs at Texas A&M University-Corpus Christi is provided by the Dean, Associate Dean, the Nursing Faculty, Chairs, Coordinators (if applicable) and Academic Advisor. Each student is assigned a faculty mentor. This faculty member is the student's faculty mentor from admission through graduation unless a change is sought by the student or is necessary due to a change in the faculty. The advisor's name will be included in the letter notifying the candidate that he/she has been admitted to the College. Flyers available in the Nursing Suites in the Island Hall also list advisors and advisees. The function of the advisor/faculty mentor is to assist students in planning their course of study, selecting courses congruent with the nursing degree plan and career goals. The advisor also may assist with issues such as academic progression and utilizing existing university facilities, such as financial aid services.

Students should meet or hold a phone conference with their advisor/mentor prior to or during each registration period. The purpose of this meeting is to inform the student of current offerings in the nursing programs and review the advisee's progress in the degree plan. Each student is responsible for awareness and successful completion of all the degree requirements. In addition, the student is responsible for:

- Making initial contact with academic advisor/faculty mentor
- Contacting academic advisor/mentor for degree planning
- Contacting academic advisor/mentor for pre-registration appointment each term
- Contacting course faculty, Department Chair, Coordinator (if applicable) and Associate Dean concerning

academic difficulties

General education requirements can be reviewed with the nursing Academic Advisor. Student transcripts can be used at the admission period to determine which prerequisite courses have been met by previous course work. The Academic Advisor also does course inventories before graduation and students should be guided by this review of graduation requirements.

### **Student Records**

Students' records are maintained in the College offices. The Open Record Policy is followed; whereby the student can review one's own record within the respective office, but cannot take the record outside the office.

All nursing students are responsible for keeping the Registrar's Office and Nursing Program Office informed of address. In addition, students must provide evidence to the College secretary of:

- current nursing license (if RN-BSN or MSN)
- The Texas Department of State Health Services has specific immunization requirements for students involved with direct patient contact. These requirements, as stated in the Texas Administrative Code, Title 25, Part 1, Chapter 97, Subchapter B, Rule 97.64, include the following
  - Students may be provisionally enrolled for up to one semester to allow students to attend classes while obtaining the required vaccines and acceptable evidence of vaccination.
  - Students cannot be provisionally enrolled without at least one dose of measles, mumps, and rubella vaccine if direct patient contact will occur during the provisional enrollment period.
  - Polio vaccine is not required. Students enrolled in health-related courses are encouraged to ascertain that they are immune to poliomyelitis.
  - One dose of tetanus-diphtheria toxoid (Td) is required within the last ten years.
  - Students who were born on or after January 1, 1957, must show, prior to patient contact, acceptable evidence of vaccination of two doses of measles-containing vaccine administered since January 1, 1968.
  - Students must show, prior to patient contact, acceptable evidence of vaccination of one dose of rubella vaccine.
  - Students born on or after January 1, 1957, must show, prior to patient contact, acceptable evidence of vaccination of one dose of mumps vaccine.
  - Students shall receive a complete series of hepatitis B vaccine prior to the start of direct patient care or show serologic confirmation of immunity to hepatitis B virus. (Additionally, the Nursing Program requires students to receive a complete series of hepatitis A vaccine prior to the start of direct patient care or show serologic confirmation of immunity to hepatitis A virus.)
  - Students shall receive two doses of varicella vaccine unless the first dose was received prior to thirteen years of age.

For additional information, please see the Texas Administrative Code, Title 25, Part 1, Chapter 97, Subchapter B, which is accessible at <http://www.sos.state.tx.us/tac/index.shtml>. Please note that some hospitals have stricter requirements than the state minimum standards.

Rule 97.65 lists the following exceptions to the immunization requirements:

- Serologic confirmations of immunity to measles, rubella, mumps, hepatitis A, hepatitis B, or varicella, are acceptable. Evidence of measles, rubella, mumps, hepatitis A, or hepatitis B, or varicella illness must consist of a laboratory report that indicates either confirmation of immunity or infection.
- A parent or physician validated history of varicella disease (chickenpox) or varicella immunity is acceptable in lieu of vaccine. A written statement from a physician, or the student's parent or guardian, or college nurse, must support histories of varicella disease.

(Immunizations are available at the student health clinic and the Public Health Department for enrolled students for a nominal fee.)

- Results of tuberculosis screening are required annually.
- A copy of the student's current American Heart Association Health Care Providers card is required annually.
- Students are required to purchase professional liability coverage through the University. Fees for this coverage are included in the fees paid at the time of registration at the beginning of each academic year.
- Student criminal background checks.

Note: Verification must be made prior to clinical experiences each year.

## **Progression, Grading and Graduation Policies**

### **Progression**

Students are referred to the University Catalog and to the course prerequisites in order to determine if they may progress in the major, particularly after experiencing academic difficulty. Advice and counseling also should be sought from the academic advisor, curriculum Coordinator, Assistant Director or Director. Students who have failed or withdrawn from a class need to speak with the Degree Counselor for detailed information about submitting a letter to petition for readmission.

### **Clinicals**

Students are required to attend all clinical and laboratory experiences. All clinical objectives must be met to successfully progress through the nursing program. In the event a student misses a clinical day, activities to meet clinical objectives will be designated and evaluated by the clinical instructor. See individual course syllabi for specific criteria.

### **Clinical Evaluation Tool**

This evaluation tool is to be completed at the end of each generic BSN clinical course to assess the student's competency as the provider of care, coordinator of care and member of a profession. Additional clinical skills competency forms may be developed and used for each clinical course in order to make more operational the measurement of the student's attainment of competencies.

### **Graduation**

#### **Graduation Under a Particular Catalog - Undergraduate Programs**

A student may receive the baccalaureate degree upon satisfying the requirements of the catalog under which credit was first earned in this University or upon satisfying the requirements of the catalog of any subsequent year in which credit was earned as a student in the University. This provision is subject to the restriction that all requirements must be completed within six years of

the date of the catalog chosen and that the University still offers programs and required curriculum described in the earlier catalog. A student who transfers from a public community college in Texas may choose to graduate under the University catalog in effect at the time the student first earned credit at the community college or a later catalog in effect when the student earned credit at either the community college or the University. This provision is subject to the six-year restriction stated earlier.

Certification or licensure requirements are subject to change. Students enrolled in programs leading to certification or licensure must meet all current requirements, regardless of the catalog chosen.

### **Application for Graduation - Undergraduate Programs**

Students intending to have a degree conferred must notify the appropriate dean's office and their academic advisor. All transferred work needed for undergraduate degree conferment must be received by the Office of the University Registrar within the graduating term. Census date is defined as the 12th class day for fall and spring graduations and the 4th class day of Summer I for summer graduation. Students who plan to participate in a graduation exercise and/or receive a diploma must complete an application for graduation by the deadline indicated in the Academic Calendar. An application for graduation must be obtained and processed through the student's academic advisor. Students participating in the graduation exercise will also be required to obtain an appropriate cap and gown. The application for graduation is not transferable to a subsequent semester. If a student does not graduate, the application will be canceled. A new application must be obtained and processed through the student's academic advisor.

### **Graduation Under a Particular Catalog - Graduate Programs**

A graduate student may receive a degree upon satisfying the requirements of the catalog under which the student enrolled in the program, provided the catalog is no more than seven years old when the degree is conferred *and* the University still offers programs and required curriculum described in that catalog. A student may petition to graduate under a subsequent catalog under which credit was earned because of a preference to meet newer degree requirements. Certification or licensure requirements are subject to change. Students enrolled in programs leading to certification or licensure must meet all current certification and licensure requirements, regardless of the catalog chosen.

### **Application for Graduation - Graduate Programs**

Students intending to have a degree conferred must notify the appropriate dean's office and their academic advisor. All transferred work needed for undergraduate degree conferment must be received by the Office of the University Registrar within the graduating term. Students who plan to participate in a graduation exercise and/or receive a diploma must complete an application for graduation by the deadline indicated in the Academic Calendar. An application for graduation must be obtained and processed through the student's academic advisor. Students participating in the graduation exercise will also be required to obtain an appropriate cap and gown. The application for graduation is not transferable to a subsequent semester. If a student does not graduate, the application will be canceled. A new application must be obtained and processed through the student's academic advisor.

## **Standard Precautions**

*Fundamental Principles of Infection Prevention* as outlined by the Centers for Disease Control (cdc.gov) should be consistently be used for ALL patients by students & health care services personnel in various settings, including laboratory courses requiring exposure to blood using disposable equipment.

Standard Precautions represent the minimum infection prevention measures that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where healthcare is delivered. These evidence-based practices are designed to both protect healthcare personnel and prevent the spread of infections among patients. Standard Precautions replaces earlier guidance relating to Universal Precautions and Body Substance Isolation.

