



Health & Public Service

STUDENT MANUAL

Fall 2023

Hill County Campus | 112 Lamar Drive | Hillsboro, TX 76645
Johnson County Campus | 2112 Mayfield Parkway | Cleburne, TX 76033
Burleson Center | 517 SW Johnson | Burleson, TX 76028
www.hillcollege.edu

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Welcome from Dr. Agapito Flores Jr.

Greetings,

On behalf of the Health and Public Service faculty and staff at Hill College, Welcome and congratulations on being accepted into the Vocational Nursing (VN) Program at Hill College. You have been selected from a large pool of applicants seeking entrance into the program.

The college has a rich history of providing excellence in teaching and student success. In this program you will learn from dedicated and innovative faculty and you will be supported by staff who are knowledgeable and caring. In addition to offering the best possible professional education, integral components of our program are honesty, integrity, and an uncompromising emphasis on professionalism. You will be working closely with dedicated faculty who have considerable expertise and exceptional professionalism.

Hill College's mission is to provide high quality, comprehensive educational programs and services. The college enhances the educational, cultural, and economic development of its service area and prepares individuals for a more productive life. My commitment to you, as a new VN student, is to ensure you get what you need to be successful in your educational pathways.

Again, congratulations on being accepted into the Hill College VN Program. We affirm and develop the potential of every one of our students; In fact, it is our expectation that the graduates of our college will become the next generation of health care leaders and change agents in the communities they serve. I look forward to seeing you in a class soon.

Sincerely,

Agapito Flores Jr, Ed.D.

Dean of Instruction – Health and Public Service

AFlores@hillcollege.edu

Article 1 General College Information

Section 1.01 Philosophy of Hill College/Mission Statement

The Board of Regents, administrators, and faculty at Hill College are committed to the concept that our College be an open door to learning. With this goal in mind, we extend an educational opportunity to students of all ages who can profit from instruction. Every effort is made to provide equal access to the educational opportunities offered at Hill College without regard to race, creed, color, age, sex, national origin, or disability.

In keeping with this philosophy, Hill College recognizes and accepts the responsibility for providing curricula for university bound students, for students seeking career opportunities in a variety of occupations, and for persons of the community seeking cultural enrichment, short-term skill training, or personal improvement opportunities. The College will seek to achieve these goals within the limits of its legal responsibilities and available fiscal resources.

Section 1.02 Mission Statement

Hill College Mission Statement

Hill College provides high quality comprehensive educational programs and services. The college enhances the educational, cultural, and economic development of its service area and prepares individuals for a more productive life.

Nursing Philosophy

With the Hill College mission in mind, the mission of the Vocational Nursing Program is to prepare nurses to be providers of evidence-based patient-centered care to individuals and families, a patient safety advocate, coordinators of care within a variety of health care systems, and contributing members of the nursing profession.

Section 1.03 Core Values

Accountability

Dedication

Integrity

Positivity

Respect

Section 1.04 Services for Students with Disabilities

Hill College is committed to maintaining an accessible campus community and providing reasonable accommodations to qualified students, faculty, staff and visitors. Section 504 of the Rehabilitation Act of 1973 (117 kB) and the Americans with Disabilities Act (ADA) of 1990 (117 kB) prohibit discrimination in the recruitment, admission, and treatment of students with disabilities. Students with qualified and documented disabilities may request accommodations, which will enable them to participate in and benefit from educational programs and activities. Students must provide appropriate documentation of the disability, complete an Accommodation Request Form for special accommodation/modification, and schedule and participate in an interview with a Hill College academic advisor or success coordinator. For additional information, students should go to the Academic Advising and Success Center or visit the website at https://www.hillcollege.edu/Admissions_Aid/index.html.

Section 1.05 Nondiscrimination

Hill College is committed to the principle of equal opportunity in education and employment. The college does not discriminate against individuals on the basis of age, race, color, religion, sex, national origin, disability, genetic information, or veteran status in the administration of its educational programs, activities, or employment policies. Retaliation against anyone involved in the complaint process is a violation of College District policy and is prohibited.

Reports of discrimination based on disability may be directed to the ADA/Section 504 coordinator. The College District designates the following person to coordinate its efforts to comply with Title II of the Americans with Disabilities Act of 1990, as amended, which incorporates and expands the requirements of Section 504 of the Rehabilitation Act of 1973, as amended:

Name: Lizza Ross

Position: Vice President Student Services

Address: 112 Lamar Drive, Hillsboro, TX 76645

Telephone: (254) 659-7601

Email: lross@hillcollege.edu

Webpage: <https://www.hillcollege.edu/Student/Advising/ADA.html>

Students with qualified and documented disabilities may request accommodations which will enable them to participate in and benefit from educational programs and activities. Students should contact the Academic Advising and Success Center for more details at 254-659-7650 for Hill County Campus, 817-760-5650 for Johnson County Campus, or 817-295-7392 for Burleson Center.

Title IX

Reports of discrimination based on sex, including sexual harassment and gender-based harassment, may be directed to the Title IX Coordinator. The College District designates the following person to coordinate its efforts to comply with Title IX of the Education Amendments of 1972, as amended, and related state and federal laws:

Title IX Coordinator: Adrian Riojas
Position: Dean of Students
Address: 2112 Mayfield Parkway, Cleburne, TX 76033
Telephone: (817) 760-5504
Email: ariojas@hillcollege.edu

Statement of Nondiscrimination: The College District prohibits discrimination, including harassment, against any employee on the basis of sex. Retaliation against anyone involved in the complaint process is a violation of College District policy and is prohibited.

(08/17/2023)

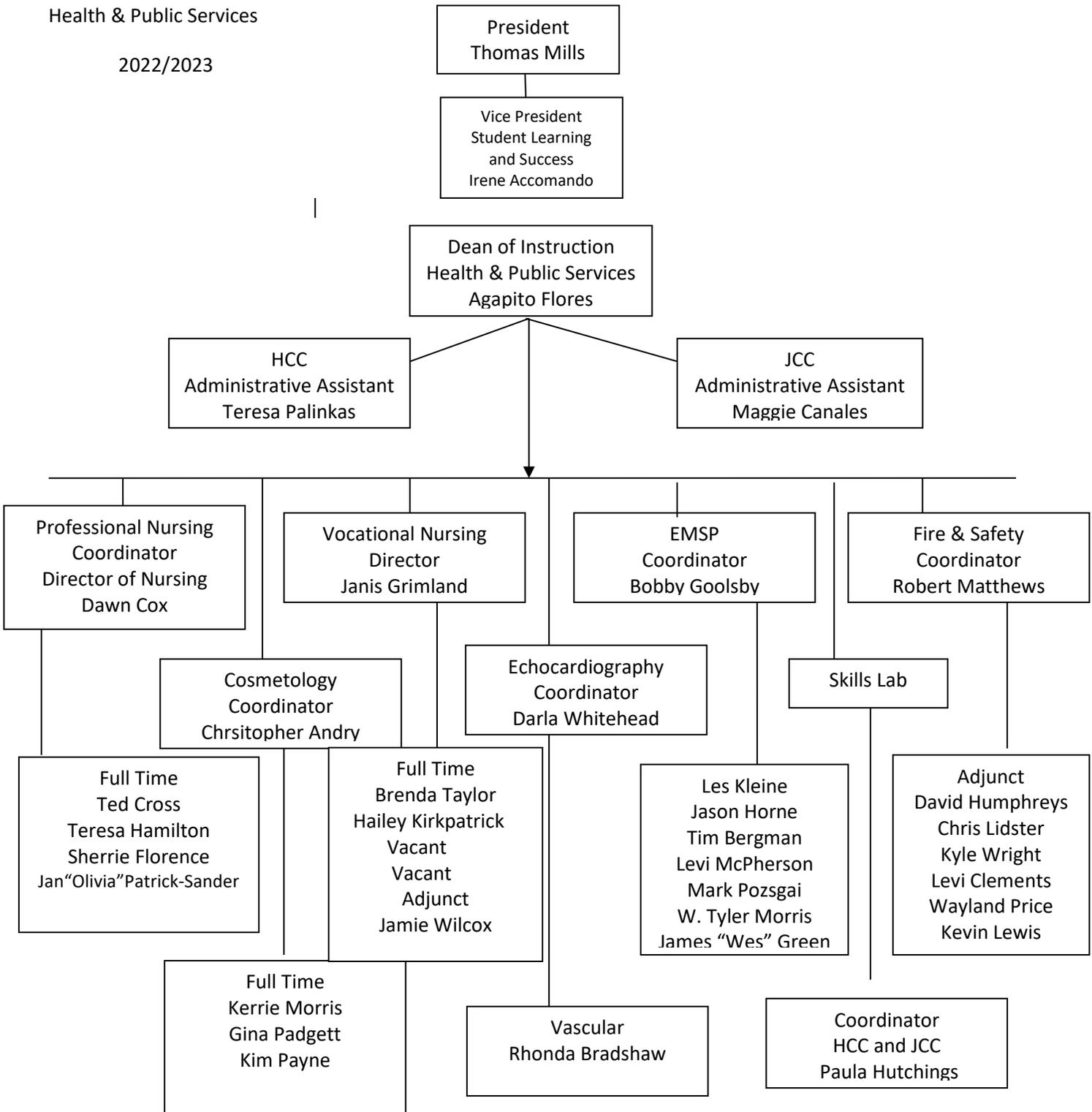
Section 1.06 Disclaimer

This handbook is published for the students of Hill College. Included are policies, procedures and regulations that contribute to the orderly life of the college community. Please refer to the College Catalog for rules relating to such items as admissions, records, graduation, and academic standards. This publication does not constitute a contract between Hill College and the student. The college reserves the right to make changes in this handbook when necessary without notice.

Section 1.07 Hill College Vocational Nursing Organizational Chart

Health & Public Services

2022/2023

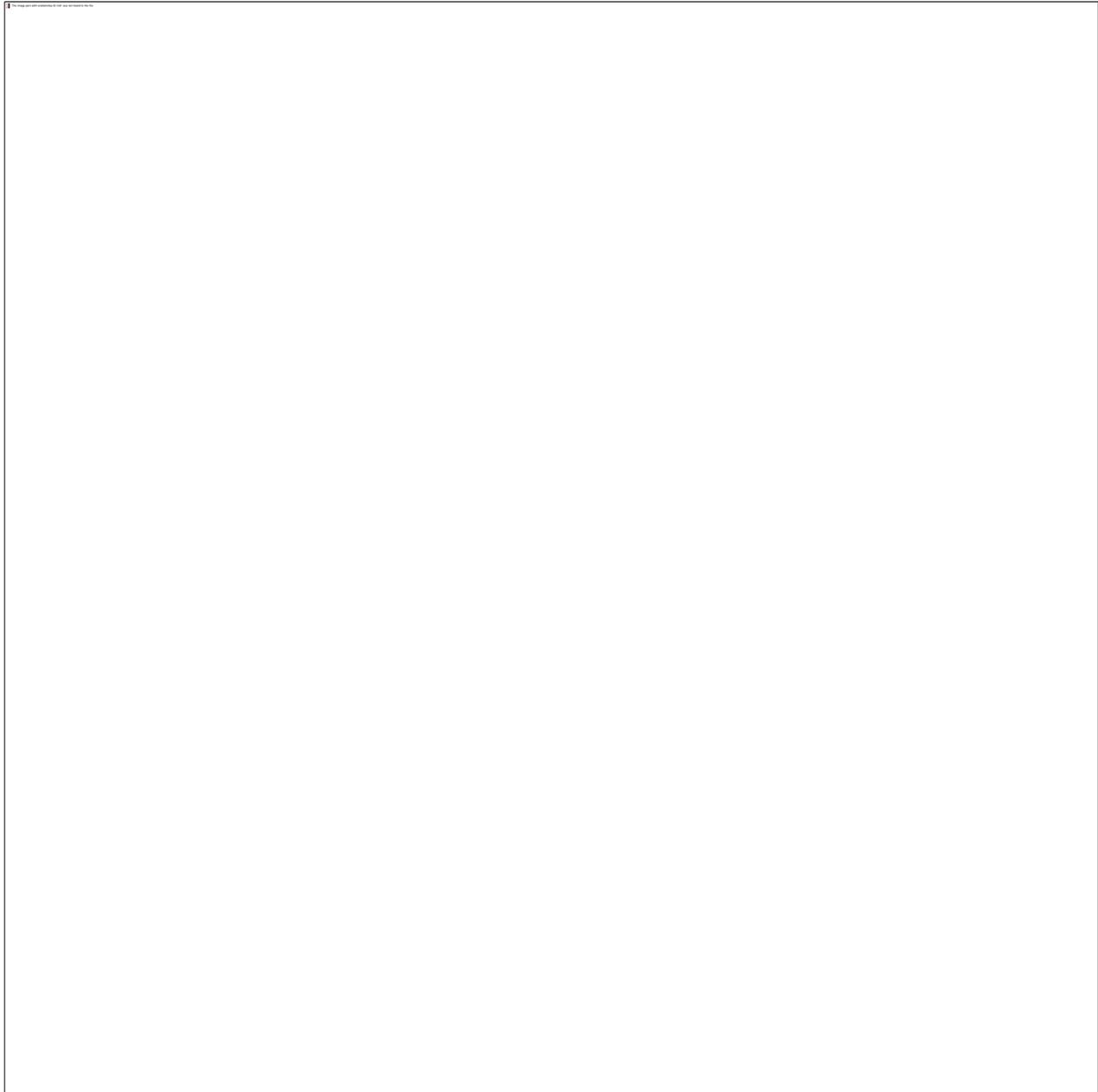


Revised 01/2023

Vocational Nursing Handbook

Section 1.08 Hill College Student Handbook

Link to Hill College Handbook Page <https://www.hillcollege.edu/CampusLife/index.html>



Article 2 Nursing Mission Statement and Nursing Philosophy

Nursing Mission Statement

With the Hill College mission in mind, the mission of the Nursing Program is to prepare nurses to be providers of care to individuals and families, a patient safety advocate, coordinators of care within a variety of health care systems, and contributing members of the nursing profession.

Nursing Philosophy

The Hill College faculty view nursing as a holistic practice that is provided to individuals and families. The Hill College faculty believes that nursing practice is guided by the biological, psychological and social sciences, nursing research and nursing theory. Holistic nursing practice integrates knowledge from the sciences coupled with the art of caring.

We believe that nurses as **Members of a Profession** engage in life-long learning that facilitates personal and professional growth through participation in activities that promote the development and practice of professional nursing, responsibility for continued competence in nursing practice and development of insight through reflection, self-analysis, and self-care. Nursing education prepares graduates to participate in the development and promotion of nursing as a profession through the acceptance and ability to function within the nurse's legal scope of practice and in accordance with the policies and procedures of the employing health care institution or practice setting.