Standard Precautions include:

- hand hygiene - Appropriate hand hygiene shall be performed before and after examining each patient. Hands and other skin surfaces shall be washed immediately and thorough if contaminated with blood or other body fluids. Hands shall be washed after gloves removed.
- use of personal protective equipment (e.g., gloves, gowns, facemasks), depending on the anticipated exposure - All health-care workers shall routinely use appropriate barrier precaution to prevent skin and mucous-membrane exposure when contact with blood or other body fluids or any person is anticipated. Gloves shall be worn for touching blood and bloody fluids, mucous membranes, or non-intact skin of all persons, handling items or surfaces soiled with blood or bloody fluids, and for performing venipuncture and other vascular access procedures. Gloves shall be changed after contact with each patient. Masks and protective eyewear or face shields shall be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of mucous membranes of the mouth, nose, and eyes. Gown or aprons shall be worn during procedures that are likely to generate splashes of blood or other body fluids.
- respiratory hygiene and cough etiquette - To prevent contact with mouth and oral secretions during patient resuscitation health care workers should use mouthpiece, resuscitation bag, and other ventilation devices to prevent contact with mouth and oral secretions.
- safe injection practices - All health –care workers shall take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments; during disposal of used needles; and when handling sharp instruments after procedures. To prevent needle-stick injuries, used needles shall not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After they are used, disposable syringes and needles, scalpel blades, and other sharp items shall be placed in puncture-resistant containers for disposal; the puncture-resistant containers shall be located as close as practical to the use area.
- safe handling of potentially contaminated equipment or surfaces in the patient environment - Health-care workers who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient-care equipment until the condition resolves.

Implementation of Standard Precautions for primary prevention of exposure to blood and body fluids for ALL persons/patients provides the minimum infection prevention measures to protect both the health care worker and the patient. Isolation precautions (e.g. enteric, “AFB”) should be used as necessary if associated conditions, such as infectious diarrhea or tuberculosis, are diagnosed or suspected.

(<http://www.cdc.gov/niosh/topics/bbp/universal.html>) ([www.cdc.gov/niosh/topics/tb/default.html](http://www.cdc.gov/niosh/topics/tb/default.html))

## **Latex**

A term that refers to natural rubber and products made from dry natural rubber.

As a nursing student, you will be exposed to latex products in the lab and the clinical setting.

These products include such things as:

- Gloves
- Stethoscopes
- Drains
- BP Cuffs
- Tubing
- Catheters Stoppers or Vials
- Diapers
- Syringes
- Tape
- Soap Dispensers
- Band-Aids
- IV Tubing
- Ace Wraps

There are three types of NOISH Classifications:

**Irritant-Contact Dermatitis- Itchy\_Fingers** - Non immune reaction that develops shortly after exposure as a result of exposure to glove powder, anti-microbial soap and moisture on the hands from perspiration or failure to dry hands after washing prior to putting on gloves. Symptoms are limited to area of exposure: dry scaly, itchy, red skin that may progress to cracks and fissure. If you continue to use latex gloves you may develop a true allergy.

**Allergic Contact Dermatitis Type IV**- an immune reaction causing a delayed hypersensitivity usually 24 - 48 hours after exposure or up to 72 hours after exposure. Caused by chemical use in the latex processing. Symptoms include: local reactions, skin rash with blister and oozing. May lead to skin exanthemas at distant locations (e.g. Poison Ivy).

**Latex-Allergy Type I - Immune Reaction Causing Immediate Hypersensitivity** - Varies with individuals, but may require several exposures. May last several hours. Caused by latex proteins and chemical additives - **MAY PROGRESS TO ANAPHYLAXIS**. It is important that you become aware of symptoms of sensitivity and report them to the faculty. These include:

- Red hands, a rash or itching after use of Latex gloves
- Watery eyes
- Headaches
- Wheezing
- Hives
- Nasal, eye or sinus irritation
- Shortness of breath
- Coughing or wheezing

**See Appendix C for Latex Sensitivity Screening Questions**

## Prescription for Remediation – Pre-Licensure BSN Students

### Skills Remediation

If a student is having difficulty with skills or knowledge in a clinical rotation or following a skills competency check-off, faculty may send the student to the Resource Center for assistance in improving the situation. The request for remediation form on the following page will be used to help the Resource Center designee identify the problem of concern and help the student with remediation.

### See Appendix D for Remediation Forms

### Overriding Areas Of Clinical Concerns

Overriding areas of clinical concern are specific nursing competencies inherent in the safe performance of all skills. These overriding areas of concern must be demonstrated in all aspects of nursing care. If a student violates any of the following elements (Safety, Communications, Asepsis), during clinical, the student may be subject to dismissal from the program. A Clinical Warning may be issued for any incident deemed significant by the nursing faculty.

- **Safety:** Any action or inaction on the part of the student, which threatens the client's physical well being. This area of concern includes but is not limited to the following: Provides care consistent with knowledge gained from previous courses. Uses standard precautions. Administers medication/treatments safely. Demonstrates principles of body mechanics. Raises side rails when beds are in an elevated position or clients are in need of protection. Keeps environment free of potentially harmful elements (e.g. cleans up spills, avoids electrical hazards). Protects clients from temperature extremes. Protects self and others from harm.
- **Communication:** Any action or inaction on the part of the student in which communication patterns threaten the emotional well being of the client. This area of concern includes but is not limited to the following: Verifies written procedure(s) to clients. Reports changes in clients' conditions. Documents findings. Uses verbal and nonverbal communication that demonstrates respect, understanding, and caring. Avoids abusive, threatening, patronizing, or familiar communication patterns. Maintains client confidentiality. Demonstrates appropriate behavior.
- **Asepsis:** The prevention of the introduction and/or transfer of pathogens. This area of concern includes but is not limited to the following: Washes hands in the presence of the examiner before and after each client situation and each skill. Follows standard precautions. Protects self and others from contamination by microorganisms. Establishes and/or maintains a sterile field when necessary. Disposes of contaminated articles in designated containers.

This policy applies to all students in all clinical courses in the Generic BSN Program.

Source: Woolley, G.R., Bryan, MS, & Davis, J.W. "A Comprehensive Approach to Clinical Evaluation", Nursing Education. Vol.37 (8), November 1998, pp. 381-365.

Centers for Disease Control and Prevention: <http://www.cdc.gov/>

Occupational Safety and Health Administration: <http://www.osha.gov/>

### See Appendix D for Clinical Concerns Form

## **Grading**

The CONHS letter grading scales for all programs consist of the following:

- A - 90 to 100
- B - 83 to 89
- C - 75 to 82
- D - 74 to 67
- F - 66 & Below

Students missing more than three classes in a didactic / theory course in any College of Nursing Program automatically will receive one letter grade lower.

## **Written Assignments**

The nursing faculty have adopted the American Psychological Association (APA) manuscript form and writing style. All written assignments must be written using the APA form and style. The following is a summary of frequently asked questions. It is not meant to replace the APA Manual.

## **APA Guidelines**

Guidelines For Use Of The Publication Manual Of The American Psychological Association (6th Edition) another very useful and up-to-date resource is the Online Writing Lab (OWL) at Purdue APA <https://owl.english.purdue.edu/owl/resource/560/01/>

### **General APA guidelines:**

- Type: 12 points
- Typeface
- Double-spacing
- Margins: 1 inch at top, bottom, left and right of every page
- Line length: 6 -1/2 inches
- Do not justify lines - leave right margin uneven
- Do not divide words at the end of a line.
- Number pages, beginning with the title page. Page number should appear at least 1 inch from the right edge of the page, in the space between the top edge of the paper and the first line of text.
- Use page headers.
- Indent the first line of every paragraph five to seven spaces and be consistent.
- Center the heading and bold the letters
- Space one space after commas, colons and semicolons. (e.g., Doe, J. J.), one space.
- General rule governing numbers in APA styles is to use figures to express numbers 10 and above and words to express numbers below 10. Do not start a sentence with a number, use the word.
- Do not include an abstract for formal papers submitted (check with instructor).
- On the title page, there are two forms in the APA Manual, depending on the printing. The name of the author is typed in uppercase and lowercase letters, centered on the page, on double spaced-line below the title. Type the institutional affiliation, centered under the author's name, on the next double-spaced line. On the next double-spaced line, place the date.



## **Guidelines to Reduce Bias in Language**

- Any reference to gender, sexual orientation, racial or ethnic group, disability or age should be examined to avoid demeaning attitudes and biased assumptions in any composition.
- Just as you read over your composition for grammatical and spelling errors, read, identify and revise unintentional biased statements. A second reader is recommended for all papers.
- Do not use bold, Italics or other special fonts to indicate Italics for book titles or other items that you want to emphasize. Use underlining only for book titles.
- Tables and graphs are special indices; please check your manual if you are using them.
- If you are using Word Perfect, there is a template under new documents. Select education, then APA format. If you use the format, change to static text or the citations will show up highlighted in dk grey.

## **Citation of sources**

- Citations within the body of the paper:
- The source of information, whether a direct quote or paraphrased, is to be cited.
- The citation is part of the sentence and includes the last name(s) of the author(s) and date of publication. E.g. (Smith & Jones, 1994).
- Referring to authors as he or she appears to be less formal in your paper.
- Elements and examples of references in APA style are found in APA Publication Manual.

## **Professional Behavior and Safe Practice**

### **Introduction**

The education of the students at Texas A&M University-Corpus Christi College of Nursing and Health Sciences is based on the concept that integrity, a sense of responsibility and self-discipline are inherent to the profession of nursing. The responsibility of the individual student to sustain high ethical standards is parallel to the concept that the professional nurse must be accountable for professional standards in the practice of nursing (published in the Texas Administrative Code, Texas Board of Nursing, *Standards of Nursing Practice*, amended November 15, 2007)). The continuation and enhancement of ethical standards within the academic community and nursing profession are the individual responsibility of each student and faculty member. Mutual respect and trustworthiness between the faculty and students promotes optimal learning.

### **Definitions of Unacceptable Behavior**

The following are definitions of unacceptable behavior per the College of Nursing and Health Sciences of Texas A&M University-Corpus Christi:

- Falsification of Data - Dishonesty in reporting results, ranging from sheer fabrication of data, improper adjustment of results and gross negligence in collecting and analyzing data, to selective reporting or omission of conflicting data for deceptive purposes.
- Aiding and Abetting Dishonesty - Providing material, information or assistance to another person with the knowledge or reasonable expectation that the material, information or assistance will be used to commit an act that would be prohibited by this Code or that is prohibited by law or another applicable code of conduct.

## **Nurse-Patient Relationships**

The students at Texas A&M University-Corpus Christi are expected to exhibit behavior appropriate to the profession of nursing. They must assume personal responsibility for being in physical and mental condition to give safe nursing care and for the knowledge and skills necessary to give this care. Unacceptable behavior includes, but is not limited to, the following:

- To provide nursing care in a predictably unsafe or harmful manner. For example:
  - To carry out a procedure without competence or without the guidance of a qualified person.
  - To willfully or intentionally do physical and/or mental harm to a client.
  - To exhibit careless or negligent behavior in connection with the care of a client.
  - To refuse to assume the assigned and necessary care of a client and to fail to inform the instructor with immediacy so that an alternative measure for that care can be found.
- To disrespect the privacy of a client.
  - To use the full name or position of a client in written assignments and/or patient data of any sort, e.g. computer-generated forms that will be removed from the clinical area.
  - To discuss confidential information in inappropriate areas, such as elevators.
  - To discuss confidential information about a patient with third parties who do not have a clear and legitimate need to know
- To falsify patient records or fabricate patient experiences.
- To fail to report omission of, or error in, treatments or medications.

## **Social Media**

Social Media has become very popular in the public's life as a way to communicate. The student is referred to the National Council of State Boards of Nursing (NCSBN) White Paper on Social Media 2011 for guidance in the use of social media in nursing.

[www.ncsbn.org/Social\\_Media.pdf](http://www.ncsbn.org/Social_Media.pdf)

## **Transportation**

Transportation to and from clinical facilities is the student's responsibility. Although there is a bus system available in the city, it is very difficult to use the bus to attend evening practicums in clinical agencies or to make home visits in the community. Therefore, each student must arrange his/her own automobile transportation. Students can organize car-pooling when several are assigned to the same hospital for laboratory experience.

Pre-licensure baccalaureate student assignments to clinical agencies are coordinated by the Undergraduate Department Chair in consultation with the course managers.

eLine/eLine military students: Every effort will be made to assign students to clinical in their area; however, there may be instances where the student needs to travel to Corpus Christi or other distant area to obtain clinical experiences.

## **Joint Enrollment**

Baccalaureate nursing students in their last semester of study who otherwise meet admission

requirements for the graduate-nursing program may enroll in graduate nursing courses. Graduate courses fulfill requirements for the Master of Science in Nursing degree only. Likewise, Associate Degree nursing students in their last semester of study who otherwise meet admission requirements for the Baccalaureate program may enroll in BSN nursing courses.

### **University Equipment**

During the course of study, it may be necessary for students to use equipment that is provided by the nursing program. Such equipment includes otoscopes, percussion hammers, tuning forks and DDST kits. Each student is expected to abide by the following in regard to nursing program equipment:

- Equipment will be checked out by the NLRC designee for a designated time period.
- The student will sign a receipt stating that the equipment listed has been checked out.
- Grades will be withheld until the equipment has been returned.
- Lost equipment is the fiscal responsibility of the student who checked out that equipment.

Note: Nursing Labs have learning equipment available to the student, including a computer and printer. Additional computer labs are available throughout the campus. Contact your faculty for room numbers. Copy machines for student use are found in the Library. All nursing students are strongly encouraged to purchase a PC with CD-ROM readability and Internet access.

Graduate students are required to have the following basic equipment:

- quality stethoscope with bell and diaphragm (adult and pediatric)
- reflex hammer
- ophthalmoscope
- otoscope

### **Uniforms, Name Tags**

#### **Student Dress Code - Undergraduate Students**

Hospital clinical assignment days, students will wear:

A Royal Blue uniform that must have a collared top, with a school patch on the left sleeve. In addition, the uniform code includes:

- Wearing the Student's TAMU-CC name tag with picture ID
- White, (light colored logos acceptable), supportive walking shoes, not open in back or front. No CROCs.
- White or flesh colored stockings or white socks will be worn with uniforms.
- During the Pediatric rotation, colored print top may be worn with royal blue bottoms.
- Students will wear knee length white laboratory coats for specific learning experiences.
- Data collection day, which is prior to clinical assignments, students will wear:
  - Lab coats with a school patch on the left sleeve over their properly fitted, conservative dress clothing, and a student name tag with picture ID. Shoes should have heels 2 inches or less.
- No shorts, jeans or open sandals are to be worn when in the hospital or in any clinical agency.

- Certain clinical agencies have specific dress codes that will be followed by students assigned to the agency.
- Student picture identification badges must be worn at all times when in a clinical agency. These badges are available for purchase from the Sand Dollar office.
- The undergraduate nursing patch is to be worn on all hospital uniforms. It is applied to the deltoid area of the left sleeve. These patches are available for purchase in the University Bookstore.
- In addition to the dress code in the Student Handbook, the following guidelines have been established to ensure a professional image is presented to the health care consumer:
  - No jewelry other than a watch and wedding band or other single, significant, and conservative ring may be worn.
  - If earrings are worn, only one set of stud-type earrings is acceptable. All other earrings, or wearing more than one earring in each ear is not permitted. No tongue, nose, or eyebrow jewelry allowed.
  - Sweaters are not permitted in patient care areas. White or royal blue shirt may be worn under the uniform top if needed for warmth in the clinical area.
  - Jeans are never permitted.
  - Nails should be short, clean and well groomed. No intense (brightly colored) polish and no decorative enhancement may be worn on nails or artificial nails.
  - Uniforms should be clean, pressed, hemmed and properly fitted.
  - Uniforms and IDs worn in the clinical area cannot be worn in other settings.
  - Uniforms must only be worn only when in the Student Role, not for work.
  - If the hair is shoulder length or longer, it should be pinned up or otherwise appropriately secured to the head. This will prevent hair from interfering with direct patient care or personal safety.
    - Male students should be clean-shaven and/or beards neatly trimmed.
    - Female students: if a device is used to pin hair up, it should be similar in color to one's own hair color.
- Appropriate, adult hygiene is expected of students in order to avoid further discomfort to clinical clients and to present a professional image to the community.
- Perfumes, lotions, and colognes should NOT be used, as these odors sometimes bother patients.
- Visible tattoos and body piercing are prohibited and must be covered.
- Students are expected to be clean and appropriately dressed and groomed when in the clinical area. An individual's appearance is considered unacceptable if it hinders or is detrimental to patient care. A casual or sloppy appearance and extremes of dress, hairdo or make-up are not acceptable.
- No nursing cap has been designated for the Texas A&M University-Corpus Christi College of Nursing and Health Sciences

Compliance with the dress code is determined by the clinical instructor. Appropriate consequences for dress code violations, including clinical failure, may be applied at the discretion of the instructor.

## **Scholarship and Financial Aid**

Information about available scholarships and financial aid can be obtained from the Office of Student Financial Assistance. Information about selected nursing scholarships can be obtained in nursing program offices. Applications are accepted in the spring of each year for the fall semester. <http://scholarships.tamucc.edu/faq.html>

## **Recognition**

### **Selection of Award Recipients**

The Scholarship & Awards Committee will review criteria and nominate qualified students for each award. The faculty as a whole will vote for the recipients of the awards.

## **Awards**

### **Outstanding Graduating Senior**

- Demonstrated active involvement in professional or student organizations.
- Initiated student projects incorporating measurable goals and objectives and accomplished these goals through creative problem solving.
- Promoted goodwill between the University and the community when conducting student projects.
- Demonstrated high scholastic ability as evidenced by a minimum cumulative Texas A&M University-Corpus Christi grade point average (GPA) of 3.5 on a 4.0 scale.