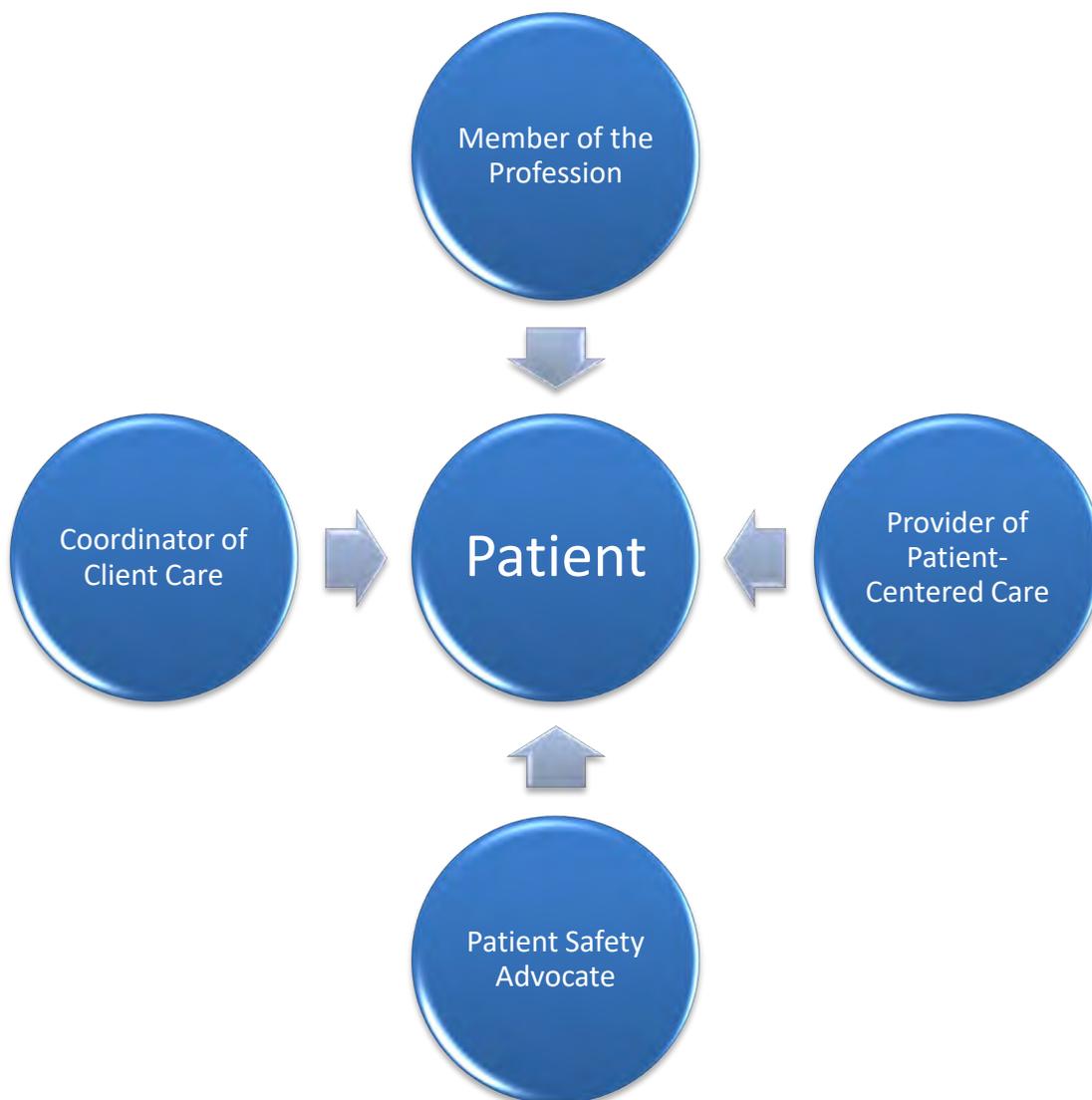
We believe that nurses as **Providers of Patient-Centered Care** strive to meet the ever-changing needs of individuals and families through the promotion, maintenance and restoration of health across the life span, including end-of-life issues. Within the context of multicultural populations, nurses provide care that enables self-determination, respects personal dignity, and preserves or enhances the wholeness of each individual's environment. Nursing education strengthens critical thinking and problem-solving skills by use of clinical reasoning and knowledge based on the vocational nursing program of study and evidence-based outcomes as a basis or decision making in nursing practice.

We believe that nurses as **Patient Safety Advocates** must acquire and demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards. The education process focuses on

implementing measures to promote quality and safe environments for patients, self and others. Patient risk is reduced by focus on formulation of goals and outcomes using evidence-based data and obtaining instruction, supervision, or training needed to implement nursing interventions. We believe that nurses as a **Member of the Health Care Team** work within the health care system both independently and dependently. They coordinate, collaborate, and communicate with patients, their families, and the interdisciplinary health care team to plan, delivers, and evaluate patient-centered care. Nurses serve as advocates and develop referral networks to best meet each person's needs. Nursing education endeavors to prepare graduates to be coordinators of human and material resources, and deliverers of safe, cost-effective care.

Section 2.01 Conceptual Framework

The conceptual framework of Hill College's Vocational Nursing program reflects the philosophy and objectives of the program. Man's human needs in wellness and in illness throughout the life span are integral to the curriculum. Emphasis is placed on utilization of the nursing process in meeting these needs. The Student Vocational Nurse is seen as being competent to function in four roles: Member of the Profession, Provider of Patient-Centered care, Patient Safety Advocate, and Coordinator of Client Care.



Section 2.02 Nursing Process

NURSING PROCESS: The nursing process is a method of problem solving that is a series of planned steps and actions directed toward maintaining the integrity and fulfillment of human needs to promote homeostasis. If wellness cannot be achieved, the nursing process contributes to the highest possible quality of life for the client. The nursing process has five steps: assessing, analysis, planning, intervening, and evaluating.

Assessment: Assessment is the process of gathering, verifying, and communicating data about a client for the purpose of establishing a database.

Analysis: The analysis is a statement that describes a health state or an actual or potential alteration in one's life processes; physiological, psychological, sociocultural, developmental, and spiritual, that nurses are licensed to treat. The analysis includes the problem and its etiology to help individualize the plan of care.

Planning: The next step is to determine a plan of action to assist the client toward attaining the highest level of fulfillment of human needs and to resolve the nursing diagnosis. It is appropriate for clients and family members to be involved in this planning process. Planning results in outcome criteria that are behavioral, patient-oriented, measurable, and realistic for the client.

Intervention: Intervention is the initiation and completion of actions necessary to attain the outcome criteria established in the planning phase.

Evaluation: Evaluation is the process of measuring the client's progress in attaining the outcome criteria.

Section 2.03 Components of Conceptual Framework

The conceptual framework allows for the addition and deletion of relevant nursing content as the needs of society change.

1. Provides the structure around which the curriculum is built.
2. Integrates the philosophy of the nursing program, the instructional content (teaching plan), and related learning experiences within a given time frame.
3. Provides a systematic way to classify knowledge, skills and values in nursing.
4. Provides a comprehensive guide for program development, implementation, and evaluation.
5. Justifies selection or exclusion of certain content or learning experiences from the curriculum.
6. Allows for uniqueness, flexibility, and creativity within the program.
7. The learning process is enhanced by the presentation of content in a logical sequence and in a meaningful and realistic manner, and by utilization of a variety of learning experiences.
8. Throughout the curriculum, the permeating concepts include the utilization of the nursing process and the health-illness continuum. The nursing process is an approach to promote and maintain optimum health.

This process involves:

- (1) assessing,
 - (2) analysis,
 - (3) planning,
 - (4) intervening,
 - (5) evaluating.
9. It is applicable from the most fundamental nursing actions to the more complex nursing interventions involving decision making and coordination of care. Decision making is a process which cannot be learned in a single course, but is developed as the student progresses through the three levels of the program.

10. The goal directed approach utilized in the nursing process provides the framework for the program. The nursing process is presented in lecture and further developed by students in actual clinical practice. The student is given the opportunity to utilize critical thinking skills, to assess, determine nursing diagnoses, and provide appropriate patient care within the scope of vocational nursing.
11. The four major roles of the nurse, member of a profession, provider of patient – centered care, patient safety advocate, and member of the healthcare team, provide structure for the development of objectives. These objectives relate to outcomes identified as exit competencies expected of the student moving through each level. The program and level objectives assist the student in becoming proficient in knowledge communication, organization, professional conduct, and technical skills. The learner is responsible for achieving the behavioral objectives of the program of learning. The curriculum is organized in levels so that learning proceeds from simple to complex and from general to specific. By the time of graduation the student will demonstrate mastery of essential competencies as mandated by the Texas Board of Nursing.

Article 3 Admission/Classroom/Clinical Requirements for the Vocational Nursing Program

Section 3.01 Admission Requirements

1. In addition to the general admission requirements to Hill College applicants to the vocational nursing program must meet the following requirements:
 - a. The student must be a high school graduate or a High School Equivalency Certificate. This must be verified by an official transcript from the High school or High School Equivalency Certificate.
 - b. The student must meet all TSI requirements.
 - c. The student must achieve an acceptable score on the admissions entrance test.
 - d. In accordance with the Rules of Vocational Nursing Education, Licensure and Practice in the State of Texas: "The student must provide a report which indicates the student is in good physical and mental health." A Health and Public Service physical form must be completed and signed by a licensed physician and submitted to the college by the scheduled admission date.
 - e. The student must submit three (3) reference forms prior to the dead line date. The reference form should be sent to the Director from teachers, professors, or past employers. References shall *not* be obtained from friends or relatives and shall *not* be hand delivered.
 - f. The student must demonstrate qualifications and an aptitude that are acceptable.
 - g. Pre-requisites BIOL 2401, BIOL 2402, and PSYC 2301 must be completed with "C" or better from an accredited college prior to entry into the VN Program.
 - h. The student must meet eligibility guidelines per the clinical facilities, for example: criminal history, drug testing.
 - i. Students must disclose eligibility issues and be cleared by the Texas Board of Nursing before entry into the program.
https://www.bon.texas.gov/licensure_eligibility.asp

j. Student must complete the drug screen through the approved Hill College associate during the application process.

k. Student must submit a high school transcript with a minimum of two years completed in the United States or follow TOEFL policy.

Students must demonstrate English proficiency as an admission requirement. This may either be demonstrated by attending 2 years of high school in one of the 50 United States AND receiving a diploma/GED or taking the Test of English as a Foreign Language Test (TOEFL) and scoring a minimum Internet score of 80, or a computer-based TOEFL score of 250, or a paper/pencil test score of 600. TOEFL results are only valid up to two years from the testing date. Scores will not be considered if they are more than two years old. TOEFL Test score reports must be sent directly to the Nursing program director from the testing center. Information about the TOEFL may be obtained from the web site: <http://www.ets.org/toefl/> or write to: Educational Testing Service, Rosedale Road, Princeton, New Jersey 08541. The student can request a TOEFL waiver form from the Health and Public Services department if they have completed 4 college level English courses and 1 college communication course. Information about TOEFL may also be obtained by calling 1-800-468-6335.

l. Submit documentation that the student is current and up to date on the following immunizations:

2 – MMRs

Tetanus (within the last 10 years)

Tdap (within the adult lifetime)

Current negative TB (2 step TB)

Varicella Immunity (2 injection series or immunological test for immunity)

Hepatitis B Series completed

Current Healthcare Provider CPR from AHA

Covid 19

Hill College maintains an open admission policy: however the number of nursing students that can be accepted is limited by the Texas Board of Nursing and the availability of clinical instruction facilities. Since there are often more applicants for the nursing program than available seats available, applications for the nursing program will be screened by a selection committee. In addition to the general admission requirements to Hill College, all prospective candidates must have updated immunizations, completed physical (within three months of entrance), clear drug test, background check, and must take the entrance exam when it is scheduled. Prospective candidates are selected for admission to the VN program based on a points system. Points are awarded for multiple areas including entrance exam test scores, professional references, medical experience, BIOL 1322 or VNSG 1216, VNSG 1331 or RNSG 1301, and HITT 1305 classes that are completed or in progress. Hill College reserves the right to refuse admission to the nursing program to any applicant whose application is deemed unsatisfactory.

Section 3.02 Drug Testing

Hill College has a drug policy (refer to the current [Hill College Student Handbook](#)). Hill College Vocational Nursing Department will reserve the right to do drug testing if the Program Director or the nursing instructors suspect substance and/or alcohol abuse within the student body of the Hill College nursing program while the students are participating in any Hill College activity on or off campus. Students are not to attend any class or clinical under the influence of drugs or alcohol or the student may be recommended for dismissed from the nursing program.

The student is required to have a pre-enrollment drug screen. If the drug screen does not come back clear, the student must have a second drug test done using the hair follicle method, if available, within a 24-48-hour period. These are to be paid for at students' expense. The drug screen must be completed as directed by the program director. Failure to complete a drug screen as directed will result in clinical probation and referral to the incident review committee.

Hill College maintains an open admission policy; however, the number of nursing students that can be accepted is limited by the Texas Board of Nursing and the availability of clinical instruction facilities. Since there are often more applicants for the nursing program than spaces, student selection will be based on a point system. Hill College reserves the right to refuse admission to the nursing program to any applicant whose application is deemed unsatisfactory.

If a student is randomly tested for drugs and found positive for drugs, he/she will be required to have a second drug test done using the of hair follicle method, if available, within a 24-48-hour period. If the second drug test comes back positive for drugs, the student will be sent to the Director of Student Life for counseling. The student will not be allowed to participate in clinical or classroom settings as long as the drug screen is not clear.

Students must be available for medical review if a positive result occurs to verify needed information as requested by the drug testing company within the timeframe specified when the specimen is obtained.

Section 3.03 Program Objectives

1. The curriculum will provide the student with the knowledge and skills is to be safe and competent vocational nurses.
2. The curriculum will provide the student the opportunity to utilize critical thinking skills in identifying nursing / patient care goals based on individual needs and capabilities.
3. The curriculum will emphasize content relevant to health and nursing care of individuals and families. This collaborative process will be part of a larger community system and include other health care professionals.

Section 3.04 Progression

In order to continue in the Vocational Nursing Program, the student must pass **all** courses each semester with a grade of “C” or better before progressing to the next level.

NOTE: If a student fails one (1) nursing course and would like to retake the class the next time it is offered, the student needs to be aware that reentry will only be considered if there is an opening in the class, and the time frame for reentry falls within two (2) years, beginning at the initial date of withdrawal or failure. If the student has/will be out longer than one semester the student may be required to retake the appropriate clinical rotation and/or retake all skills tests (pass each with an 80% one attempt only) and the mathematical skills test (pass with an 90% one attempt only) after the program director has reviewed the students’ clinical performance from previous semester(s) and conferred with the students’ primary clinical instructor(s). The student will only be allowed to transfer twice and then if withdrawing or unsuccessful will need to apply to begin the program again. No limit on reentry when applying for beginning the program. If the student fails two nursing courses during the program they must begin at entry level. (See also [Reinstatement](#))

NOTE: If a student fails a nursing course and would like to retake the class the next time it is offered, the student needs to be aware that reentry will only be considered if there is an opening in the class, and the time frame for reentry falls within a two year period, beginning with the initial date of withdrawal or failure. It is the student’s responsibility to complete the withdrawal process when their decision is determined.

NOTE: After two years the student must begin at entry level and must follow entrance rules that are in place at the time of attempted reentry.

NOTE: No students will be considered for transfer that have not been previously enrolled in the Hill College Vocational or Associate Degree Nursing programs.

Section 3.05 Duty to Report

Nursing Educational programs have the duty to report:

- Impairment or likely impairment of the students practice by chemical dependency.
- Impairment or likely impairment of the students practice by mental dependency.
- Information related to criminal convictions.

(See also [Scholastic Dishonesty](#))

(See also [Academic Misconduct](#))

(See also [Unsafe Student Rule](#))

Section 3.06 Content Mastery Achievement Test

1. Achievement tests will be given at end of each class each semester.

2. The achievement test will count as 10% of the course grade.
 - a. Student must pass with a minimum score of proficiency Level 2 or meet the requirements below to complete the course.
 - b. If the student does not pass test, he/she will be given an incomplete grade for that class until requirements completed.
 - c. Student will be required to compile a study guide of missed questions on the achievement test and provide rationales for correct answers due on assigned date. Failure to complete will result in an incomplete in the course.
 - d. Students that do not score a minimum of proficiency Level 2 will be required to complete remediation as outlined in the matrix.