### **Outstanding Graduating RN/BSN**

- Demonstrated active involvement in professional or student organizations.
- Initiated student projects incorporating measurable goals and objectives, and accomplished these goals through creative problem solving.
- Promoted goodwill between the University and the community when conducting student projects.
- Demonstrated high scholastic ability as evidenced by a minimum cumulative Texas A&M University-Corpus Christi grade point average (GPA) of 3.5 on a 4.0 scale.

### **Outstanding Graduating eLine Student Award**

- Demonstrated active involvement in professional or student organizations.
- Initiated student projects incorporating measurable goals and objectives and accomplished these goals through creative problem solving.
- Promoted goodwill between the University and the community when conducting student projects.
- Demonstrated high scholastic ability as evidenced by a minimum cumulative Texas A&M University-Corpus Christi grade point average (GPA) of 3.5 on a 4.0 scale.

### **Outstanding Graduate Student**

- Demonstrated active involvement in professional or student organization.
- Displayed creativity and leadership skills.
- Has the potential to have a significant impact on the profession.
- Promoted goodwill between the University and the community when conducting graduate studies.
- Demonstrated high scholastic ability as evidenced by a minimum cumulative graduate

Texas A&M University-Corpus Christi GPA of 3.5 on a 4.0 scale.

### **Undergraduate Community Award**

- Initiated student project(s) that has/have a significant impact on a target population. (May be an individual or a group)
- Displayed creativity, collaboration and leadership skills in developing, implementing and evaluating project(s).
- Promoted goodwill between the University and the community when conducting student projects.
- At the end of the semester, has completed all nursing courses.

### **Undergraduate Research Award**

Demonstrated leadership through participation in activities that promote the advancement of professional nursing.

- Demonstrated high scholastic ability as evidenced by a minimum Texas A&M University-Corpus Christi grade point average (GPA) of 3.0 on a 4.0 scale.
- Demonstrated exemplary performance in the clinical setting as indicated by faculty recommendation.

### **Graduate Research Award**

- Identified researchable problems, participated in conducting research and promoted the use of research findings that contributed to the advancement of nursing knowledge and/or significantly improved patient care outcomes.
- Study has the potential for publication and/or presentation.
- Demonstrated high scholastic ability as evidenced by a minimum cumulative graduate Texas A&M University-Corpus Christi GPA of 3.5 on a 4.0 scale.

**The O'Neill Award for Caring** - Given to the Generic student who has displayed behaviors remarkable for their caring characteristics. These may be garnered from clinical and/or academic activities.

- Demonstrated caring in the cognitive domain: Awareness of needs and preferences of others and readiness to help or refer for assistance.
- Demonstrated caring in the affective domain: Showed respect and empathy toward clients, fellow students, faculty or staff and an ability to be supportive.
- Demonstrated caring in the psychomotor domain: Used skills to intervene or accomplish tasks that aid clients, the College, fellow students and/or the community at large.
- Had attended as a Generic student at least the two senior semesters at Texas A&M University-Corpus Christi.
- A GPA of 2.5 or higher.
- Can be awarded at the end of each long semester at the discretion of the Nursing Faculty.

### **Liability Insurance**

All nursing majors in clinical settings must be covered by malpractice insurance. Liability insurance will be included in university fees in the fall semester each year. Pro-rated fees will be included for students registering in spring and summer.

## Background Checks

The Texas Board of Nursing (TBON) requires disclosure of criminal history or disciplinary action and an FBI background check before licensure is granted. In order to promote the safety of the clients in their care and to meet the requirements of the BNE and affiliated clinical agencies, students will complete the background check before acceptance to the program is granted. See the BNE web site [www.bne.state.tx.us](http://www.bne.state.tx.us) for the statutes and rules regulating licensure.

## Technical Standards For Nursing College \*\* (Under review based on current recommendations)

Nursing education requires not only the accumulation of scientific knowledge, but also the simultaneous acquisition of technical skills and professional attitudes and behavior. Nursing college faculties have the responsibility to society to matriculate and graduate the best possible nurses, and thus admission to nursing college has been offered to those who qualified for the study and practice of nursing. Technical standards presented in this document are prerequisite for admission and graduation from the Texas A&M University-Corpus Christi College of Nursing and Health Sciences. All courses in the curriculum are required in order to develop the essential skills necessary to become a competent nurse.

Graduates of nursing college must have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care services. The Texas A&M University-Corpus Christi College of Nursing and Health Sciences acknowledges Section 504 of the 1973 Vocational Rehabilitation Act and 42 U.S.C.<sup>a</sup> 12101 et seq., the Americans with Disabilities Act (ADA), but ascertains that certain minimum technical standards must be met by those accepted to enroll.

A candidate for the B.S.N. degree must have aptitude, abilities, and skills in five areas: observation; communication; motor; conceptual, integrative and quantitative; and behavioral and social. Technological compensation can be made for some handicaps in these areas, but a nursing student should be able to perform in a reasonably independent manner. The use of a trained intermediary would mean that a nursing student's judgment must be mediated by someone else's power of selection and observation. Therefore, third parties cannot be used to assist students in accomplishing curricular requirements in the five skill areas specified above.

- **Observation** - The nursing student must be able to observe demonstrations and participate in simulated clinical and exercises. A nursing student must be able to observe a patient accurately at a distance and close at hand. Observation necessitates the functional use of the sense of vision and other sensory modalities. It is enhanced by the functional use of the sense of smell.
- **Communication** - A nursing student should be able to speak, to hear and to observe patients in order to elicit information, describe changes in mood, activity and posture, and perceive nonverbal communications. A nursing student must be able to communicate effectively and sensitively with patients. Communication includes not only speech, but also reading and writing. The nursing student must be able to communicate effectively and efficiently in oral and written form with all members of the health care team.
- **Motor Coordination or Function** - Nursing students should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers. Nursing students should be able to execute motor movements reasonably required to provide general care and emergency treatment to

patients. Examples of emergency treatment reasonably required of nurses are cardiopulmonary resuscitation, administration of intravenous medication, application of pressure to stop bleeding, and opening of obstructed airways. Such actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision.

- **Intellectual-Conceptual, Integrative and Quantitative Abilities** - These abilities include measurement, calculation, reasoning, analysis, and synthesis. Problem solving, the critical skill demanded of nurses requires all of these intellectual abilities. In addition, the nursing student should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.
- **Behavioral And Social Attributes** - Nursing students must possess the emotional health required for full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive and effective relationships with patients. Nursing students must be able to tolerate physically taxing workloads and to function effectively when stressed. They must be able to adapt to changing environments, to display flexibility and to learn to function in the face of uncertainties inherent in the clinical problems of many patients. Empathy, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities that should be assessed during the admission and educational processes.

Nursing students for the B.S.N. degree must have somatic sensation and the functional use of the senses of vision and hearing. Nursing students' diagnosis skills will also be lessened without the functional use of the senses of equilibrium, smell and taste. Additionally, they must have sufficient exteroceptive sense (touch, pain and temperature), sufficient proprioceptive sense (position, pressure, movement, stereognosis and vibratory) and sufficient motor function to permit them to carry out the activities described in the section above. They must be able to consistently, quickly, and accurately integrate all information received by senses employed, and they must have the intellectual ability to learn, integrate, analyze and synthesize data. The Texas A&M University-Corpus Christi College of Nursing will consider for admission to nursing college any applicant who demonstrates the ability to perform or to learn to perform the skills listed in this document. Students will be judged not only on their scholastic accomplishment, but also on their college's curriculum, and the ability to graduate as skilled and effective practitioners of nursing.

### **Technical Standards Questions For Nursing Students**

- Is the nursing student able to observe demonstrations and participate in simulated clinical lab exercises?
- Is the nursing student able to analyze, synthesize, extrapolate, solve problems and reach diagnostic and nursing intervention judgments?
- Does the nursing student have sufficient use of the senses of vision and hearing and the somatic sensation necessary to perform a physical examination? Can the nursing student perform palpation, auscultation and percussion?
- Can the nursing student reasonably be expected to relate to patients and establish sensitive, professional relationships with patients?
- Can the nursing student reasonably be expected to communicate the nursing plan of care and goals to the patient and to his/her significant others with accuracy, clarity and efficiency?



- Can the nursing student reasonably be expected to perform with precise, quick and appropriate actions in emergency situations?
- Can the nursing student reasonably be expected to display good judgment in the assessment and provision of nursing care to patients?
- Can the nursing student reasonably be expected to possess the perseverance, diligence and consistency to complete the nursing college curriculum and enter the practice of nursing?
- Can the nursing student reasonably be expected to accept criticism and respond by appropriate modification of behavior?

## References

Section 504 of the Rehabilitation Act of 1973, (Public Law. No. 93-112)

TTUHSC COLLEGE OF Medicine Technical Standard Policy TAMU-  
CS College of Medicine

Strax, T.E. (1992, spring). Recommended guidelines for admission to medical college of candidates with disabilities. Association of Academic Physiatrist. 9-11.

## Appendix A

Section 504 of the Rehabilitation Act of 1973, as amended:

No otherwise qualified handicapped individual in the United States, as defined in Section 7(6), shall, solely by reason of his handicap, be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program or activity receiving federal financial assistance.

Following are definitions from the regulation implementing Section 504. The complete regulation and an analysis prepared by the Department of Health, Education and Welfare appeared in the May 4, 1977, Federal Register (Vol. 42, No. 86, pages 22676-22701).

**Handicapped Person:** Any person who (i) has a physical or mental impairment that substantially limits one or more major life activities, (ii) has a record of such an impairment, or (iii) is regarded as having such an impairment.

**Physical or Mental Impairment:** (A) any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genito-urinary; hemic and lymphatic; skin; and endocrine; or (B) any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.\*

**Qualified Handicapped Person:** With respect to post-secondary and vocational education services, a handicapped person who meets the academic and technical standards requisite to admission or participation in the recipient's education program or activity.

**Technical Standards:** Not defined in the regulation. The accompanying analysis states: The term "technical standards" refers to all nonacademic admissions criteria that are essential to participation in the program in question.

*\* A ruling by the Attorney General has included addiction to alcohol and narcotics as a handicap for the purpose of this statute.*

## **Standards For Completion of the Curriculum**

It is the policy of the College of Nursing and Health Sciences that no person shall be denied admission to the College nor graduation from the College on the basis of any disability, provided that the person demonstrates full ability to achieve the Bachelor of Science in Nursing degree in preparation for licensure as a practicing Registered Nurse. Additionally, the safety of the patient, on whom the nursing education process largely is focused, must be guarded as a primary consideration.

The College of Nursing and Health Sciences recognizes that certain disabilities can be accommodated without compromising the standards required by the College and the integrity of its curriculum. The College is committed to the development of innovative and creative ways of opening its curriculum to competitive and good candidates with disabilities.

Mastery of the essential functions of the curriculum is required of all students. The standards encompass cognitive, physical and behavioral requirements in six areas judged necessary by the faculty for satisfactory completion of the nursing curriculum. These include, but are not necessarily limited to:

- Use of motor skills such as palpation, auscultation, percussion and other diagnostic maneuvers.
- Use of visual, auditory, somatic and other sensory skills such as observing demonstrations, obtaining a medical history directly from a patient and observing a patient's medical condition and/or non-verbal behaviors.
- Communication with patients, physicians and others on the medical team about a patient's condition in settings where communication typically is oral or written and in settings where the time span available for communication is limited.
- Intellectual-conceptual, integrative and quantitative abilities necessary for problem-solving and diagnosis;
- Activities that have a behavioral and/or social context including professional responsibility to patients, typical daily work-loads, working in an environment that is subject to rapid change without warning and in unpredictable ways.
- Ethical and professional attitudes and conduct.

The standards summarized above refer to the desired ends rather than the means to achieve each standard because a person with a disability may be able to achieve the standards using reasonable accommodation. The use of a trained intermediary and some assisting devices to observe or interpret information compromises the essential function of the nurse.

Questions regarding standards for curricular completion are dealt with on an individual basis so that reasonable accommodation can be assessed appropriately and arranged when feasible. A copy of the detailed essential standards for curricular completion will be furnished with each application packet and may be obtained from the College of Nursing and Health Sciences. When a letter of acceptance to the College of Nursing is mailed to an applicant, a second copy of the standards will be included with that letter. At that time, the applicant will be asked to respond in writing whether he/she can meet the standards with or without accommodation. In the event that accommodation is requested, the student must submit documentation of disability with proposed accommodation from a certified specialist to the Office for Special Populations. The college may require verification by a specialist whom it has approved. If a reasonable

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

A detailed copy of the essential standards may be obtained from:  
Texas A&M University-Corpus Christi  
College of Nursing and Health Sciences  
6300 Ocean Drive - Island Hall 3rd Floor  
Corpus Christi, TX 78412-5804

### **Student Chemical Dependency Peer Review Policy (BSN)**

**Purpose:** To identify and refer any matriculating student who exhibits behaviors that give reasonable cause to suspect chemical impairment in the College of Nursing and Health Sciences. This shall be in accordance with the policies of Texas A&M University-Corpus Christi, and the laws of Texas as noted by the Board of Nurse Examiners.

Texas A&M University-Corpus Christi seeks to maintain an environment free from unnecessary risks to the safety and well being of patients, faculty, students and staff. With this purpose established, students are encouraged to seek assistance for their own substance abuse/dependence/mental health problem. However, when mental impairment or chemical abuse is suspected, the faculty of the College of Nursing and Health Sciences will report suspect behaviors to the appropriate Course Coordinator, Program Coordinators, and the Dean, who will follow all reporting guidelines necessary for maintaining a risk-free environment. The student will be supported and assisted in obtaining needed counseling.

**Reporting:** A student who must be reported is defined as one whose behavior violates the rules, regulations, traditions and ethics of Texas A&M University-Corpus Christi and the accepted standards of the nursing profession. Nursing faculty with reasonable cause to suspect a nursing student's abilities to practice are mandated to report that student to the appropriate curriculum coordinator and the Associate Dean. Confidentiality for both the reporter and the identified student(s) will be maintained to the extent possible. An investigation will be conducted in a confidential manner to verify the validity and accuracy of the information. The Program Coordinators and Associate Dean will be responsible for the appropriate follow-through in consultation with the Dean.

A "controlled substance" is a substance identified in the federal Controlled Substance Act or a substance whose possession, sale or delivery results in criminal sanctions under the Texas Controlled Substances Act. In general, this includes prescription drugs, as well as certain substances not having generally accepted medical use (e.g. heroin, LSD, marijuana, etc.) and substances possessing chemical structures similar to those of controlled substances (designer drugs).

Specific details related to the Alcohol and Illicit Drug Policy are addressed in the Texas A&M University-Corpus Christi *Student Handbook*.

**Reporting Process:** Board of Nurse Examiners, State of Texas, and Texas A&M University-Corpus Christi guidelines will be reviewed in orientation for all incoming students to the Nursing

and Health Science Programs.

- Nursing and Health Science faculty have the authority and responsibility to take immediate corrective action in the classroom, practicum and clinical areas with regard to student conduct and performance which may be influenced by chemical abuse or mental health problems.
- Corrective action by the faculty includes:
  - Reporting behaviors/cause for concern to appropriate department chair.
  - Holding these matters in the strictest confidence.
  - Referring the student to Student Health and Counseling services and/or other appropriate health facility.
  - Notifying the Dean of the College of Nursing and Health Sciences for referral of student to Counseling Center.
- The Counseling Center will evaluate the student and confirm intemperate use of alcohol, drugs or lack of emotional wellness through written documentation to the referring member of the College of Nursing and Health Sciences.
- The College Dean will report the occurrence to the BON as required in accordance with the law.
- Suspension or clearance of student clinical, classroom and practicum studies from student health services and counseling center will be obtained by the student. The written suspension or clearance must be submitted to the Dean of Nursing and the department chair before that student is able to resume studies in the clinical, classroom and practicum areas.
- The student will take the responsibility to undertake counseling and/or medical attention as long as the problem exists. Failure of the student to comply may result in dismissal from the program.

Referrals for Alcoholism, Drug Abuse and Emotional Ill Health

- Counseling Center 825-2703
- Student Health 825-2601

### **Nurse Practice Act Peer Review Policy and Procedure (Students and Faculty with RN License)**

Peer review provides the opportunity for assessment and analysis by other registered nurses in a climate of collegial problem solving. The focus is on obtaining relevant data about the event, determining whether or not the event is reportable to the Texas Board of Nursing (TBON), ensuring due process, and making recommendations for corrective actions to the TBON. The policy for Peer Review for Reportable Incidents pertains to both faculty and students who are licensed as registered nurses. Peer review of registered nurses is governed by Article 4525b of the Nurse Practice Act.

## **Definitions**

**Reportable Conduct.** In accordance with Article 4525a, Section 1, Nurse Practice Act, "reportable conduct" identifies the conduct that must be reported to the Texas Board of Nurse Examiners as any one of the following:

1. Conduct that unnecessarily exposes, or is likely to expose, a patient/person to a risk of harm.
2. Unprofessional conduct.
3. Failure to care adequately for a patient.
4. Failure to conform to minimum standards of acceptable professional nursing practice.
5. Practice that is, or is likely to be, impaired by chemical dependency.
6. Mental illness affecting practice would be reportable as falling under (a)-(d), depending on behaviors/conduct exhibited.