ATI PN Content Mastery Proficiency Level Scores

Content Mastery Assessment	Level 1	Level 2	Level 3
Adult Med-Surg (90 items)	50.0%	63.3%	76.7%
Fundamentals (60 items)	50%	66.7%	83.3%
Maternal Newborn (50 items)	44.0%	64.0%	76.0%
Mental Health (60 items)	50.0%	68.0%	80.0%
Nursing Care of Children (60 items)	53.3%	66.7%	80.0%
Pharmacology (60 items)	44.0%	62.0%	76.0%

PN CONTENT MASTERY SERIES 2017 PROFICIENCY LEVEL DEFINITIONS*

Level 1

A student meeting the criterion for Proficiency Level 1:

- **is expected to just meet NCLEX-PN standards in this content area.**
- **should demonstrate the minimum level of knowledge in this content area required to support academic readiness for subsequent curricular content.**
- **should meet the absolute minimum expectations for performance in this content area.**

Level 2

A student meeting the criterion for Proficiency Level 2:

- **is expected to readily meet NCLEX-PN standards in this content area.**
- **should demonstrate a level of knowledge in this content area that more than adequately supports academic readiness for subsequent curricular content.**
- **should exceed minimum expectations for performance in this content area.**

Level 3

A student meeting the criterion for Proficiency Level 3:

- **is expected to exceed NCLEX-PN standards in this content area.**
- **should demonstrate a high level of knowledge in this content area that confidently supports academic readiness for subsequent curricular content.**
- **should exceed most expectations for performance in this content area.**

**Note that these definitions were based on expertise of the nurse educators who participated in the cut score study. No empirical study was conducted relating NCLEX-PN performance to performance on the Content Mastery Series, nor was any study conducted demonstrating a statistical relationship between Content Mastery*

Series performance and actual job performance. These Proficiency Level definitions were used by cut score study participants for the purpose of making their empirical ratings of item difficulty.

Hill College Nursing

Requirements and Grading Grid for ATI Comprehensive Content Mastery Exams

VNSG 1500, VNSG 1509, VNSG 2510, VNSG 1330, VNSG 1334, VNSG 1331

Practice Assessments are not supervised by course faculty; however, faculty will schedule the practice assessments. Assessment A is given no later than the seventh week of the semester and Assessment B is given no later than the tenth week of the semester. **The student is not allowed to take the Content Mastery Exam unless requirements for the Practice Assessments have been met as scheduled by the instructor.** The Content Mastery Exam will be given approximately two weeks before the end of the semester. Instructors will provide instructions for Remediation (Active Learning) and use of templates in each course. The student for each course will keep all assessments and remediation in a notebook. Notebooks are to be brought to each examination.

Practice Assessment

Worth 4 Points

<p>Complete Practice Assessment A Remediation (Active Learning)</p> <ul style="list-style-type: none"> • One hour minimum focused review • For each topic missed, complete an active learning template and/identify three critical points <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Templates must be submitted to the instructor by the announced deadline. Templates must be completed as it is a requirement for course completion.</p>	<p>Complete Practice Assessment B Remediation (Active Learning)</p> <ul style="list-style-type: none"> • One hour minimum focused review • For each topic missed, complete an active learning template and/identify three critical points <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Templates must be submitted to the instructor by the announced deadline. Templates must be completed as it is a requirement for course completion.</p>
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Content Mastery Exam

Level 3 Score = 4 points	Level 2 Score = 3 points	Level 1 Score = 2 points	Below Level 1 Score = 1 points
<p>Remediation (Active Learning)</p> <ul style="list-style-type: none"> • One hour minimum focused review • For each topic missed, complete an active learning template and/identify three critical points <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Grade for Content Mastery will not be finalized in the gradebook until templates are complete. Student earns grade of 0 if no templates are submitted by deadline.</p>	<p>Remediation (Active Learning)</p> <ul style="list-style-type: none"> • Two-hour minimum focused review • For each topic missed, complete an active learning template and/identify three critical points <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Grade for Content Mastery will not be finalized in the gradebook until templates are complete. Student earns grade of 0 if no templates are submitted by deadline.</p>	<p>Remediation (Active Learning)</p> <ul style="list-style-type: none"> • Three-hour minimum focused review • For each topic missed, complete an active learning template and/identify three critical points <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Templates must be submitted to the instructor by the announced deadline unless prior arrangements have been made. Student will earn 0 points for ATI</p>	<p>Remediation (Active Learning)</p> <ul style="list-style-type: none"> • Four-hour minimum focused review • For each topic missed, complete an active learning template and/identify three critical points <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Templates must be submitted to the instructor by the announced deadline unless prior arrangements have been made. Student will earn 0 points for ATI</p>

		if submitted late. <i>Regardless, the Retake exam is required.</i>	if submitted late. <i>Regardless, the Retake exam is required.</i>
2 points for remediation	2 points for remediation	2 points for remediation	2 points for remediation
No Retake Required (optional)	No Retake Required (optional)	Retake Required	Retake Required
Total Points = 10/10	Total Points = 9/10	Total Points = 8/10	Total Points = 7/10

Section 3.07 PN Predictor

1. Students will be required to pass the Comprehensive PN predictor with a minimum score of 70 or meet the requirements below to complete the class and/or program.

2. The Comprehensive PN Predictor first attempt will count as 10% of the VNSG 1462 course grade.

If student does not pass the Comprehensive PN Predictor:

- a. Student will be counseled on unacceptable scores and requirements needed to complete the class/program.
- b. Student will be required to do remediation as outlined in the matrix.
- c. Student will then retake the Comprehensive PN Predictor. The cost of the second exam will be the student's responsibility.
- d. If the student fails the second Comprehensive PN Predictor with a score of less than 70, he/she will be required to complete 2000 NCLEX questions.
- e. The student will be given an incomplete grade for the course until requirements met.

**Requirements and Grading Grid for ATI Comprehensive PN Predictor Exam VNSG
1462 Clinical III**

Practice Assessment			
Worth 4 Points			
<p>Complete Practice Assessment A</p> <p>Remediation (Active Learning)</p> <ul style="list-style-type: none"> • One hour minimum focused review • For each topic missed, complete an active learning template and/identify three critical points <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Templates must be submitted to the instructor by the announced. Templates must be completed as it is a requirement for course completion.</p>		<p>Complete Practice Assessment B</p> <p>Remediation (Active Learning)</p> <ul style="list-style-type: none"> • One hour minimum focused review • For each topic missed, complete an active learning template and/identify three critical points <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Templates must be submitted to the instructor by the announced deadline. Student will forfeit opportunity to take Content Mastery if templates are late. Templates must be completed as it is a requirement for course completion.</p>	
Content Mastery Exam			
95% or above Passing predictability = 4 points Score = 4 points	90% or above Passing predictability Score = 3 points	85% or above Passing predictability Score = 2 points	84% or below Passing predictability Score = 1 points
<p>Remediation (Active Learning)</p> <p>One hour minimum focused review</p> <p>For each topic missed, complete an active learning template and/identify three critical points</p> <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Grade for Content Mastery will not be finalized in the gradebook until templates are complete. Student earns grade of 0 if no templates are submitted by deadline. Templates must be completed as it is a requirement for course completion.</p>	<p>Remediation (Active Learning)</p> <p>Two hour minimum focused review</p> <p>For each topic missed, complete an active learning template and/identify three critical points</p> <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Grade for Content Mastery will not be finalized in the gradebook until templates are complete. Student earns grade of 0 if no templates are submitted by deadline. Templates must be completed as it is a requirement for course completion.</p>	<p>Remediation (Active Learning)</p> <p>Three hour minimum focused review</p> <p>For each topic missed, complete an active learning template and/identify three critical points</p> <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Templates must be submitted to the instructor by the announced deadline. Student will earn 0 points for ATI if submitted late. <i>Regardless, the Retake exam is required.</i> Templates must be completed as it is a requirement for course completion.</p>	<p>Remediation (Active Learning)</p> <p>Four hour minimum focused review</p> <p>For each topic missed, complete an active learning template and/identify three critical points</p> <p>Complete templates for Topics to Review. Templates must be handwritten and legible. Templates must be submitted to the instructor by the announced deadline. Student will earn 0 points for ATI if submitted late. <i>Regardless, the Retake exam is required.</i> Templates must be completed as it is a requirement for course completion.</p>
2 points for remediation	2 points for remediation	2 points for remediation	2 points for remediation
No Retake Required (optional)	No Retake Required (optional)	Retake Required	Retake Required

Total Points = 10/10	Total Points = 9/10	Total Points = 8/10	Total Points = 7/10
		Retake bench mark = 1 point	Retake bench mark = 1 point
		Total Points 9/10	Total Points 8/10

ATI Final Grade _____ + Remediation Points _____ = Total ATI Final Grade _____

Student Signature _____

Date _____

Vocational Nursing Handbook

Section 3.08 Unit Test Grades, Testing, and Test Review

1. Student must pass each test with a grade of 75 or above and have an average of 75 or above on combined scores.
2. If student does not have a 75 grade and/or a 75 grade average, then he/she will be required to complete the study guide, objectives, or templates depending on the instructor for that class, for the chapters covered by that test and turn them in to instructor prior to the next exam.
3. Failure to complete the above requirements will result in the student receiving an incomplete for that class until required assignment turned in to the instructor. The student will not be able to take the next unit test if requirements are not met before the exam is given.
4. The student will make an appointment with the instructor for test counseling with failure of any unit test exam. This may be completed in a video conference.
5. The student may challenge questions by writing the question out entirely with all answers, page number and rational from the textbook regarding the challenge, utilizing the test challenge form. This form must be completed by all students on each exam before leaving the testing environment.
6. Challenge time will not exceed 30 minutes.

Section 3.09 Criminal History

If a student has a criminal history and a facility's policy prohibits the student from attending clinical, the Hill College Vocational Nursing Program is not obligated to rearrange the clinical schedule to accommodate a single student. The student will receive a Zero (0) for each day missed.

Eligibility Issues Occurring while in Health Science

Any student in a Health Science program who is arrested and charged for criminal conduct other than minor traffic violations, or who is notified of an outstanding warrant for his or her arrest for a non-traffic violation, must report the issue within 72 hours or before next clinical assignment (whichever comes first) to the Program Director and submit paperwork reflecting the arrest and charges.

Any student with pending charges for criminal conduct other than a minor traffic violation will not be allowed to attend any clinical assignment until the student provides proof of charges being cleared or state agency approval (such as a Declaratory Order). Charges are considered "cleared" when documentation is received from a law enforcement agency or court of law indicating dismissal or acquittal of all charges. Any clinical days missed will result in absences and the program's absence rules will apply. No alternative clinical assignments will be made.

The student may withdraw and reapply for admission after charges are cleared or state agency approval is received. Readmission will be considered on an individual basis. Failure of the student to disclose eligibility issues at any time will result in dismissal from the health science program. Students must disclose eligibility issues and be cleared by the Texas Board of Nursing before entry into the program.

TEXAS BOARD OF NURSING
RULES AND REGULATIONS
relating to
NURSE EDUCATION,
LICENSURE AND PRACTICE

333 Guadalupe, Suite 3-460, Austin, Texas 78701-3942

Texas Administrative Code

TITLE 22

PART 11

CHAPTER 213

RULE §213.27

EXAMINING BOARDS

TEXAS BOARD OF NURSING

PRACTICE AND PROCEDURE

Good Professional Character

(a) Every individual who seeks to practice nursing in Texas must have good professional character related to the practice of nursing. This requirement includes all individuals seeking to obtain or retain a license or privilege to practice nursing in Texas.

(b) The Board defines good professional character as the integrated pattern of personal, academic, and occupational behaviors that indicate an individual is able to consistently conform his/her conduct to the requirements of the Nursing Practice Act, the Board's rules, and generally accepted standards of nursing practice. An individual who provides satisfactory evidence that he/she has not committed a violation of the Nursing Practice Act or a rule adopted by the Board is considered to have good professional character related to the practice of nursing.

(c) A determination that an individual does not have good professional character related to the practice of nursing must be based on a showing by the Board of a clear and rational connection between a violation of the Nursing Practice Act or a rule adopted by the Board and the individual's ability to effectively practice nursing. When evaluating the rationale connection between the relevant conduct and the ability to effectively practice nursing, the Board will consider the following factors:

(1) whether the individual will be able to practice nursing in an autonomous role with patients/clients, their families, significant others, healthcare professionals, and members of the public who are or who may become physically, emotionally, or financially vulnerable;

(2) whether the individual will be able to recognize and honor the interpersonal boundaries appropriate to any therapeutic relationship or health care setting;

(3) whether the individual will be able to make appropriate judgments and decisions that could affect patients/clients and/or the public;

(4) whether the individual has exhibited an inability to conform his/her behavior to the requirements of the Nursing Practice Act, Board rules and regulations, including §217.11 (relating to Standards of Nursing Practice) and §217.12 (relating to Unprofessional Conduct) of this title, and generally accepted standards of nursing practice; and

(5) whether the individual will be able to promptly and fully self-disclose facts, circumstances, events, errors, and omissions, when such disclosure could enhance the health status of

patients/clients or the public and/or could protect patients/clients or the public from an unnecessary risk of harm.

(d) Actions from Other Jurisdictions A certified copy of the order of the denial, suspension, or revocation or other action relating to an individual's license or privilege to practice nursing in another jurisdiction or under federal law is conclusive evidence of that action.

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

Texas Administrative Code

TITLE 22

PART 11

CHAPTER 213

RULE §213.28

EXAMINING BOARDS

TEXAS BOARD OF NURSING

PRACTICE AND PROCEDURE

Licensure of Individuals with Criminal History

(a) Purpose and Applicability. This section establishes the criteria utilized by the Board in determining the effect of criminal history on nursing licensure and eligibility for nursing licensure and implements the requirements of Texas Occupations Code §53.025 and Code of Criminal Procedure Article 42A.111. This section applies to all individuals seeking to obtain or retain a license or multistate licensure privilege to practice nursing in Texas.

(b) An individual is subject to denial of licensure or to disciplinary action for a conviction for, or placement on deferred adjudication community supervision or deferred disposition for, a felony that is directly related to the practice of nursing or for a misdemeanor involving moral turpitude that is directly related to the practice of nursing (collectively referred to as *crimes* hereafter). This section applies to crimes that have been adjudicated through agreement or judicial order by a state or federal criminal justice system, without re-litigation of the underlying factual basis for the agreement or judicial order.

(c) The Board considers the crimes listed in the attached Criminal Guidelines (Guidelines) to be directly related to the practice of nursing. The Guidelines reflect the most common or well known crimes. The vast majority of an individual's criminal history that is reviewed by the Board will fall within the Guidelines. However, the Guidelines are not intended to be an exhaustive listing, and they do not prohibit the Board from considering an offense not specifically listed in the Guidelines. In matters involving an offense that is not specifically listed in the Guidelines, such as a violation of another state's law, federal law, or the Uniform Code of Military Justice, a determination shall be made by comparing that offense to the crime listed in the Guidelines that contains substantially similar elements. The offense must meet the requirements of subsection (b) of this section to be actionable. Further, because the practice of nursing may involve direct contact with children in the normal course of official nursing duties, the Board may consider an individual's prior deferred adjudication community supervision, even if successfully completed, in its licensure decisions.

[Attached Graphic](#)

(d) The Board has determined that the crimes listed in the Guidelines in subsection (c) of this section are directly related to the practice of nursing for the following reasons.

(1) Nursing is a unique profession. Nurses practice autonomously in a wide variety of settings and provide care to individuals who are, by virtue of their illness or injury, physically, emotionally, and financially vulnerable. These individuals include the elderly; children; individuals with mental disorders; sedated and anesthetized patients; individuals with mental or

cognitive disorders; and disabled and immobilized individuals. Nurses that engage in criminal conduct potentially place patients, healthcare employers, and the public at future risk of harm.