**Minor Incidents.** Conduct that otherwise is reportable may not be reportable if it is a minor incident and employer procedures are in place to ensure that the incident does not go undocumented. In accordance with Article 4525a, Section 6A, Nurse Practice Act, defines "minor incident" as conduct that does not indicate that the Nurse's continuing to practice professional nursing poses a risk of harm to a patient/client/person. The Texas BON Rule 217.19 further defines that which constitutes a minor incident as "conduct that does not indicate the Nurse's continuing to practice professional nursing poses a risk of harm to the client or other person." (For RNs, see TNA, The ABCs of Nursing Peer Review, Version 12/14/95, p. 19)

**Protection to RNs refusing to engage in reportable conduct.** Article 4525d, Nurse Practice Act, prohibits disciplining or discriminating against an RN who refuses to engage in what she/he believes is reportable conduct. It is designed to provide protection to the RN who refuses to engage in conduct that the RN believes would be reportable to the Texas Board of Nursing. RNs can be placed in situations in which they feel that they are being forced to choose between refusing to carry out an employer's order or to engage in conduct that the RN believes violates the Nurse Practice Act. The RN, at the time of refusing to engage in the conduct, must state that the reasons for the refusal are that the RN believes that it violates the Nurse Practice Act. The RN must be familiar with what is reportable conduct and assert that as the reason for refusing to engage in the conduct. (See TNA, The ABCs of Nursing Peer Review, Version 12/14/95, Section 2, p. 19.)

## **Procedure**

- A. The Peer Review Committee for Reportable Incidents (hereafter referred to as The Committee) is chaired by a member of the Faculty Peer Review Committee and consists of a least three members.
- B. Any person may initiate the Peer Review process to investigate complaints concerning the practice of any nurse contracted by Texas A&M University-Corpus Christi College of Nursing & Health Sciences by contacting the Dean of the College of Nursing & Health Sciences and submitting the proper form.
- C. Upon receipt of the complaint, the Dean of the Texas A&M University-Corpus Christi College of Nursing & Health Sciences will notify the Chair of The Committee and appoint other committee members.
- D. The Committee will meet within five (5) working days and appoint an investigator.
- E. The Committee will assign an RN, who may or may not be a faculty member, to

investigate the complaint.

- F. If the practice of the Nurse under peer review involves an affiliating agency, The Committee Chair will coordinate the respective agency's Peer Review Committee, according to Article 4525b of the Nurse Practice Act.
- G. Permission to review the medical records will be obtained when necessary.
- H. Due Process Procedure:
  - 1. The nurse shall be notified within 3 (three) calendar days of the decision date on which the incident is to be reviewed.
  - 2. The notice shall be sent by certified mail with return receipt requested or personally delivered to the Nurse with receipt acknowledged in writing.
  - 3. The Committee Chair or designee shall conduct an investigation to include reviewing relevant documents and interviewing witnesses.
  - 4. The Nurse who is being reviewed shall be interviewed and given an opportunity to submit a written statement.
  - 5. At least 15 (fifteen) calendar days before the date of The Committee meeting as determined by the original notice, the Nurse and the Nurse's attorney shall be given an opportunity to review the documents relating to the incident.
    - a. This review shall occur in the presence of The Committee Chair or designee.
    - b. All records shall not be removed or copied by the Nurse or by the Attorney.
  - 6. The Committee Chair may meet with the Nurse at least 3 (three) days before The Committee meeting in an informal conference. The purpose of this meeting is to identify facts and not issues in dispute, to provide a verbal summary of the investigation and to attempt to reach an agreed-upon resolution.
    - a. If a resolution is agreed upon, The Committee Chair shall record the agreement and forward a copy to the Nurse.
    - b. The Nurse shall have 5 (five) calendar days to sign and return the agreed-upon resolution.
    - c. If the signed resolution is not returned within 5 (five) calendar days, the Nurse is presumed to have rejected the agreed-upon resolution and The Committee shall meet as scheduled.
- I. Meeting Agenda:
  - 1. An opening statement will be made by The Committee Chair on the purpose, process and confidentiality of the meeting.
  - 2. Opening statement about the incident investigation by the person reporting the incident.
  - 3. Opening statement about the incident investigation by the Nurse.
  - 4. Presentation of evidence:
    - a. Witnesses
    - b. Summaries of written statement
  - 5. Response by the Nurse:
    - a. May ask questions
    - b. May respond to questions
    - c. May present own witnesses
    - d. Closing statement by the Nurse
  - 6. Statement by The Committee Chair on decision date
  - 7. Participation by the Nurse:
    - a. May attend the meeting.

- b. May ask questions of The Committee and respond to questions.
  - c. May present own witnesses.
  - d. May not question witnesses directly, but may submit questions for witnesses in writing to The Committee Chair who will ask the questions.
8. Attorney Involvement:
- a. Both the Nurse and the College of Nursing have the right to consult an attorney.
  - b. The Nurse's Attorney has the right to review documents relating to the incident in the presence of The Committee Chair.
  - c. The Attorney may or may not be present at The Committee Meeting.
    - i. If either the Nurse or the facility intends to have their attorney at the meeting, they must notify the other in writing at least 7 (seven) calendar days in advance. Failure to do so will waive the right to have an attorney present.
    - ii. If present at the meeting, their participation will be limited to no additional participation/consulting with client/etc.
    - iii. May not ask questions directly to The Committee or to the witnesses.
- J. The Committee's Decision:
- 1. The Committee shall make its decision within 14 (fourteen) calendar days or less after the review.
  - 2. The decision shall include the reportable incident and correct action.
- K. Notice to Nurse of Decision:
- 1. The Nurse will receive notice within 3 (three) calendar days of decision.
  - 2. The notice shall be sent by certified mail or will be delivered personally to the Nurse with receipt acknowledged in writing.
- L. Filing of Rebuttal Statement:
- 1. The Nurse also the right to submit in writing a rebuttal statement to The Committee's decisions.
  - 2. The Nurse shall submit the rebuttal statement no more than 7 (seven) calendar days after receipt of Notice of Decision.
- M. Reporting: A written report shall be submitted to the Texas Board of Nurse Examiners by the Director of the Texas A&M University-Corpus Christi College of Nursing. The written report will contain:
- 1. Description of the incident.
  - 2. The decision of The Committee.

The file will be destroyed if The Committee or the Texas Board of Nursing (after review) does not believe action is necessary. Note: TNA: (1995). The ABC's of Nursing Peer Review, Austin, Texas: TNA. May be used as reference for model forms pertaining to Peer Review Process.

**Nursing Practice Act**  
**DECLARATORY ORDERS**

Texas Board of Nursing  
William P. Hobby Building  
333 Guadalupe, Suite 3-460  
Austin, TX 78701-3944

**TEXAS BOARD OF NURSING (BON)**  
**NURSING PRACTICE ACT & NURSING PEER REVIEW ACT**  
**TEXAS OCCUPATION CODE AND STATUTES REGULATING**  
**THE PRACTICE OF PROFESSIONAL NURSING**  
**Amended 2009**

**SUBTITLE E. REGULATION OF NURSING**  
**CHAPTER 301. REGISTERED NURSES**

**SUBCHAPTER F. LICENSE REQUIREMENTS**

301.257. Declaratory Order of License Eligibility.

301.252. License Application.

301.253. Examination.

**SUBCHAPTER J. PROHIBITED PRACTICES AND DISCIPLINARY ACTIONS**

301.452. Grounds for Disciplinary Action.

301.453. Disciplinary Authority of Board; Methods of Discipline.

301.454. Notice and Hearing.

**Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice**  
**Board of Nurse Examiners for the State of Texas**  
**Excerpts from the Rules and regulations Relations Relating to Professional Nurse**  
**Education, Licensure and Practice**

213.27. Good Professional Character.

213.28. Licensure of Persons with Criminal Convictions.

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

213.30. Declaratory Order of Eligibility for Licensure.

217.11. Standards of Professional Nursing Practice.

217.12. Unprofessional Conduct.

**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 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 and 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.

#### **Licensure of Persons with Criminal Convictions.**

- a. This section sets out the considerations and criteria on the eligibility of persons with criminal convictions to obtain a license as a registered nurse or those already licensed who renew their license. 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 a felony, a misdemeanor involving moral turpitude, or engaged in conduct resulting in the revocation of probation imposed pursuant to such a conviction.
- b. The practice of nursing involves clients, their families, significant others and the public in diverse settings. The registered 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.
- c. In considering whether a criminal conviction renders the individual ineligible for licensure or renewal of licensure as a registered nurse, the Board shall consider:
  1. the knowing or intentional practice of professional 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 professional 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 professional nursing practice.
- d. 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 a crime, shall consider:
1. the extent and nature of the person's past criminal activity;
  2. the age of the person at the time of the commission of the crime;
  3. the amount of time that has elapsed since the person's last criminal activity;
  4. the conduct and work activity of the person prior to and following the criminal activity;
  5. evidence of the person's rehabilitation or rehabilitative effort while incarcerated or following release; and
  6. other evidence of the person's present fitness, including letters of recommendation from: prosecutorial, 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.
- e. It shall be the responsibility of the applicant to secure and provide to the Board the recommendations of the prosecution, law enforcement, and correctional authorities as required under this Act. The applicant shall also
- f. furnish proof in such form as may be required by the licensing authority 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.
- 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
- h. complete, legible and accurate documentation will result in delays prior to licensure or renewal of licensure and possible grounds for ineligibility.
- 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)-(e) 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 professional nursing in accordance with the Nursing Practice Act, Board rules and generally accepted standards of professional 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. (6/99)

**Intemperate Use and Lack of Fitness in Eligibility and Disciplinary Matters.**

- a. A person desiring to obtain or retain a license to practice professional nursing shall provide evidence of current sobriety and fitness.
- 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 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. (6/99)
- c. Such person, if unable to sign the certification in subsection (b) of this section, shall execute an authorization for release of medical, psychiatric and treatment records in relation to the conditions mentioned in subsection (b) of this section.
- d. Such person shall 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 or mental illness is relevant only so far as it may indicate current intemperate use or lack of fitness.
- f. No license shall be denied under this rule unless it is shown that the person seeking to obtain or retain the license poses a direct threat to the health and safety of patients/clients, their families or significant others or the public.
- g. 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 twelve consecutive months; and
  - B. licensure limitations/stipulations and/or peer assistance program participation can be implemented which will ensure that patients and
  - C. the public is protected until the individual has attained a five-year term of sobriety/abstinence.
- h. With respect to mental illness in eligibility, disciplinary, and renewal matters, the executive director is authorized to propose conditional orders for individuals who have experienced mental illness 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 twelve consecutive months; and,
  - 2.(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.
- i. In renewal matters involving chemical dependency or mental illness, 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.
- j. Upon receipt of items (i)(1)-(3) of this section, the executive director may renew the license.

**Eligibility for Licensure.**

- a. An individual enrolled or planning to enroll in a basic nursing program who has reason to believe that he or she may be ineligible for licensure, may petition the Board for a declaratory order as to his or her eligibility.
- b. The individual must submit a petition on forms provided by the Board which includes:
  1. a statement by the individual indicating the reason(s) and basis of potential ineligibility;
  2. if the potential ineligibility is due to criminal conviction, any court documents including, but not limited to, any indictments, 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. Notwithstanding any provision to the contrary, no fee will be required for petitions submitted pursuant to this section when the potential ineligibility is due to mental illness only.
- c. An investigation of the petition and the individual's eligibility shall be conducted.
  - d. The petitioning individual or the Board may amend the petition at any time before a final determination is made.
  - e. If the executive director proposes to find the petitioning individual ineligible for licensure, the petitioner may obtain a hearing before an ALJ by making such a request in writing to the executive director. The hearing shall be conducted in accordance with §213.22 of this title (relating to Formal Proceedings) and the rules of the SOAH. When in conflict, the SOAH rules governing hearing 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).

### **Professional Nursing Practice.**

The responsibility of the Texas Board of Nurse Examiners (board) is to regulate the practice of professional nursing within the State of Texas. The purpose of defining standards of practice is to identify roles and responsibilities of the registered professional nurse (RN) in any health care setting. The standards for professional nursing practice shall establish a minimum acceptable level of professional nursing practice. The RN shall:

- (1) 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 RN's current area of nursing practice;
- (2) use a systematic approach to provide individualized, goal-directed nursing care by:
  - (A) performing nursing assessments regarding the health status of the client;
  - (B) making nursing diagnoses which serve as the basis for the strategy of care;
  - (C) developing a plan of care based on the assessment and nursing diagnosis;
  - (D) implementing nursing care; and
  - (E) evaluating the client's responses to nursing interventions;
- (3) know the rationale for and the effects of medications and treatments and shall correctly administer the same;
- (4) accurately and completely report and document:
  - (A) the client's status including signs, symptoms and responses;
  - (B) nursing care rendered;
  - (C) physician, dentist or podiatrist orders;
  - (D) administration of medications, and treatments; and
  - (E) client response(s);
  - (F) contacts with other health care team members concerning significant events regarding client's status.
- (5) implement measures to promote a safe environment for clients and others;
- (6) respect the client's right to privacy by protecting confidential information unless obligated or allowed by law to disclose the information;

- (7) promote and participate in client education and counseling based on health needs;
- (8) ensure the verification of current Texas licensure and credentials of personnel for whom the RN is administratively responsible, when acting in the role of nurse administrator;
- (9) make assignments to others that take into consideration client safety and which are commensurate with the educational preparation, experience, knowledge, and physical and emotional ability of the persons to whom the assignments are made;
- (10) delegate nursing tasks in compliance with §218.3, relating to general criteria for delegation and §218.4, relating to supervision;
- (11) supervise nursing care provided by others for whom the RN is administratively or professionally responsible;
- (12) accept only those nursing assignments that take into consideration patient safety and that are commensurate with one's own educational preparation, experience, knowledge and physical and emotional ability;
- (13) obtain instruction and supervision as necessary when implementing nursing procedures or practices;
- (14) notify the appropriate supervisor when leaving a nursing assignment;
- (15) know, recognize, and maintain professional boundaries of the nurse-client relationship;
- (16) report unsafe nursing practice by an RN which a nurse has reasonable cause to suspect has exposed or is likely to expose a client unnecessarily to risk of harm as a result of failing to provide client care that conforms to the minimum standards of acceptable and prevailing professional practice. The RN should report unsafe practice conditions or other practitioners to the appropriate authority or licensing board;
- (17) provide, without discrimination, nursing services regardless of the age, disability, economic status, gender, national origin, race, religion, or health problems of the client served;
- (18) institute appropriate nursing intervention which might be required to stabilize a client's condition and/or prevent complications;
- (19) 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 RN makes the decision not to administer the medication or treatment;
- (20) implement measures to prevent exposure to infectious pathogens and communicable conditions;
- (21) 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;
- (22) consult with, utilize and make referrals to appropriate community agencies and health care resources to provide continuity of care;
- (23) be responsible for one's own continuing competence in nursing practice and individual professional growth.

**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 the registered professional nurse (RN) which the board believes are likely to deceive, defraud or injure clients or the public. These behaviors include but are not limited to:

- (1) failing to 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 RN's current area of nursing practice;
- (2) failing to assess and evaluate a client's status or failing to institute nursing interventions which might be required to stabilize a client's condition or prevent complications;
- (3) failing to administer medications or treatments or both in a responsible manner;
- (4) failing to accurately and completely report and document:
  - (A) the client's status including signs, symptoms and responses;
  - (B) nursing care rendered;
  - (C) physician, dentist or podiatrist orders;
  - (D) administration of medications, and treatments; and
  - (E) client response(s);
  - (F) contacts with other health care team members concerning significant events regarding clients status.
- (5) failing to implement measures to promote a safe environment for clients and others (e.g. bed rails up, universal precautions);
- (6) disclosing confidential information or knowledge concerning the client except where required or allowed by law;
- (7) failing to provide client education and counseling based on client health care needs;
- (8) failing to ensure the verification the current Texas licensure and credentials of personnel for whom he/she is administratively responsible, when acting in the role of nurse administrator;
- (9) assigning nursing care in a manner that fails to take client safety into consideration or assigning nursing care functions to others who lack the educational preparation, experience, knowledge or physical and emotional ability to perform these functions;
- (10) delegating nursing tasks not in compliance with §218.3 relating to general criteria for delegation and §218.4 relating to supervision;
- (11) failing to supervise the delivery of nursing care for which the RN is administratively or professionally responsible;
- (12) accepting an assignment when one's physical or emotional condition prevents the safe and effective delivery of care or accepting an assignment that does not take into consideration patient safety or for which one lacks the educational preparation, experience, knowledge or ability;
- (13) failing to obtain instruction or supervision when implementing nursing procedures or practices for which one lacks the educational preparation, ability, knowledge and/or experience;
- (14) leaving a nursing assignment without notifying one's appropriate supervisor;
- (15) 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);
- (16) 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;
- (17) failing to report to the board or to a board approved peer assistance program, if applicable, within a reasonable time of the occurrence, any violation or attempted violation of the Nursing Practice Act or duly promulgated rules, regulations or orders;

- (18) failing to follow the policy and procedure in place for the wastage of medications at the facility where the RN was employed or working at the time of the incident(s);
- (19) 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;
- (20) failing to make entries, destroying entries, and/or making false entries in records pertaining to care of clients;
- (21) passing, or attempting to pass forged, altered, falsified or unauthorized prescription(s) by electronic, telephonic, written communication or any other means;
- (22) providing information which was false, deceptive, or misleading in connection with the practice of professional nursing;
- (23) failing to answer specific questions that would have affected the decision to license, employ, certify or otherwise utilize an RN;
- (24) 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;
- (25) failing to report the unauthorized practice of professional nursing;
- (26) failing to repay a guaranteed student loan, as provided in Section 57.491 of the Texas Education Code.