(2) Crimes involving fraud or theft. Nurses often have unfettered access to individuals' privileged information, financial information, and valuables, including medications, money, jewelry, credit cards/checkbook, and sentimental items. Nurses also provide around the clock care, working night and weekend shifts at hospitals, long term care facilities, nursing homes, assisted living facilities, and in home health and home-like settings, where there is often no direct supervision of the nurse. Patients in these settings are particularly vulnerable to the unethical, deceitful, and illegal conduct of a nurse. When a nurse has engaged in criminal behavior involving fraud or theft in the past, the Board is mindful that similar misconduct may be repeated in these nursing settings, thereby placing patients, healthcare employers, and the public at risk.

(3) Crimes involving sexual misconduct. Nurses also frequently provide care to partially clothed or fully undressed individuals, who are particularly vulnerable to exploitation. Due to the intimate nature of nursing care, professional boundaries in the nurse-patient relationship are extremely important. When a nurse has engaged in criminal behavior involving any type of sexual misconduct in the past, the Board is mindful that similar misconduct may be repeated in nursing settings. Such conduct may involve touching intimate body parts when the touch is not necessary for care, voyeurism, exposure of body parts when not necessary, and surreptitious touching. As such, the Board considers crimes involving any type of sexual misconduct to be highly relevant to an individual's ability to provide safe nursing care.

(4) Crimes involving lying, falsification, and deception. Nurses are expected to accurately and honestly report and record information in a variety of sources, such as medical records, pharmacy records, billing records, nursing notes, and plans of care, as well as report errors in their own nursing practice. When a nurse has engaged in criminal behavior involving lying, falsification, or deceptive conduct, the Board is mindful that similar misconduct may be repeated in nursing settings, thereby placing patients, healthcare employers, and the public at risk.

(5) Crimes involving drugs and alcohol. Nurses have a duty to their patients to provide safe, effective nursing care and to be fit to practice. Nurses who have a substance use disorder may exhibit impairment in both cognitive and motor functioning. A nurse affected by a substance use disorder may be unable to accurately assess patients, make appropriate judgments, or intervene in a timely and appropriate manner. This danger may be heightened when the nurse works in an autonomous setting where other healthcare providers are not present to provide interventions for the patient. As such, the Board considers crimes related to the use or possession of drugs or alcohol to be highly relevant to a nurse's fitness to practice.

(6) Crimes involving violence or threatening behavior. Nurses provide care to the most vulnerable of populations, including individuals who often have no voice of their own and cannot advocate for themselves. Further, patients are dependent on the nurse-patient relationship for their daily care. When a nurse has engaged in violent or threatening criminal behavior in the past, the Board is mindful that patients may be at risk for similar behavior in a healthcare setting. As such, the Board considers crimes involving violence and threatening behavior to be highly relevant to a nurse's fitness to practice.

(e) The Board has considered the nature and seriousness of each of the crimes listed in the Guidelines in subsection (c) of this section, the relationship of the crime to the purposes for requiring a license to engage in nursing; the extent to which a license to practice nursing might offer an opportunity to engage in further criminal activity of the same type as that in which the individual previously was involved; and the relationship of the crime to the ability, capacity, or

fitness required to perform the duties and discharge the responsibilities associated with the practice of nursing. The Board has determined that each crime listed in the Guidelines in subsection (c) of this section raises concerns about the propensity of the individual to repeat similar misconduct in the workplace, if provided the opportunity. The Board has also determined that similar misconduct in the workplace would place vulnerable individuals at risk of exploitation or victimization. As a result, if an individual has committed a crime listed in the Guidelines in subsection (c) of this section, the Board will evaluate that conduct to determine if disciplinary action is warranted.

(f) Additionally, a crime will be considered to be directly related to the practice of nursing if the act:

(1) arose out of the practice of vocational, professional, or advanced practice nursing, as those terms are defined by the Nursing Practice Act (NPA);

(2) involves a current or former patient;

(3) arose out of the practice location of the nurse;

(4) involves a healthcare professional with whom the nurse has had a professional relationship; or

(5) constitutes a criminal violation of the NPA or another statute regulating another profession in the healing arts that also applies to the individual.

(g) Sanction. Not all criminal conduct will result in a sanction. The Board recognizes that an individual may make a mistake, learn from it, and not repeat it in the nursing practice setting. As such, each case will be evaluated on its own merits to determine if a sanction is warranted. If multiple crimes are present in a single case, a more severe sanction may be considered by the Board pursuant to Texas Occupations Code §301.4531. If a sanction is warranted, the Board will utilize the schedule of sanctions set forth in §213.33(e) (relating to Factors Considered for Imposition of Penalties/Sanctions) of this chapter. At a minimum, an individual will be required to successfully complete the terms of his/her criminal probation and provide evidence of successful completion to the Board. If an individual's criminal behavior is due to, or associated with, a substance use disorder or a mental health condition, evidence of ongoing sobriety, effective clinical management, and/or appropriate ongoing treatment may be required. Further, if an individual's criminal history implicates his/her current fitness to practice, the individual may also be required to meet the requirements of §213.29 to ensure he/she is safe to practice nursing.

(h) Factors. The following factors will be considered when determining the appropriate sanction, if any, in eligibility and disciplinary matters involving criminal conduct:

(1) the nature, seriousness, and extent of the individual's past criminal activity;

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

(3) the amount of time that has elapsed since the individual's last criminal activity;

(4) the conduct and work activity of the individual before and after the criminal activity;

(5) evidence of the individual's rehabilitation or rehabilitative effort while incarcerated or after release;

(6) other evidence of the individual's fitness, including letters of recommendation from prosecutors and law enforcement and correctional officers who prosecuted, arrested, or had custodial responsibility for the individual; the sheriff or chief of police in the community where the individual resides; and any other individual in contact with the convicted individual;

(7) a record of steady employment;

(8) support of the individual's dependents;

(9) a record of good conduct;

(10) successful completion of probation/community supervision or early release from probation/community supervision;

(11) payment of all outstanding court costs, supervision fees, fines, and restitution ordered;

(12) the actual damages, physical or otherwise, resulting from the criminal activity;

(13) the results of an evaluation performed pursuant to Texas Occupations Code §301.4521 and §213.33(k) and (l) of this chapter;

(14) evidence of remorse and having learned from past mistakes;

(15) evidence of current support structures that will prevent future criminal activity;

(16) evidence of current ability to practice nursing in accordance with the NPA, Board rules, generally accepted standards of nursing; and other laws that affect nursing practice; and

(17) any other matter that justice requires.

(i) Evaluations. Pursuant to Texas Occupations Code §301.4521 and §213.33(k) and (l) of this chapter, the Board may request or require an individual to undergo an evaluation with a Board-approved evaluator to better determine whether the individual is safe to practice nursing and is able to comply with the NPA, Board rules, and generally accepted standards of nursing. If an individual's criminal behavior is due to, or associated with, a substance use disorder or a mental health condition, evidence of ongoing sobriety, effective clinical management, and/or appropriate ongoing treatment may also be required.

(j) Youthful Indiscretions. Some criminal behavior that is otherwise actionable may be deemed a youthful indiscretion under this paragraph. In that event, a sanction will not be imposed. The following criteria will be considered in making such a determination:

(1) the offense was not classified as a felony;

(2) absence of criminal plan or premeditation;

(3) presence of peer pressure or other contributing influences;

(4) absence of adult supervision or guidance;

(5) evidence of immature thought process/judgment at the time of the activity;

(6) evidence of remorse;

(7) evidence of restitution to both victim and community;

(8) evidence of current maturity and personal accountability;

(9) absence of subsequent criminal conduct;

(10) evidence of having learned from past mistakes;

(11) evidence of current support structures that will prevent future criminal activity; and

(12) evidence of current ability to practice nursing in accordance with the NPA, Board rules, generally accepted standards of nursing, and other laws that affect nursing practice.

(k) Bars to Licensure.

(1) Texas Occupations Code §301.4535. The Board is required under Texas Occupations Code §301.4535(b) to deny an individual initial licensure or licensure renewal and to revoke an individual's nursing license or privilege to practice nursing in Texas upon a final conviction or a plea of guilty or nolo contendere for a criminal offense specified in §301.4535(a). Further, an individual is not eligible for initial licensure or licensure endorsement in Texas or for licensure reinstatement before the fifth anniversary of the date the individual successfully completed and was dismissed from community supervision or parole for an offense specified in §301.4535(a).

(2) Imprisonment. Pursuant to Texas Occupations Code §53.021(b), an individual's license or multistate licensure privilege to practice nursing in Texas will be revoked by operation of law upon the individual's imprisonment following a felony conviction, felony community supervision revocation, revocation of parole, or revocation of mandatory supervision.

(l) Arrests. The fact that an individual has been arrested will not be used as grounds for sanction. If, however, evidence ascertained through the Board's own investigation from

information contained in the arrest record regarding the underlying conduct suggests actions violating the NPA or Board rules, the Board may consider such evidence.

(m) The Executive Director is authorized to close an eligibility file when the individual seeking licensure has failed to respond to a request for information, a proposed eligibility order, or denial of licensure within 60 days of the request for information, proposed eligibility order, or denial.

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

Source Note: The provisions of this §213.28 adopted to be effective February 25, 2018, 43 TexReg 867; amended to be effective November 24, 2021, 46 TexReg 7876 amended to be effective October 18, 2022, 47 TexReg 6882

Texas Administrative Code

<u>TITLE 22</u>	EXAMINING BOARDS
<u>PART 11</u>	TEXAS BOARD OF NURSING
<u>CHAPTER 213</u>	PRACTICE AND PROCEDURE
<u>RULE §213.29</u>	Fitness to Practice

(a) Each individual who seeks to practice nursing in Texas must possess current fitness to practice. This requirement includes all individuals seeking to obtain or retain a license or privilege to practice nursing in Texas and applies in all eligibility and disciplinary matters. Each individual has a duty to self-evaluate to ensure that he/she is fit to practice before providing nursing care.

(b) An individual's fitness to practice will be determined by evaluating the individual's ability to consistently comply with the requirements of the Nursing Practice Act, the Board's rules and regulations, and generally accepted standards of nursing practice. An individual's fitness to practice may be subject to Board review due to an individual's substance use disorder; possession, abuse, or misuse of alcohol or drugs, prescribed or otherwise; or physical or mental health condition. This is not an exhaustive list. If an individual exhibits any conduct that may prevent him/her from practicing nursing with reasonable skill and safety, the Board will review the individual's conduct to determine if he/she possesses current fitness to practice.

(c) Evaluations. If an individual exhibits conduct that raises questions about his/her fitness to practice, the Board may require the individual to undergo a physical and/or psychological evaluation that meets the criteria of the Occupations Code §301.4521 and §213.33 of this chapter (relating to Factors Considered for Imposition of Penalties/Sanctions). Pursuant to §301.4521, an individual subject to this rule is responsible for paying the costs of the evaluation. Utilizing the results of the evaluation and the individualized facts of the case, the Board may deny licensure (including renewal, reinstatement/reactivation, or the return to direct patient care from a limited license); suspend or revoke the individual's license or privilege to

practice nursing in this state; or impose probationary conditions or restrictions on the individual's ability to practice nursing in this state.

(d) Substance Use Disorders and Abuse/Misuse of Alcohol or Drugs.

(1) Individuals who have been diagnosed, treated, or hospitalized for a substance use disorder that may impair their ability to practice nursing safely, will, at a minimum, be required to demonstrate sobriety and abstinence from drugs and alcohol for a minimum of twelve consecutive months, through verifiable and reliable evidence, in order to obtain or retain licensure. Verifiable and reliable evidence of sobriety and abstinence from drugs and alcohol may include evidence of the completion of inpatient, outpatient, or aftercare treatment, random drug screens, individual or group therapy, and/or support group attendance. Depending upon the individualized facts of each case, an individual may be required to establish this period of sobriety and abstinence prior to being permitted to practice nursing in this state. If appropriate, based upon the individualized facts of the case, an individual may also be eligible to obtain or retain licensure and practice nursing under an encumbered license with conditions/restrictions determined by the Board or through participation in a Board-approved peer assistance program created pursuant to the Texas Health and Safety Code Chapter 467 or other lawfully authorized peer assistance program. Licensure conditions/restrictions may include the completion of inpatient, outpatient, or aftercare treatment, random drug screens, individual or group therapy, and/or support group attendance. The outcome of any particular case will be based upon an evaluation of the individualized factors of the case and the potential risk of harm to the individual's

practice may pose to patients/clients and/or the public.

(2) Individuals who have not been diagnosed, treated, or hospitalized for a substance use disorder, but have nonetheless exhibited behaviors raising concerns about the individual's ability to practice nursing with reasonable skill and safety due to the possession, misuse, or abuse of alcohol or drugs, prescribed or otherwise, including related criminal conduct, may be required to demonstrate sobriety and abstinence from drugs and alcohol for a minimum of twelve consecutive months, through verifiable and reliable evidence, in order to obtain or retain licensure. Verifiable and reliable evidence of sobriety and abstinence from drugs and alcohol may include evidence of the completion of inpatient, outpatient, or aftercare treatment, random drug screens, individual or group therapy, and/or support group attendance. If appropriate, and depending upon the individualized facts of each case, an individual may be eligible to obtain or retain licensure and practice nursing under an encumbered license with conditions/restrictions determined by the Board, which may include the completion of inpatient, outpatient, or aftercare treatment, random drug screens, individual or group therapy, and/or support group attendance. The outcome of any particular case will be based upon an evaluation of the individualized factors of the case and the potential risk of harm the individual's practice may pose to patients/clients and/or the public.

(3) An individual's prior substance use disorder diagnosis or history of prior criminal conduct involving drugs or alcohol, prescribed or otherwise; or misuse or abuse of alcohol or drugs, prescribed or otherwise; will be considered by the Board only to the extent that it may be indicative of the individual's current lack of fitness to practice nursing.

(e) Mental Health Conditions and Diminished Capacity.

(1) Individuals who have been diagnosed, treated, or hospitalized for a mental health condition that may impair their ability to practice nursing safely, will, at a minimum, be required to demonstrate controlled behavior and consistent compliance with recommended treatment, including compliance with a prescribed medication regime, for a reasonable amount of time,

through verifiable and reliable evidence, in order to obtain or retain licensure. Depending upon the individualized facts of each case, an individual may be required to establish controlled behavior and compliance with recommended treatment, including compliance with a prescribed medication regime, prior to being permitted to practice nursing in this state. If appropriate, and depending upon the individualized facts of the case, an individual may also be eligible to obtain or retain licensure and practice nursing under an encumbered license with conditions/restrictions determined by the Board or through participation in a Board-approved peer assistance program created pursuant to the Texas Health and Safety Code Chapter 467. The outcome of any particular case will be based upon an evaluation of the individualized factors of the case and the potential risk of harm the individual's practice may pose to patients/clients and./or the public.

(2) Individuals who have not been diagnosed, treated, or hospitalized for a mental health condition, but have nonetheless exhibited behaviors raising concerns about the individual's fitness to practice due to a mental health condition or diminished capacity may be required to demonstrate controlled behavior and compliance with recommended treatment, including compliance with a prescribed medication regime, for a reasonable amount of time, through verifiable and reliable evidence, in order to obtain or retain licensure. If appropriate, and depending upon the individualized facts of each case, an individual may also be eligible to obtain or retain licensure and practice nursing under an encumbered license with conditions/restrictions determined by the Board. The outcome of any particular case will be based upon an evaluation of the individualized factors of the case and the potential risk of harm the individual's practice may pose to patients/clients and/or the public.

(3) An individual's prior mental health diagnosis or behavioral history will be considered by the Board only to the extent that it may be indicative of the individual's current lack of fitness to practice nursing.

(f) Other Medical Conditions.

(1) The Board recognizes that individuals may have a variety of medical conditions that require medical treatment and/or a medication regime that includes prescription drugs. Although authorized by law and medically necessary, prescription drugs may affect an individual's fitness to practice. An individual must be able to function safely while under the effects of prescription drugs. An individual who abuses his/her prescription drugs or who has been unable to stabilize the synergistic effect of his/her medications may not possess current fitness to practice. Further, some prescription medications may cause side effects that affect an individual's fitness to practice, even when taken properly. In some cases, an individual's physical condition may prevent the individual from practicing nursing safely. In addition to an individual's medication regime, the Board will review an individual's behavior, diagnosis/condition, and treatment plan to determine if he/she possesses current fitness to practice. Based upon the individualized facts of the case, including the results of a required evaluation, if any, the Board may deny licensure (including renewal, reinstatement/reactivation, or the return to direct patient care from a limited license); suspend or revoke the individual's license or privilege to practice nursing in this state; or impose probationary conditions or restrictions on the individual's ability to practice nursing in this state, including limiting the practice setting to one in which the individual is safe to practice nursing.

(2) An individual's prior medical condition and/or diagnosis will be considered by the Board only to the extent that it may be indicative of the individual's current lack of fitness to practice nursing.

(g) Authority of Executive Director. In eligibility and disciplinary matters involving an individual's fitness to practice, the Executive Director may:

(1) review information submitted by the individual and materials and information gathered or prepared by Board Staff; including evidence of the individual's safe practice, compliance with the Nursing Practice Act, Board rules and regulations, and generally accepted standards of nursing practice; verification of compliance with treatment; and evidence of sobriety;

(2) identify any deficiencies in the information necessary for a determination regarding the individual's current fitness to practice;

(3) close any eligibility file in which the individual seeking licensure has failed to respond to a request for information from the Board or to a proposal for denial of licensure within 60 days of the request or proposed denial, as applicable;

(4) approve an individual's eligibility for licensure, enter eligibility orders as authorized in §21 1.7 (relating to Executive Director) of this title, and approve renewals, without Board ratification, when the evidence is clearly insufficient to support denial of licensure; and

(5) propose eligibility and disciplinary orders in eligibility, disciplinary, and renewal matters consistent with the Board's rules and regulations and the interests of public safety and enter disciplinary orders as authorized in §21 1.7 of this title.

(h) The following eligibility and disciplinary sanction policies, as applicable, shall be used by the Executive Director, SOAH, and the Board in evaluating the impact of criminal conduct on nurse licensure in eligibility and disciplinary matters:

(1) Sanctions for Behavior Involving Fraud, Theft, and Deception, approved by the Board and published on August 28, 2015, in the Texas Register and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>;

(2) Sanctions for Behavior Involving Lying and Falsification, approved by the Board and published on August 28, 2015, in the Texas Register and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>;

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

(4) Sanctions for Substance Use Disorders and Other Alcohol and Drug Related Conduct, approved by the Board and published on August 28, 2015, in the Texas Register and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.htrnl>.

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

Texas Administrative Code

TITLE 22

PART 11

CHAPTER 213

RULE §213.30

EXAMINING BOARDS

TEXAS BOARD OF NURISNG

PRACTIVCE AND PROCEDURE

Declaratory Order of Eligibility for Licensure

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

(1) is enrolled or planning to enroll in an educational nursing program that prepares individuals

for initial licensure as a registered or vocational nurse;

(2) seeks licensure by endorsement pursuant to §217.5 of this title (relating to Temporary License and Endorsement); or

(3) seeks licensure by examination pursuant to §217.2 (relating to Licensure by Examination for Graduates of Nursing Education Programs Within the United States, its Territories, or

Possessions) or §217.4 (relating to Requirements for Initial Licensure by Examination for Nurses Who Graduate From Nursing Education Programs Outside of United States' Jurisdiction) of this title.

(b) An individual who has reason to believe that he or she may be ineligible for initial licensure or licensure by endorsement due to issues discussed in this rule may petition the Board for a declaratory order as to his or her eligibility.

(c) A petitioner must submit a petition, on forms provided by the Board, and the following information:

(1) a statement by the petitioner indicating the reason(s) and basis of his/her potential ineligibility;

(2) if the potential ineligibility is due to the petitioner's criminal history, all court documents, including, but not limited to: indictments, agreements for pre-trial diversion or deferred prosecution, orders of deferred adjudication, judgments, probation records, and evidence of completion of probation, as applicable;

(3) if the potential ineligibility is due to the petitioner's mental health condition or diminished capacity, verifiable and reliable evidence of controlled behavior and consistent compliance with recommended treatment, including compliance with a prescribed medication regime, for a reasonable amount of time, as applicable;

(4) if the potential ineligibility is due to the petitioner's substance use disorder and/or the abuse/misuse of alcohol or drugs, verifiable and reliable evidence of sobriety and abstinence from drugs and alcohol, which may include evidence of the completion of inpatient, outpatient, or aftercare treatment, random drug screens, individual or group therapy, and/or support group attendance;

(5) the required fee, which is not refundable; and

(6) an evaluation that meets the criteria of the Occupations Code §301.4521 and §213.33 of this chapter (relating to Factors Considered for Imposition of Penalties/Sanctions), as applicable.

(d) Once the Board has received all necessary information, including the information required by subsection (c) of this section, an investigation of the petition and the petitioner's eligibility shall be conducted. The investigation will be based upon an evaluation of the individualized factors of the case, the potential risk of harm the individual's practice may pose to patients/clients and/or the public, and the petitioner's ability to meet the requirements of §213.27 (relating to Good Professional Character), §213.28 (relating to Licensure of Individuals with Criminal History), and §213.29 (relating to Fitness to Practice) of this chapter, as applicable. Based upon the individualized facts of the case, the Board may approve licensure without encumbrance, impose probationary conditions or restrictions on the individual's ability to practice nursing in this state, or deny licensure.

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

(f) If an individual is seeking licensure by endorsement pursuant to §217.5 of this title and has been licensed to practice nursing in any jurisdiction and has been disciplined in that jurisdiction or allowed to surrender in lieu of discipline in that jurisdiction, the provisions of §213.27(e) of this chapter will apply to the eligibility of the petitioner.

(g) If a petitioner's potential ineligibility is due to his/her criminal history, the provisions of §213.28 of this chapter will apply to the eligibility of the petitioner.

(h) If a petitioner's potential ineligibility is due to a substance use disorder and/or the abuse/misuse of alcohol or drugs, a mental health condition or diminished capacity, or another

issue relating to the individual's fitness to practice, the provisions of §213.29 of this chapter will apply to the eligibility of the petitioner.

(i) If the Executive Director proposes to find the petitioner ineligible for licensure, the petitioner may obtain a hearing before the State Office of Administrative Hearings (SOAH). The Executive Director shall have discretion to set a hearing and give notice of the hearing to the petitioner. The hearing shall be conducted in accordance with §213.22 of this chapter (relating to Formal Proceedings) and the rules of SOAH. When in conflict, SOAH's rules of procedure will prevail. The decision of the Board shall be rendered in accordance with §213.23 of this chapter (relating to Decision of the Board). O A final Board order is issued after an appeal results in a Proposal for Decision from SOAH. The Board's final order must set out each basis for potential ineligibility and the Board's determination as to eligibility. In the absence of new evidence not disclosed by the petitioner or not reasonably available to the Board at the time the order is issued, the Board's ruling determines the petitioner's eligibility with respect to the grounds for potential ineligibility as set out in the order. An individual whose petition is denied by final order of the Board may not file another petition or seek licensure by endorsement or examination until after the expiration of three years from the date of the Board's order denying the petition. If the petitioner does not appeal or request a formal hearing at SOAH after a letter proposal to deny eligibility made by the Eligibility and Disciplinary Committee of the Board or the Executive Director, the petitioner may re-petition or seek licensure by endorsement or examination after the expiration of one year from the date of the proposal to deny eligibility, in accordance with this section and the Occupations Code §301.257.

(k) The following eligibility and disciplinary sanction policies, as applicable, shall be used by the Executive Director, SOAH, and the Board in evaluating an eligibility matter under this section:

(1) Sanctions for Behavior Involving Fraud, Theft, and Deception, approved by the Board and published on August 28, 2015, in title Texas Register and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>; and

(2) Sanctions for Behavior Involving Lying and Falsification, approved by the Board and published on August 28, 2015, in the Texas Register and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>;

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

(4) Sanctions for Substance Use Disorders and Other Alcohol and Drug Related Conduct, approved by the Board and published on August 28, 2015, in the Texas Register and available on the Board's website at <http://www.bon.state.tx.us/disciplinaryaction/dsp.html>.

(l) If an individual seeking licensure by endorsement under §217.5 of this title or licensure by examination under §217.2 or §217.4 of this title should have had an eligibility issue addressed pursuant to the Occupations Code §301.257, the filed application will be treated and processed as a petition for declaratory order under this section, and the individual will be treated as a petitioner under this section and will be required to pay the non-refundable fee required by this section and §223.1 of this title (relating to Fees).

(m) This section implements the requirements of the Occupations Code Chapter 53 Subchapter D and the Occupations Code 9301.257.

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

amended to be effective July 10, 2013, 38 TexReg 4342; amended to be effective October 29, 2015, 40 TexReg 7422

Texas Administrative Code

<u>TITLE 22</u>	EXAMINING BOARDS
<u>PART 11</u>	TEXAS BOARD OF NURSING
<u>CHAPTER 214</u>	VOCATIONAL NURSING EDUCATION
RULE §214.1	General Requirements

(a) The director/coordinator and faculty are accountable for complying with the Board's rules and regulations and the Nursing Practice Act.

(b) Rules for vocational nursing education programs shall provide reasonable and uniform standards based upon sound educational principles that allow the opportunity for flexibility, creativity, and innovation.

Source Note: The provisions of this §214.1 adopted to be effective February 13, 2005, 30 TexReg 545; amended to be effective October 19, 2008, 33 TexReg 8501; amended to be effective October 21, 2012, 37 TexReg 8294

Texas Administrative Code

<u>TITLE 22</u>	EXAMINING BOARDS
<u>PART 11</u>	TEXAS BOARD OF NURSING
<u>CHAPTER 214</u>	VOCATIONAL NURSING EDUCATION
RULE §214.2	Definitions

Words and terms, when used in this chapter, shall have the following meanings unless the context clearly indicates otherwise:

(1) Affidavit of Graduation--an official Board form required in the initial licensure process that is signed by the approved nursing program director/coordinator verifying that the applicant has successfully completed all requirements for graduation from an approved vocational nursing program that meets the requirements set forth in §214.9 of this chapter (relating to Program of Study).

(2) Affiliating agency or clinical facility--a health care facility or agency providing clinical learning experiences for students.

(3) Alternative practice settings--providing opportunities for clinical learning experiences, including those whose primary function is not the delivery of health care.

(4) Approved vocational nursing education program--a Board-approved vocational nursing education program that meets the requirements set forth in §214.9 of this chapter and prepares graduates to provide safe nursing care using concepts identified in the Differentiated Essential Competencies (DECs).

(5) Articulation--a planned process between two (2) or more educational systems to assist students in making a smooth transition from one (1) level of education to another without duplication in education.

(6) Board--the Texas Board of Nursing composed of members appointed by the Governor for the State of Texas.

(7) CANEP (Compliance Audit for Nursing Education Programs)--a document required by the Board to be submitted by the vocational nursing education program's director/coordinator that serves as verification of the program's adherence to the requirements of this chapter.

(8) Career school or college--an educational entity as defined in Title 3, Texas Education

Code, §132.001(1) as a "career school or college".

(9) Classroom instruction hours--hours allocated to didactic instruction and testing in nursing and non-nursing Board-required courses and content.

(10) Clinical learning experiences--faculty-planned and guided learning activities designed to assist students to meet the stated program and course outcomes and to safely apply knowledge and skills when providing nursing care to clients across the life span as appropriate to the role expectations of the graduates. These experiences occur in actual patient care clinical learning situations and in associated clinical conferences; in nursing skills and computer laboratories; and in simulated clinical settings, including high-fidelity, where the activities involve using planned objectives in a realistic patient scenario guided by trained faculty and followed by debriefing and evaluation of student performance. The clinical settings for faculty-supervised hands-on patient care include a variety of affiliating agencies or clinical practice settings, including, but not limited to: acute care and rehabilitation facilities; primary care settings; extended care facilities (long-term care and nursing homes); residential care settings; respite or day care facilities; community or public health agencies; and other settings where actual patients receive nursing care.

(11) Clinical preceptor--a licensed nurse who meets the requirements in §214.10(i)(6) of this chapter (relating to Clinical Learning Experiences), who is not employed as a faculty member by the governing entity, and who directly supervises clinical learning experiences for no more than two (2) students. A clinical preceptor assists in the evaluation of the student during the experiences and in acclimating the student to the role of nurse. A clinical preceptor facilitates student learning in a manner prescribed by a signed written agreement between the governing entity, preceptor, and affiliating agency (as applicable).

(12) Conceptual framework--theories or concepts giving structure to the curriculum and guiding faculty in making decisions about curriculum development, implementation, and evaluation.

(13) Correlated theory and clinical practice--didactic and clinical experiences that have a reciprocal relationship or mutually complement each other.

(14) Course-organized subject content and related activities that may include face-to-face and/or online didactic, laboratory, and/or clinical experiences, planned to achieve specific objectives within a given time period.

(15) Curriculum--course offerings which, in aggregate, make up the total learning activities in a program of study.

(16) Declaratory Order of Eligibility--an order issued by the Board pursuant to Texas Occupations Code 9301.257, determining the eligibility of an individual for initial licensure as a Vocational or Registered Nurse and setting forth both the basis for potential ineligibility and the Board's determination of disclosed eligibility issues.

(17) Differentiated Essential Competencies (DECs)--the expected educational outcomes to be demonstrated by nursing students at the time of graduation, as published in the Differentiated Essential Competencies of Graduates of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgement, and Behaviors: Vocational (VN), Diploma/Associate Degree (Diploma/ADN), Baccalaureate Degree (BSN), October 2010 (DECs).

(18) Director/coordinator--a registered nurse who is accountable for administering a pre-licensure

Vocational Nursing education program, who meets the requirements as stated in §214.6(0) of this chapter (relating to Administration and Organization), and is approved by the Board.

(19) Examination year--the period beginning January 1 and ending December 31 used for the purpose of determining a vocational nursing education program's annual NCLEX-PN® examination pass rate.

(20) Extension site/campus--a location other than the program's main campus where a portion or all of the curriculum is provided.

(21) Faculty member--an individual employed to teach in the vocational nursing education program who meets the requirements as stated in §214.7 of this chapter (relating to Faculty).

(22) Faculty waiver--a waiver granted by a director or coordinator of a Vocational Nursing education program to an individual who meets the criteria specified in 9214.7(e)(1) - (3) of this chapter.

(23) Governing entity--the body with administrative and operational authority over a Board approved vocational nursing education program.

(24) Health care professional--an individual other than a licensed nurse who holds at least a bachelor's degree in the health care field, including, but not limited to: a respiratory therapist, physical therapist, occupational therapist, dietitian, pharmacist, physician, social worker, and psychologist.

(25) MEEP (Multiple Entry-Exit Program)--an exit option which is a part of a professional nursing education program designed for students to complete course work and apply to take the NCLEX-PN® examination after they have successfully met all requirements needed for the examination.

(26) Mobility--the ability to advance without educational barriers.

(27) NEPIS (Nursing Education Program Information Survey)--a document required by the Board to be submitted by the vocational nursing education program director/coordinator to provide annual workforce data.

(28) Non-nursing faculty--instructors who teach non-nursing content, such as pharmacology, pathophysiology, anatomy and physiology, growth and development, and nutrition, and who have educational preparation appropriate to the assigned teaching responsibilities.

(29) Objectives/Outcomes--expected student behaviors that are attainable and measurable.

(A) Program Objectives/Outcomes--broad statements describing student learning outcomes achieved upon graduation.