For details see the Board of Nurse Examiners Web site <http://www.bne.state.tx.us>

### **Petition for Declaratory Orders**

**BOARD OF NURSE EXAMINERS FOR THE STATE OF TEXAS  
PO BOX 430, AUSTIN, TEXAS 78767-0430**

The Board of Nurse Examiners has identified certain circumstances that may render a potential candidate ineligible for licensure as a registered nurse in the State of Texas. The Board provides individuals the opportunity to petition for a Declaratory Order as to their eligibility in accordance with Article 301.257 of the Nursing Practice Act. **(Deferred order, prosecution, or adjudication - a determination by a court that is withheld or delayed for a specific time period.)**

If you are required to answer "YES" to any of the following questions, please detach the request for a Declaratory Order Petition at the bottom of the page and return it to the BNE's office.

**Processing your Petition may take a minimum of six (6) months, after you provide all required documentation and depending on your circumstance.** Once all requested documents have been received, you will be notified

that the Petition has been transferred to the Enforcement Department for review.

- Have you ever been denied licensure by any licensing/certifying agency in any state, country or province?
- Have you ever had disciplinary action taken against you by any licensing/certifying authority in any state, country, or province?



- Have you ever been convicted of a crime or received a deferred order, with or without an adjudication of guilt, for felony or misdemeanor offense other than a minor traffic violation?
- Have you been diagnosed, treated or hospitalized in the past five (5) years for schizophrenia or other psychotic disorders, bipolar disorder, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder. (You may answer “no” if you have completed and/or are in compliance with TPAPN for mental illness.)
- Have you been addicted or treated for the use of alcohol or any drug within the past five (5) years? (You may answer “no” if you have completed and/or are in compliance with TPAPN for substance abuse.)
- Have you been issued any order concerning your eligibility for examination or licensure by this Board or have you ever received a proposal of ineligibility from the Board?

**DECLARATORY ORDER PETITION PACKET REQUEST**

**NAME:** \_\_\_\_\_

**First, Middle, MaidenLast**

**ADDRESS:** \_\_\_\_\_

**Street or PO Box                      City                      State Zip Code**

**SOCIAL SECURITY NUMBER** \_\_\_\_\_ **DATE OF BIRTH** \_\_\_\_\_

**ARE YOU CURRENTLY ATTENDING A NURSING PROGRAM? [ ] YES [ ] NO**

**School of Attendance:** \_\_\_\_\_

**Expected graduation date:** \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE                                      DATE**

**Board of Nurse Examiners for the State of Texas**

**PO Box 430**

**Austin, Texas 78767-0430**

Licensure Eligibility Notification Form

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

1. §301.257, §301.252, §301.253, and §§301.452 -301.454 of the *Nursing Practice Act*.
2. 2. Rules 213.27 - 213.30 of the *Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice*.
3. 3. Rules 217.11 and 217.12 of the *Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice*.
4. 4. Declaratory Order Request Form.

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed

**Student Handbook Receipt Form**

I have reviewed a copy of the College of Nursing and Health Sciences Student Handbook. I have been provided an opportunity to clarify questions. I am aware that I may review a copy of any subsequent year handbooks by requesting one at the beginning of the respective college year in the College of Nursing and Health Sciences at the Office of the Dean. Receipt form must be signed and submitted to the office of the Dean.

\_\_\_\_\_  
Student Name (Print)

\_\_\_\_\_  
Signature of Student      Date

**Appendix A**

**Written Reprimand**

This is my notice that my behavior is disruptive to the class as perceived by my instructor

\_\_\_\_\_.

Description of behavior:

- \_\_\_\_\_ Tardiness
- \_\_\_\_\_ Sleeping in class
- \_\_\_\_\_ Disrespectful behavior to  
\_\_\_\_\_ instructor/guest speaker
- \_\_\_\_\_ Failure to comply with conduct  
\_\_\_\_\_ instructions in the syllabus
- \_\_\_\_\_ Other (specify)

I, \_\_\_\_\_ acknowledge receipt of this notification.

\_\_\_\_\_ / \_\_\_\_\_ Date/Time

I recognize that the third infraction will result in:

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

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date/Time

**Appendix B**

**College of Nursing and Health Science**

**Student Grade Appeal Form**

Student Name: \_\_\_\_\_ Student ID# \_\_\_\_\_

Local Address: \_\_\_\_\_

Local Phone # \_\_\_\_\_ E-mail address: \_\_\_\_\_

**Grade to be appealed:**

Course Prefix and number: \_\_\_\_\_ Semester: \_\_\_\_\_

Faculty member who assigned the grade: \_\_\_\_\_

Grade received: \_\_\_\_\_

**Required information to be completed by student:**

I initially discussed this grade with my instructor on: \_\_\_\_\_

Date this written appeal was initiated: \_\_\_\_\_

Specific resolution requested: \_\_\_\_\_

Materials to be submitted in support of this grade appeal include:

- \_\_\_ course syllabus
- \_\_\_ attendance policy (if not included in syllabus and relevant to course grade)
- \_\_\_ grading policy (if not included in syllabus)
- \_\_\_ graded course materials
- \_\_\_ other (please explain): \_\_\_\_\_

Student’s explanation for request for change of grade (attach your explanation to this form).

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**(When completed, make a copy for your records, then submit this form to the faculty member who assigned the grade to initiate the appeal process.)**

**College of Nursing and Health Sciences**  
**Faculty Grade Appeal Response Form**

Student Name: \_\_\_\_\_ Student ID# \_\_\_\_\_

Faculty member who assigned the grade: \_\_\_\_\_

Course Prefix and number: \_\_\_\_\_ Semester: \_\_\_\_\_

**Please respond to the following:**

Date grade appeal was brought to instructor: \_\_\_\_\_

\_\_\_\_ I accept the student's appeal and am willing to change the grade based on the information submitted. (No more action required other than submitting the grade change form.)

\_\_\_\_ I do not accept the student's grade appeal. The basis for my decision is: (attach your explanation)

\_\_\_\_\_  
Signature of Instructor of Record

\_\_\_\_\_  
Date

**(Upon completion, make a copy for the college, then submit this form to the Chair of the Department)**

**College of Nursing and Health Sciences**

**Department Chair Grade Appeal Response Form**

Student Name: \_\_\_\_\_ Student ID# \_\_\_\_\_

Faculty member who assigned the grade: \_\_\_\_\_

Course Prefix and number: \_\_\_\_\_ Semester: \_\_\_\_\_

**Decision and Rationale of Chair/Director of Department/Program/School:**

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\_\_\_\_\_  
Chair/Director Signature

\_\_\_\_\_  
Date

**(Upon completion, make a copy for the college, then provide this form to the Student to determine if continuation of the appeal process will occur)**







## Appendix C

### LATEX SENSITIVITY SCREENING

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

Check YES or NO for each of the following:

	QUESTION:	Yes	No
1.	Do you currently wear latex (rubber) gloves regularly? If so, indicate why and how often? _____		
2.	Have you in the past ever worn latex gloves regularly? If so, indicate why and how often? _____		
3.	Do you have a history of eczema?		
4.	Do you have a history of hand rashes? If so when?		
5.	Do you have a history of frequent surgeries or frequent invasive medical procedures?		
6.	Do you have a history of hay fever?		
7.	Do you have a history of asthma?		
8.	Do you have a history of other respiratory allergies?		
9.	Do you have a history of food allergies?		
10.	Circle any of the foods below that cause you to have hives, itchy lips/throat or other severe symptoms while eating/touching the food item. Apple Cherry Melon Pear Apricot Chestnut Nectarine Pineapple Avocado Fig Papaya Plum Banana Grape Passion Fruit Potato Carrots Hazelnut Peach Tomato Celery Kiwi Peanuts Other:		
11.	Do you have a history of other allergies? If so, specify:		
12.	Have you previously worked in the health care, electrical or food handling industry? If so, how long?		
13.	Do you have a rash, itching, cracking, chapping, scaling or weeping of the skin when wearing latex gloves?  If symptomatic, have you tried non-latex gloves?  b. If so, did the symptoms get better or did they persist?		
14.	When you are around persons who are wearing latex gloves, do you get hives, swollen lips or mucous membranes, have difficulty breathing or experience any other respiratory symptoms?		
15.	When you wear latex gloves do you become red, itch, hands swell or develop blisters on the hands within 30 minutes?		
16.	Have you ever had an anaphylactic reaction to anything?		
17.	Have you ever experienced anaphylactic shock?		
18.	Do you have itching, swelling or any other symptoms following dental, rectal or pelvic exams?		
19.	Have you ever had difficulty breathing, or swelling of the tongue, lips or face after blowing up a balloon?		
20.	Have you ever had itching, swelling or discomfort following exposure to rubber bands, rubber racquet handles or elastic clothing bands?		
21.	Have you ever had itching or swelling following use of a condom or diaphragm?		