(B) Clinical Objectives/Outcomes--expected student behaviors for clinical learning experiences that provide evidence of progression of students' cognitive, affective, and psychomotor achievement in clinical practice across the curriculum.

(C) Course Objectives/Outcomes--expected student outcomes upon successful completion of specific course content serving as a mechanism for the evaluation of student progression.

(30) Observation experience--a clinical learning experience where a student is assigned to follow a health care professional in a facility or unit and to observe activities within the facility/unit and/or the role of nursing within the facility/unit, but where the student does not participate in hands-on patient/client care.

(31) Pass rate--the percentage of first-time candidates within the examination year, as that term is defined in paragraph (19) of this section, who pass the National Council Licensure Examination for Vocational Nurses CNCLEX-PN®).

(32) Philosophy/mission--statement of concepts expressing fundamental values and beliefs as they apply to nursing education and practice and upon which the curriculum is based.

(33) Program of study--the courses and learning experiences that constitute the requirements for completion of a vocational nursing education program.

(34) Recommendation--a specific suggestion based upon program assessment that is indirectly related to the rules to which the program must respond but in a method of their choosing.

(35) Requirement--mandatory criterion based on program assessment that is directly related to the rules that must be addressed in the manner prescribed.

(36) Shall--denotes mandatory requirements.

(37) Simulation--activities that mimic the reality of a clinical environment and are designed to demonstrate procedures, decision-making, and critical thinking. A simulation may be very detailed and closely imitate reality, or it can be a grouping of components that are combined to provide some semblance of reality. Components of simulated clinical experiences include providing a scenario where the nursing student can engage in a realistic patient situation guided by trained faculty and followed by a debriefing and evaluation of student performance. Simulation provides a teaching strategy to prepare nursing students for safe, competent, hands-on practice,

(38) Staff-employees of the Texas Board of Nursing.

(39) Supervision--immediate availability of a faculty member or clinical preceptor to coordinate, direct, and observe first-hand the practice of students.

(40) Survey visit--an on-site visit to a vocational nursing education program by a Board representative. The purpose of the visit is to evaluate the program of study by gathering data to determine whether the program is in compliance with Board requirements.

(41) Systematic approach--the organized nursing process approach that provides individualized, goal-directed nursing care whereby the licensed vocational nurse role engages in:

(A) collecting data and performing focused nursing assessments of the health status of an individual;

(B) participating in the planning of the nursing care needs of an individual;

(C) participating in the development and modification of the nursing care plan;

(D) participating in health teaching and counseling to promote, attain, and maintain the optimum health level of an individual; and

(E) assisting in the evaluation of an individual's response to a nursing intervention and the identification of an individual's needs.

(42) Texas Higher Education Coordinating Board (THECB)--the state agency described in Texas Education Code, Title 3, Sub title B, Chapter 61.

(43) Texas Workforce Commission (TWC)--the state agency described in Texas Labor Code, Title 4, Subtitle B, Chapter 301.

(44) Vocational nursing education program--an educational unit within the structure of a school, including a college, university, or career school or college or a hospital or military setting that provides a program of nursing study preparing graduates who are competent to practice safely and who are eligible to take the NCLEX-PN® examination.

Source Note: The provisions of this §214.2 adopted to be effective February 13, 2005, 30 TexReg 545; amended to be effective July 10, 2005, 30 TexReg 3996; amended to be effective February 19, 2008, 33 TexReg 1326; amended to be effective October 19, 2008, 33 TexReg 8501; amended to be effective December 27, 2010, 35 TexReg 11662; amended to be effective October 21, 2012, 37 TexReg 8294; amended to be effective August 9, 2018, 43 TexReg 5072

Texas Administrative Code

TITLE 22

PART 11

CHAPTER 214

RULE §214.5

EXAMINING BOARDS

TEXAS BOARD OF NURSING

VOCATIONAL NURSING EDUCATION

Philosophy/Mission and Objectives/Outcomes

(a) The philosophy/mission and objectives/outcomes of the vocational nursing education program shall be consistent with the philosophy/mission of the governing entity. They shall reflect the diversity of the community served and shall be consistent with professional, educational, and ethical standards of nursing.

(b) Program objectives/outcomes derived from the philosophy/mission shall reflect the Differentiated Essential Competencies of Graduates of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgment, and Behaviors: Vocational (VN), Diploma/Associate Degree (Diploma/ADN), Baccalaureate Degree (BSN), October 2010 (DECs).

(c) Clinical objectives/outcomes shall be stated in behavioral terms and shall serve as a mechanism for evaluating student progression.

(d) The conceptual framework shall provide the organization of major concepts from the philosophy/mission of the program that provides the underlying structure or theme of the curriculum and facilitates the achievement of program objectives/outcomes.

(e) The director/coordinator and the faculty shall periodically review the philosophy/mission and objectives/outcomes and shall make appropriate revisions to maintain currency.

Source Note: The provisions of this §214.5 adopted to be effective February 13, 2005, 30 TexReg 545; amended to be effective October 19, 2008, 33 TexReg 8501; amended to be effective December 27, 2010, 35 TexReg 11662; amended to be effective October 21, 2012, 37 TexReg 8294

Texas Administrative Code

TITLE 22

PART 11

CHAPTER 214

RULE §214.8

EXAMINING BOARDS

TEXAS BOARD OF NURSING

VOCATIONAL NURSING EDUCATION

Students

(a) The number of students admitted to the program shall be determined by the number of qualified faculty, adequate educational facilities and resources, and the availability of appropriate clinical learning experiences for students. Programs shall not accept admissions after the third day of class.

(b) A program must seek approval prior to an increase in enrollment of twenty-five percent (25%) or greater by headcount in one (1) academic year for each nursing program offered. The program must notify Board Staff four (4) months prior to the anticipated increase in enrollment. The Executive Director shall have the authority to approve a requested increase in enrollment on behalf of the Board. When determining whether to approve a request for an increase in enrollment under this rule, the Executive Director and/or the Board shall consider:

- (1) the comparison of previous to projected nursing program enrollment by headcount;
- (2) enrollment projections and enrollment management plan;
- (3) the effect of the change of enrollment on faculty workload;
- (4) clinical placemen/utilization;
- (5) additional resources required by the enrollment increase; and
- (6) the program's plan to evaluate the effect of the enrollment increase on the program's success.

(c) Individuals enrolled in approved vocational nursing education programs preparing students for licensure shall be provided verbal and written information regarding conditions that may disqualify graduates from licensure and of their rights to petition the Board for a Declaratory Order of Eligibility. Required eligibility information includes:

- (1) Texas Occupations Code §301.252, 301.257., and 301.452-.469; and
- (2) Sections 213 .27 - 213.30 of this chapter (relating to Good Professional Character, Licensure of Individuals with Criminal History, Fitness to Practice, and Declaratory Order of Eligibility for Licensure).

(d) The program shall have a Nursing Student Handbook with well-defined, written nursing student policies based upon statutory and Board requirements, including nursing student

admission, dismissal, progression, graduation policies, and policies to ensure students fulfill requirements for obtaining criminal history record information as set forth in the Occupations Code §301.257. Processes shall be in place for policy development, implementation, and enforcement.

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

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

(3) Applicants shall present evidence of being able to meet objectives/outcomes of the program;

(4) All students shall be pretested. Tests shall measure reading comprehension and mathematical ability.

(e) Reasons for dismissal from the program shall be clearly stated in written nursing student policies and shall address:

(1) behavior evidencing actual or potential harm to patients, clients, or the public;

(2) criminal behavior that could affect licensure, as set forth in §213.28 (relating to Licensure of Individuals with Criminal History) of this title;

(3) current fitness to practice nursing, as set forth in §213.29 (relating to Fitness to Practice) of this title; and

(4) good professional character, as set forth in §213.27 (relating to Good Professional Character) of this title.

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

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

(1) The program shall maintain a signed receipt of student policies in all students' records.

(2) The program shall maintain evidence of student receipt of the criteria regarding eligibility for licensure, as specifically outlined in subsection (c) of this section.

(3) It is the responsibility of the program and the nursing faculty to define and enforce nursing student policies.

(h) Acceptance of transfer students and evaluation of allowable credit for advanced placement remains at the discretion of the director or coordinator of the program and the governing entity. Upon completing the program's requirements, the transferred student is considered to be a graduate of the program.

(i) Students shall have mechanisms for input into the development of academic policies and procedures, curriculum planning, and evaluation of teaching effectiveness.

(j) Students shall have the opportunity to evaluate faculty, courses, and learning resources and these evaluations shall be documented.

Source Note: The provisions of this 9214.8 adopted to be effective February 13, 2005, 30 TexReg 545; amended to be effective October 19, 2008, 33 TexReg 8501; amended to be effective December 27, 2010, 35 TexReg 1662; amended to be effective October 21, 2012, 37 TexReg 8294; amended to be effective April 19, 2016, 41 TexReg 2T 52; amended to be effective August 9, 2018, 43 TexReg 5072

Texas Administrative Code

TITLE 22

EXAMINING BOARDS

PART 11
CHAPTER 214
RULE §215.8

TEXAS BOARD OF NURSING
PROFESSIONAL NURSING EDUCATION
Students

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

(b) A program must seek approval prior to an increase in enrollment of twenty-five percent (25%) or greater by headcount in one (1) academic year for each nursing program offered. The program must notify Board Staff four (4) months prior to the anticipated increase in enrollment. The Executive Director shall have the authority to approve an increase in enrollment on behalf of the Board. When determining whether to approve a request for an increase in enrollment under this rule, the Executive Director and/or the Board shall consider:

- (1) the comparison of previous to projected nursing program enrollment by headcount;
- (2) enrollment projections and enrollment management plan;
- (3) the effect of the change of enrollment on faculty workload;
- (4) clinical placement/utilization;
- (5) additional resources required by the enrollment increase; and
- (6) the program's plan to evaluate the effect of the enrollment increase on the program's success.

(c) Individuals enrolled in approved professional nursing education programs preparing students for licensure shall be provided verbal and written information regarding conditions that may disqualify graduates from licensure and of their rights to petition the Board for a Declaratory Order of Eligibility. Required eligibility information includes:

- (1) Texas Occupations Code §§301.252, 301.257, and 301.452 - 301.469; and
- (2) Sections 213.27 - 213.30 of this title (relating to Good Professional Character, Licensure of Individuals with Criminal History, Fitness to Practice, and Declaratory Order of Eligibility for Licensure).

(d) The program shall have a Nursing Student Handbook with well-defined, written nursing student policies based upon statutory and Board requirements, including nursing student admission, dismissal, progression, graduation policies, and policies to ensure students fulfill requirements for obtaining criminal history record information as set forth in the Occupations Code §301.257. Processes shall be in place for policy development, implementation, and enforcement.

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

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

(e) Reasons for dismissal from the program shall be clearly stated in written nursing student policies and shall address:

- (1) behavior evidencing actual or potential harm to patients, clients, or the public;
- (2) criminal behavior that could affect licensure, as set forth in §213.28 (relating to Licensure of Individuals with Criminal History) of this title;
- (3) current fitness to practice nursing, as set forth in §213.29 (relating to Fitness to Practice) of this title; and
- (4) good professional character, as set forth in §213.27 (relating to Good Professional Character) of this title.

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

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

(1) The program shall maintain a signed receipt of student policies in all students' records.

(2) The program shall maintain evidence of student receipt of the Board's license eligibility information as specifically outlined in subsection (c) of this section.

(3) It is the responsibility of the program and the nursing faculty to define and enforce nursing student policies.

(h) Acceptance of transfer students and evaluation of allowable credit for advanced placement remains at the discretion of the dean or director of the program and the governing entity.

Upon completing the program's requirements, the transferred student is considered to be a graduate of the program.

(i) Students shall have mechanisms for input into the development of academic policies and procedures, curriculum planning, and evaluation of teaching effectiveness.

(j) Students shall have the opportunity to evaluate faculty, courses, and learning resources and these evaluations shall be documented.

Source Note: The provisions of this §215.8 adopted to be effective January 9, 2005, 29 TexReg 12190; amended to be effective October 19, 2008, 33 TexReg 8509; amended to be effective December 27, 2010, 35 TexReg 11668; amended to be effective October 23, 2012, 37 TexReg 8304; amended to be effective April 19, 2016, 41 TexReg 2753; amended to be effective August 9, 2018, 43 TexReg 5074

Texas Board of Nursing

Texas Occupation Code (TOC)

www.bon.state.tx.us

The following Texas Occupation Code rules are included in this section:

[Rule: §301.252 – License Application](#)

[Rule: §301.257 – Declaratory Order of License Eligibility](#)

[Rule: §301.452 – Grounds for Disciplinary Action](#)

[Rule: §301.453 – Disciplinary Authority of Board; Methods of Discipline](#)

[Rule: §301.4535 – Required Suspension, Revocation, or Refusal of
License for Certain Offenses](#)

[Rule: §301.454 – Notice and Hearing](#)

[Rule: §301.455 – Temporary License Suspension or Restriction](#)

[Rule: §301.456 – Evidence](#)

[Rule: §301.457 – Complaint and Investigation](#)

[Rule: §301.458 – Initiation of Formal Charges; Discovery](#)

[Rule: §301.459 – Formal Hearing](#)

[Rule: §301.460 – Access of Information](#)

[Rule: §301.461 – Assessment of Costs](#)

[Rule: §301.462 – Voluntary Surrender of License](#)

[Rule: §301.463 – Agreed Disposition](#)

[Rule: §301.464 – Informal Proceedings](#)

[Rule: §301.465 – Subpoenas; Request for Information](#)

[Rule: §301.466 – Confidentiality](#)

[Rule: §301.467 – Reinstatement](#)

[Rule: §301.468 – Probation](#)

[Rule: §301.469 – Notice of Final Action](#)

I acknowledge that the Texas Occupation Code above references as it pertains to the Hill College Nursing Program can be found on the following

website

https://www.bon.texas.gov/laws_and_rules_nursing_practice_act_2013.asp

I acknowledge that the above rules have been explained to me. I understand it is my responsibility to seek further clarification regarding the contents of the above rules if needed.

Sec. 301.252. License Application

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

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

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

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

(a-2) An applicant who provides satisfactory evidence that the applicant has not committed a violation of this chapter or a rule adopted under this chapter is considered to have good professional character related to the practice of nursing. A determination by the board that an applicant does not have good professional character related to the practice of nursing must be based on a showing by the board of a clear and rational connection between a violation of this chapter or a rule adopted under this chapter and the applicant's ability to effectively practice nursing.

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

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

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

[Amended by Acts 2007 (H.B. 2426), 80th Leg., eff. Sept. 1, 2007. The requirement to pass a jurisprudence examination, as amended by this Act, applies only to an individual who applies for a license as a nurse on or after September 1, 2008. Amended by Acts 2017 (H.B. 2950), 85th Leg., eff. Sept. 1, 2017.]

Sec. 301.257. Declaratory Order of License Eligibility

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

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

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

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

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

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

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

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

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

(i) If, as a result of information provided under Subsection (g), the Board determines that a person may not be eligible for a license on graduation, the Board shall notify the educational program of its determination.

(j) The board may file a petition under this section based on the results of a criminal history record information check conducted under Section 301.2511. The board by rule shall adopt requirements for the petition and determination under this subsection. The rules must:

(1) identify the criminal offenses that constitute grounds for the board to file the petition; and

(2) describe the documents required by the board to make a determination of license eligibility.

(k) The board shall make a determination of license eligibility under Subsection (j) not later than the 120th day after the date the person submits the required documents to the board under that subsection.

(l) The board may require in a declaratory order under this section that a person begin participation in a peer assistance program at the time of receipt of an initial license under this chapter. The board shall notify the person that, on issuance of the person's initial license, the person may request reevaluation of the person's required participation in the peer assistance program.

(m) The board by rule shall develop a process to determine whether a person should continue to be required to participate in a peer assistance program. In making the determination, the board shall:

(1) review the person's criminal history record information and, if applicable, determine whether participation in the program is warranted based on the time that has elapsed since the conviction or end of community supervision;

(2) reevaluate or require a contractor administering a peer assistance program to reevaluate the treatment plan or the time the person is required to participate in the peer assistance program based on the person's individualized needs; and

(3) authorize, as appropriate, a waiver of peer assistance program completion if the board is satisfied the person has achieved a satisfactory period of treatment or documented sobriety, as defined by board rules, and continued participation is not necessary.

[Amended by Acts 2009 (H.B. 3961), 80th Leg., eff. June 1, 2009. Subsections (j) and (k) added by Acts 2013 (S.B. 1058), 83rd Leg., eff. Sept. 1, 2013. Subsections (l) and (m) added by Acts 2017 (H.B. 2950), 85th Leg., eff. Sept. 1, 2017.]

Sec. 301.452. Grounds for Disciplinary Action

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

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

(1) a violation of this chapter, a rule or regulation not inconsistent with this chapter, or an order issued under this chapter;

(2) fraud or deceit in procuring or attempting to procure a license to practice professional nursing or vocational nursing;

(3) a conviction for, or placement on deferred adjudication community supervision or deferred disposition for, a felony or for a misdemeanor involving moral turpitude;

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

(5) use of a nursing license, diploma, or permit, or the transcript of such a document, that has been fraudulently purchased, issued, counterfeited, or materially altered;

(6) impersonating or acting as a proxy for another person in the licensing examination required under Section 301.253 or 301.255;

(7) directly or indirectly aiding or abetting an unlicensed person in connection with the unauthorized practice of nursing;

(8) revocation, suspension, or denial of, or any other action relating to, the person's license or privilege to practice nursing in another jurisdiction or under federal law;

(9) intemperate use of alcohol or drugs that the board determines endangers or could endanger a patient;

(10) unprofessional conduct in the practice of nursing that is likely to deceive, defraud, or injure a patient or the public;

(11) adjudication of mental incompetency;

(12) lack of fitness to practice because of a mental or physical health condition that could result in injury to a patient or the public; or

(13) performing or delegating to another individual the performance of a pelvic examination on an anesthetized or unconscious patient in violation of Section [167A.002](#), Health and Safety Code; or

(14) failure to care adequately for a patient or to conform to the minimum standards of acceptable nursing practice in a manner that, in the board's opinion, exposes a patient or other person unnecessarily to risk of harm.

(c) The board may refuse to admit a person to a licensing examination for a ground described under Subsection (b).

(d) The board by rule shall establish guidelines to ensure that any arrest information, in particular information on arrests in which criminal action was not proven or charges were not filed or adjudicated, that is received by the board under this section is used consistently, fairly, and only to the extent the underlying conduct relates to the practice of nursing.

(e) The board shall adopt rules to ensure that license denials and disciplinary action under Subsection (b)(10) are based on the application of objective criteria that are clearly and rationally connected to the applicant's or license holder's conduct and that any negative outcome resulting from that conduct is determined to affect the person's ability to effectively practice nursing.

Acts 1999, 76th Leg., ch. 388, Sec. 1, eff. Sept. 1, 1999. Amended by Acts 2001, 77th Leg., ch. 1420, Sec. 14.124(a), eff. Sept. 1, 2001; Acts 2003, 78th Leg., ch. 553, Sec. 1.045, eff. Sept. 1, 2003.

Amended by:

Acts 2005, 79th Leg., Ch. 1058 (H.B. [1366](#)), Sec. 3, eff. September 1, 2005.

Acts 2007, 80th Leg., R.S., Ch. 889 (H.B. [2426](#)), Sec. 26, eff. September 1, 2007.

Acts 2013, 83rd Leg., R.S., Ch. 1189 (S.B. [1058](#)), Sec. 5, eff. September 1, 2013.

Acts 2017, 85th Leg., R.S., Ch. 509 (H.B. [2950](#)), Sec. 13, eff. September 1, 2017.

Acts 2021, 87th Leg., R.S., Ch. 251 (H.B. [1434](#)), Sec. 3, eff. September 1, 2021.

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

(a) If the Board determines that a person has committed an act listed in Section 301.452(b), the Board shall enter an order imposing one or more of the following:

- (1) denial of the person's application for a license, license renewal, or temporary permit;
- (2) issuance of a written warning;
- (3) administration of a public reprimand;
- (4) limitation or restriction of the person's license, including:
 - (A) limiting to or excluding from the person's practice one or more specified activities of nursing; or
 - (B) stipulating periodic board review;
- (5) suspension of the person's license;
- (6) revocation of the person's license; or
- (7) assessment of a fine.

(b) In addition to or instead of an action under Subsection (a), the Board, by order, may require the person to:

- (1) submit to care, counseling, or treatment by a health provider designated by the Board as a condition for the issuance or renewal of a license;
- (2) participate in a program of education or counseling prescribed by the Board, including a program of remedial education;
- (3) practice for a specified period under the direction of a registered nurse or vocational nurse designated by the Board;
- (4) perform public service the Board considers appropriate; or

(5) abstain from the consumption of alcohol or the use of drugs and submit to random periodic screening for alcohol or drug use.

(c) The Board may probate any penalty imposed on a nurse and may accept the voluntary surrender of a license. The Board may not reinstate a surrendered license unless it determines that the person is competent to resume practice. (d) If the Board suspends, revokes, or accepts surrender of a license, the Board may impose conditions for reinstatement that the person must satisfy before the Board may issue an unrestricted license.

[Amended by Acts 2009 (H.B. 3961), 81st Leg., eff. June 19, 2009. Amended by Acts 2013 (S.B. 1058), 83rd Leg., eff. Sept. 1, 2013.]

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

(a) The board shall suspend a nurse's license or refuse to issue a license to an applicant on proof that the nurse or applicant has been initially convicted of:

(1) murder under Section 19.02, Penal Code, capital murder under Section 19.03, Penal Code, or manslaughter under Section 19.04, Penal Code;

(2) kidnapping or unlawful restraint under Chapter 20, Penal Code, and the offense was punished as a felony or state jail felony;

(3) sexual assault under Section 22.011, Penal Code;

(4) aggravated sexual assault under Section 22.021, Penal Code;

(5) continuous sexual abuse of young child or children under Section 21.02, Penal Code, or indecency with a child under Section 21.11, Penal Code;

(6) aggravated assault under Section 22.02, Penal Code;

(7) intentionally, knowingly, or recklessly injuring a child, elderly individual, or disabled individual under Section 22.04, Penal Code;

(8) intentionally, knowingly, or recklessly abandoning or endangering a child under Section 22.041, Penal Code;

(9) aiding suicide under Section 22.08, Penal Code, and the offense was punished as a state jail felony;

(10) an offense involving a violation of certain court orders or conditions of bond under Section 25.07, 25.071, or 25.072, Penal Code, punished as a felony;

(11) an agreement to abduct a child from custody under Section 25.031, Penal Code;

(12) the sale or purchase of a child under Section 25.08, Penal Code;

(13) robbery under Section 29.02, Penal Code;

(14) aggravated robbery under Section 29.03, Penal Code;

(15) an offense for which a defendant is required to register as a sex offender under Chapter 62, Code of Criminal Procedure; or

(16) an offense under the law of another state, federal law, or the Uniform Code of Military Justice that contains elements that are substantially similar to the elements of an offense listed in this subsection.

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

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

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

[NOTE: Section 301.4535, Occupations Code, applies only to a person who is initially convicted of an offense or placed on deferred adjudication after a plea of guilty or nolo contendere for an offense on or after September 1, 2005. A person initially convicted of an offense or 37 placed on deferred adjudication before that date is governed by the law in effect on the date the conviction or plea occurred, and the former law is continued in effect for that purpose. Amended by Acts 2009 (H.B. 3961), 81st Leg., eff. June 19, 2009. Subsection (a) amended by Acts 2013 (S.B. 743), 83rd Leg., eff. Sept. 1, 2013. Acts 2021, 87th Leg., R.S., Ch. 221 (H.B. [375](#)), Sec. 2.25, eff. September 1, 2021.]

Sec. 301.454. Notice and Hearing

(a) Except in the case of a temporary suspension authorized under Section 301.455 or 301.4551 or an action taken in accordance with an agreement between the board and a license holder, the board may not take any disciplinary action relating to a license unless:

(1) the board has served notice to the license holder of the facts or conduct alleged to warrant the intended action; and

(2) the license holder has been given an opportunity, in writing or through an informal meeting, to show compliance with all requirements of law for the retention of the license.

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

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

(1) refuse to admit the person to examination;

(2) refuse to issue a license or temporary permit;

(3) refuse to renew a license; or

(4) suspend or revoke the person's license or permit.

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

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

(1) fails to submit a renewal application; or

(2) submits an application that:

(A) is incomplete;

(B) shows on its face that the person does not meet the renewal requirements; or

(C) is not accompanied by the correct fee.

[Subsection (a) amended by Acts 2013 (S.B. 1058), 83rd Leg., eff. Sept. 1, 2013.]

Sec. 301.455. Temporary License Suspension or Restriction

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

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

(1) institution of proceedings for a hearing before the State Office of Administrative Hearings is initiated simultaneously with the temporary suspension or determination to restrict; and

(2) a hearing is held as soon as possible under this chapter and Chapter 2001, Government Code.

(c) The State Office of Administrative Hearings shall hold a preliminary hearing not later than the 17th day after the date of the temporary suspension or restriction to determine whether probable cause exists that a continuing and imminent threat to the public welfare exists. The probable cause hearing shall be conducted as a de novo hearing.

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

[Subsection (c) amended by Acts 2011 (S.B. 193), 82nd Leg., eff. Sept. 1, 2011.]

Sec. 301.456. Evidence

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

Acts 1999, 76th Leg., ch. 388, Sec. 1, eff. Sept. 1, 1999. Amended by Acts 2001, 77th Leg., ch. 1420, Sec. 14.124(b), eff. Sept. 1, 2001.

Sec. 301.457. Complaint and Investigation

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

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

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

(1) may conduct a preliminary investigation into the identity of the nurse named or described in the complaint;

(2) shall make a timely and appropriate preliminary investigation of the complaint; and

(3) may issue a warning or reprimand to the nurse.

(d) After any preliminary investigation to determine the identity of the subject of the complaint, unless it would jeopardize an investigation, the Board shall notify the nurse that a complaint has been filed and the nature of the complaint. If the investigation reveals probable cause to take further disciplinary action, the Board shall either attempt an informal disposition of the complaint or file a formal charge against the nurse stating the provision of this chapter or board rule that is alleged to have been violated and a brief description of each act or omission that constitutes the violation. (

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

(1) whether the nurse's continued practice of nursing poses a risk of harm to clients or other persons; and

(2) whether probable cause exists that a nurse committed an act listed in Section 301.452(b) or that violates other law.

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

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

Acts 1999, 76th Leg., ch. 388, Sec. 1, eff. Sept. 1, 1999. Amended by Acts 2003, 78th Leg., ch. 553, Sec. 1.048, eff. Sept. 1, 2003; Acts 2003, 78th Leg., ch. 876, Sec. 9, eff. June 20, 2003. Amended by: Acts 2007, 80th Leg., R.S., Ch. 803 (S.B. [993](#)), Sec. 15, eff. September 1, 2007.

Sec. 301.458. Initiation of Formal Charges; Discovery

(a) Unless there is an agreed disposition of the complaint under Section 301.463, if probable cause is found under Section 301.457(e)(2), the Board or the Board's authorized representative shall file formal charges against the nurse.

(b) A formal charge must:

(1) be written;

(2) be specific enough to enable a person of common understanding to know what is meant by the formal charge; and

(3) contain a degree of certainty that gives the person who is the subject of the formal charge notice of each particular act alleged to violate a specific statute, board rule, or board order.

(c) A copy of the formal charge shall be served on the nurse or the nurse's counsel of record.

(d) The Board shall adopt reasonable rules to promote discovery by each party to a contested case.

[Subsection (a) amended by Acts 2013 (S.B. 1058), 83rd Leg., eff. Sept. 1, 2013.]

Sec. 301.459. Formal Hearing

(a) The board by rule shall adopt procedures under Chapter 2001, Government Code, governing formal disposition of a contested case. An administrative law judge employed by the State Office of Administrative Hearings shall conduct a formal hearing. After receiving the administrative law judge's findings of fact and conclusions of law for a contested case, the board shall dispose of the case by issuing a final order based on the administrative law judge's findings of fact and conclusions of law.

(a-1) Notwithstanding Section 2001.058(e), Government Code, the board in a contested case may not change a finding of fact or conclusion of law or vacate or modify an order of the administrative law judge. The board may obtain judicial review of any finding of fact or conclusion of law issued by the administrative law judge as provided by Section 2001.058(f)(5), Government Code. For each case, the administrative law judge may make a recommendation

regarding an appropriate action or sanction. The board has the sole authority and discretion to determine the appropriate action or sanction.

(b) In any hearing under this section, a nurse is entitled to appear in person or by counsel.
[Amended by Acts 2017 (H.B. 2950), 85th Leg., eff. Sept. 1, 2017.]

Sec. 301.460. Access to Information

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

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

(b) The Board is not required to provide:

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

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

Acts 1999, 76th Leg., ch. 388, Sec. 1, eff. Sept. 1, 1999.

Sec. 301.461. Assessment of Costs Prohibited

The Board may not assess a person who is found to have violated this chapter the administrative costs of conducting a hearing to determine the violation.

[Amended by Acts 2017 (H.B. 2950), 85th Leg., eff. Sept. 1, 2017.]

Sec. 301.462. Voluntary Surrender of License

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

Acts 1999, 76th Leg., ch. 388, Sec. 1, eff. Sept. 1, 1999. Amended by Acts 2003, 78th Leg., ch. 553, Sec. 1.051, eff. Sept. 1, 2003.

Sec. 301.463. Agreed Disposition

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

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

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

(c) An agreed order is a public record.

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

Acts 1999, 76th Leg., ch. 388, Sec. 1, eff. Sept. 1, 1999. Amended by Acts 2003, 78th Leg., ch. 553, Sec. 1.052, eff. Sept. 1, 2003.

Sec. 301.464. Informal Proceedings

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

(1) informal disposition of a contested case under Section 2001.056, Government Code; and

(2) an informal proceeding held in compliance with Section 2001.054, Government Code.

(b) Rules adopted under this section must:

(1) provide the complainant and the license holder an opportunity to be heard; and

(2) require the presence of a representative of the Board's legal staff or of the Attorney

General to advise the Board or the Board's employees.

Acts 1999, 76th Leg., ch. 388, Sec. 1, eff. Sept. 1, 1999.

Sec. 301.465. Subpoenas; Request for Information

(a) Notwithstanding Section 2001.089, Government Code, the Board may request issuance of a subpoena to be served in any manner authorized by law, including personal service by a board investigator or by certified mail.

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

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

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

[Subsection (a) amended by Acts 2013 (S.B. 1058), 83rd Leg., eff. Sept. 1, 2013.]

Sec. 301.466. Confidentiality

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

(1) confidential and not subject to disclosure under Chapter 552, Government Code; and

(2) not subject to disclosure, discovery, subpoena, or other means of legal compulsion for release to anyone other than the Board or a board employee or agent involved in license holder discipline. 41

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

(1) a person involved with the Board in a disciplinary action against the nurse;

(2) a nursing licensing or disciplinary board in another jurisdiction;

(3) a peer assistance program approved by the Board under Chapter 467, Health and Safety Code;

(4) a law enforcement agency; or

(5) a person engaged in bona fide research, if all information identifying a specific individual has been deleted.

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

(d) Notwithstanding Subsection (c), if the board orders a nurse to participate in a peer assistance program approved by the board under Section 467.003, Health and Safety Code, the complaint, filing of formal charges, nature of those charges, final board order, and disciplinary proceedings are subject to disclosure:

(1) only to the same extent as information regarding a complaint is subject to disclosure under Subsection (b); or

(2) in a subsequent matter relating to the board order or a subsequent violation of this chapter or a board rule.

[Subsection (a) amended and Subsection (d) added by Acts 2013 (S.B. 1058), 83rd Leg., eff. Sept. 1, 2013.]

Sec. 301.467. Reinstatement

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

(b) An application to reinstate a revoked license:

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

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

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

Acts 1999, 76th Leg., ch. 388, Sec. 1, eff. Sept. 1, 1999. Amended by Acts 2003, 78th Leg., ch. 553, Sec. 1.054, eff. Sept. 1, 2003.

Sec. 301.468. Probation

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

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

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

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

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

(c) At any time while the person remains subject to the probation order, the Board may hold a hearing and rescind the probation and enforce the Board's original action in denying or suspending the license. The hearing shall be called by the presiding officer of the Board, who

shall issue a notice to be served on the person or the person's counsel not later than the 20th day before the date scheduled for the hearing that:

- (1) sets the time and place for the hearing; and
- (2) contains the charges or complaints against the probationer.

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

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

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

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

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

- (1) a positive drug or alcohol test result;
- (2) refusal to submit to a drug or alcohol test as required by the board; or (3) a letter of noncompliance from the peer assistance program.

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

Sec. 301.469. Notice of Final Action.

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

Acts 1999, 76th Leg., ch. 388, Sec. 1, eff. Sept. 1, 1999. Amended by Acts 2003, 78th Leg., ch. 553, Sec. 1.056, eff. Sept. 1, 2003.

Section 3.11 Reinstated/Transfer Students

1. Reinstated/Transfer students will be considered on an individual basis in accordance with standards and school policies.
2. Reinstated/Transfer students must meet the following prior to acceptance:
 - a. Negative Drug Test
 - b. Health Screening
 - c. Satisfy all eligibility issues
 - d. All immunizations complete and up to date
 - e. Current CPR for health care professionals
3. Final decision on admission rests with the nursing faculty.
4. All curriculum requirements must be met before transfer students will be graduated.

In order to be reinstated, the applicant must:

1. Complete all withdrawal procedures;
2. Make a written request for reinstatement, including an official transcript of course work;
3. Contact the director of the nursing program for the reinstatement process;
4. Demonstrate competency as evidenced by a score of 80 or above on each of the following skills with one attempt only:
 - a. Hand washing
 - b. Vital signs
 - c. Catheterization
 - d. Medication administration
5. Demonstrate competency with dosage calculation as evidenced by a score of 90 or above on dosage calculation test.

This performance score will be accomplished with one attempt only.

NOTE: If the time elapsed between the initial withdrawal and readmission is more than two years, the student will be expected to repeat program requirements. A grade of “C” or better is required in all required courses. A student who has earned a grade of less than “C” in required courses will not be able to progress in the Vocational Nursing Program.

Requests for reinstatement will be considered and the final decision will be made by a committee consisting of the Director of the Nursing Program, Dean of Instruction for Health and Public Services, Vocational Nursing Program Director, and one Vocational Nursing faculty member.

(See also [Dismissal](#))

Section 3.12 Program Completion

1. To successfully complete the program the student must:
 - a. Successfully complete the course in vocational nursing education approved by the Texas Board of Nursing;
 - b. Hold a high school diploma issued by an accredited secondary school or its equivalent (equivalency as established by the General Education Development equivalency test);
 - c. Maintain nursing performance and conduct that are satisfactory to the officials of this institution;
 - d. Attain at least a grade of "C" in all curriculum requirements;
 - e. Meet TSI requirements;
 - f. Be absolved of all financial and library obligations;
 - g. Complete required community service project by graduation.
 - h. Attend required NCLEX-PN Review Course. Failure to attend the NCLEX-PN review course in entirety the student will receive an incomplete for Clinical III
 - i. Complete Jurisprudence Exam
 - j. Complete application process to Texas Board of Nursing for NCLEX-PN and National Council of State Boards of Nursing and provide receipts that process is completed.

 2. Student will complete the Comprehensive PN Predictor in VNSG 1462.

 3. Students will be required to pass the Comprehensive PN predictor with a minimum score of 70 or meet the requirements below to complete the class and/or program.

 4. The Comprehensive PN Predictor first attempt will count as 10% of the VNSG 1462 course grade.
 - If student does not pass the Comprehensive PN Predictor:
 - a. Student will be counseled on unacceptable scores and requirements needed to complete the class/program.
-

- b. Student will be required to do remediation as outlined in the matrix.
- c. Student will then retake the Comprehensive PN Predictor. The cost of the second exam will be the student's responsibility.
- d. If the student fails the second Comprehensive PN Predictor with a score of less than 70, he/she will be required to complete 2000 NCLEX questions.
- e. The student will be given an incomplete grade until requirements met.

Note: The above criteria must be met before Director Affidavits will be submitted to the Texas Board of Nursing.

Section 3.13 Late Registration

Texas Board of Nursing rules preclude registration after the third (3rd) class day. No student will be registered in the Vocational Nursing Program after this time. (See below)

TEXAS BOARD OF NURSING

RULES AND REGULATIONS

relating to

NURSE EDUCATION, LICENSURE AND PRACTICE

Published: October 2012

333 Guadalupe, Suite 3-460, Austin, Texas 78701-3942

§214.8. Students.

(a) The number of students admitted to the program shall be determined by the number of qualified faculty, adequate educational facilities and resources, and the availability of appropriate clinical learning experiences for students. Programs shall not accept admissions after the third day of class. [TAC Title 22 Part 11 Chapter 214 Rule 214.8](#) **The provisions of this §214.8 adopted to be effective February 13, 2005, 30 TexReg 545; amended to be effective October 19, 2008, 33 TexReg 8501; amended to be effective December 27, 2010, 35 TexReg 11662; amended to be effective October 21, 2012, 37 TexReg 8294; amended to be effective April 19, 2016, 41 TexReg 2752; amended to be effective August 9, 2018, 43 TexReg 5072**

Section 3.14 Eligibility to Register for Vocational Nursing

Only students accepted into the vocational nursing program may register for vocational nursing courses.

All vocational nursing students must be concurrently enrolled in didactic and clinical courses required.

Section 3.15 Classroom Attendance

1. Regular and punctual attendance is expected and required.
2. When a student nears maximum allowable absence the student will be referred to the Absence Review Committee. (See Counseling Forms for allowable absences.)
3. If a student misses more than 15% of class meetings the student will be referred to the Absence Review Committee with recommendation for dismissal from the program.
4. If a student misses any major exam(s), he/she may take a makeup exam(s) on the scheduled day the student must contact the instructor and reschedule the for the makeup exam within two weeks. The exam(s) will be an alternative exam covering the content missed. The maximum grade the student may obtain on a makeup exam is a grade of "80".
5. Absences always result in work being missed and that, in spite of the best efforts of both the instructor and the student, this usually means that grades will suffer. Some work missed in online or hybrid courses will result in absence as designated.
6. If a student is more than 10 minutes late after the test is administered the student will not be allowed to take the test at that time, but the student will be allowed to take a makeup exam within one week that must be scheduled with the instructor.
7. A student who is absent from classes for the observance of a religious holy day will be allowed to make up all work provided that proper advance notification is given to the instructor.

8. A student who is called to active military service will be allowed to make up all work provided the student follows the proper advance notification procedure. An instructor may appropriately respond if the student fails to satisfactorily complete the assignment or examination within a reasonable time after the absence.
9. Hill College shall treat pregnancy, childbirth, false pregnancy, termination of pregnancy and recovery therefrom as a justification for a leave of absence for so long a period of time as is deemed medically necessary by the student's physician, at the conclusion of which the student shall be reinstated to the status which she held when the leave began.
10. **Persons not enrolled in the nursing program are not allowed in the classroom, clinical labs, or clinical sites. No outside visitors allowed.**

CLASSROOM ATTENDANCE COUNSELING FORM

I counseled _____ concerning his/her _____ hour(s) _____ minute(s) classroom absence on _____. The student understands that he/she has missed _____ hour(s) _____ minute(s) total for the semester in the class checked below and can only miss **15%** of class meetings, and should he/she miss more than **15%** of the class meetings, the student will be referred to the Absence Review Committee with recommendation for dismissal from the program. (SEE BELOW FOR SPECIFIC NUMBER OF HOURS).

- | | | |
|--------------------------|---|------------|
| <input type="checkbox"/> | VNSG 1500 Nursing in Health and Illness I | 19.2 hours |
| <input type="checkbox"/> | VNSG 1509 Nursing in Health and Illness II | 12 hours |
| <input type="checkbox"/> | VNSG 1510 Nursing in Health and Illness III | 12 hours |
| <input type="checkbox"/> | VNSG 1330 Maternal Neonatal Nursing | 7.2 hours |
| <input type="checkbox"/> | VNSG 1331 Pharmacology | 7.2 hours |
| <input type="checkbox"/> | VNSG 1334 Pediatrics | 7.2 hours |
| <input type="checkbox"/> | VNSG 1216 Nutrition | 4.8 hours |

_____ verbalize understanding of this counseling.

Student Signature

Date

Instructor Signature

Date

Director/Coordinator Signature

Date

Section 3.16 Clinical Absence

1. The student is allowed to miss up to 2 clinical days with 5 points off for each 8 hours missed in Semester I and up to 2 clinical days with 5 points off for each 12 hours missed in Semesters II and III. If the student misses more than 16 hours in Semester I or 24 hours in Semester II and III the student will need to go before an absence review committee (which will be made up of 1 faculty member from each VN program, EMS director, 1 academic faculty member, the VN Program Director, ADN coordinator, Criminal Justice Coordinator, Fire Science Coordinator, Echocardiology Coordinator, and the Director of Nursing). If the review committee excuses the absence, the student will be allowed to makeup the time. If the committee does not excuse the absence, the absence will result in another 10 points off of the clinical grade for each absence over the initial 16 hours in Semester I and 24 hours in Semesters II and III and could result in a failure in clinical. No student will be allowed to miss more than 32 hours in clinical for Semester I and 36 hours for Semesters II and III for any reason. If the student exceeds the allowable absence they will be referred to the absence review committee with recommendation of dismissal. The student may be allowed to complete discussion board assignment for post conference online on a day an absence occurs at the discretion of the director of the program. This will be determined on a case by case basis. A special assignment may be given as determined by the director with documentation of illness provided by the student from a qualified health care professional.
2. Clinical tardies: three (3) clinical tardies will constitute one absence. If the student is 5 minutes tardy to clinical, this will constitute one tardy. Correct time is based on the instructor's watch. If additional clinical tardies occur after the initial three tardies resulting in an 8 hour absence in Semester I and 12 hours absence in Semester II and III with 5 points off the overall clinical grade, the student will be placed on clinical probation. Should the student continue to

accrue tardies after being placed on clinical probation, three additional tardies will result in additional absence of 8 hours in semester I and 12 hours in Semesters II and III with an additional 5 points off the overall clinical grade for a total of 10 points off the overall clinical grade. Referral will also be made to the Incident and Absence Review Committees.

3. If the student is greater than thirty minutes late for clinical, he/she will be given a “0” on all clinical objectives for that day (refer to the clinical objectives that corresponds to the clinical level you are currently attending) and will receive a “0” on all documentation for that day. Activity/assignment for the day will be at the director’s discretion.
4. If required clinical paperwork is not prepared and turned in to the instructor at as directed, the student will receive a grade of “0” for the day’s documentation and it will be addressed on the corresponding clinical objectives for that day.
5. If clinical work is not turned in as directed including CET (Clinical Evaluation Tool), Sim Chart, Objectives, Pathocare map, Drug Cards and any other written work a grade of zero will be given.
6. Covid 19 precautions will vary based on clinical facilities requirements. Students must follow clinical requirements of the facility or unexcused absence will result. Exemptions are based upon the facility allowances. If the facility requires Covid 19 vaccine then the student will have unexcused absence if not able to attend clinical.

Definitions:

Late – 1 to 4 minutes later than assigned time of arrival.

Tardy – 5 to 30 minutes

Absence – any time greater than 30 minutes past assigned time of arrival.

Section 3.17 Absence Call-In

Students who are going to be absent on clinical days *must* notify the director of the program and the nursing office 254-659-7920 by 6 AM of the assigned shift.

Students are not allowed to change clinical site scheduled hours or leave before assigned time for any scheduled activity. Any student needing to leave clinical early must contact the Director.

Simulation Lab is considered to be a clinical day and all rules and policies of clinical apply to the setting. Students will be graded with the Clinical Evaluation Tool (CET) with the objectives used with direct patient care since the student is caring for a patient or patients on those days.

A minimum of three clinical evaluations will be completed by the Nursing Faculty
A minimum of three self-evaluations will be completed by the student.

The student must receive at least an average of 75% or higher for EACH clinical objective and overall grade of 75 to attain a passing clinical grade. The following criteria will be used to determine the course grade. This criterion is based on Differentiated Essential Competencies and clinical performance required for meeting clinical objectives.

Each of the clinical criteria will be evaluated utilizing percentage. Data provided by the student and observations of the instructor are used as a basis of assigning each rating. Each of the clinical criteria will be averaged at the end of the clinical rotation. These averages will be totaled and divided by the number of criteria to obtain a percent grade for each objective.

The average of the clinical objective grade will constitute 75% of the final course grade for VNSG 1360 and VNSG 1461 and 70% for VNSG 1462. Required written work will constitute the remaining 25% of the final course grade for VNSG 1360 and VNSG 1461 and 20% for VNSG 1462.

The Comprehensive PN Predictor first attempt will count as 10% of the final course grade for VNSG 1462.

Each clinical day of absence will result in a deduction from (refer to clinical attendance rule) 5% from the final course grade.

Grade Summary: 90-100% - superior completion of clinical objectives
80-89% - above average completion of clinical objectives
75-79% - average completion of clinical objectives
<75% - failure to meet minimal clinical requirements

Section 3.18 NCLEX Review Course

The student is required to attend the NCLEX-PN review course to be scheduled in the 3rd semester. If the student does not attend the scheduled NCLEX-PN review course entirely he/she will receive an incomplete in VNSG 1462 Clinical III Practical Nurse until the requirements are completed..

Section 3.19 **Unsafe Student/Students with Unethical Issues**

Maintaining client safety is the overriding principle in clinical practice. Nursing faculty has the responsibility to ensure that students are providing safe care. Nursing students must function at the expected clinical level as stated in the course objectives and clinical evaluation forms. Unsafe behavior is the failure to perform in the manner that any prudent student nurse, at the same level of preparation, would perform in a particular clinical situation. Nursing faculty have the responsibility to identify student conduct and performance in the academic and/or clinical area that are unsafe, unethical, and/or unprofessional, take immediate corrective action, and provide remediation contracts, and remove from clinical setting if appropriate. Any faculty that perceives a student is unsafe will take immediate corrective action, document the incident fully, and refer the student to the program director and the Incident Review Committee (which will consist of: 1 faculty member from each VN program, EMS director, 1 academic faculty, the VN Program Director, ADN Coordinator, Criminal Justice Coordinator, Fire Science Coordinator, Echocardiology Coordinator, and the Director of Nursing) for evaluation. The committee will then review all documentation, including student's comments, to make a determination on possible remediation contract or recommended for dismissal from the nursing program.

- Unsafe behavior includes, but is not limited to:
- Being under the influence of drugs or alcohol.
- Failure to use Standard precautions at all times.
- Failure to apply basic safety rules, such as leaving side rails down on beds and cribs.
- Failing to report an abnormal finding.
- Being unable to make sound judgments due to adversely affected thought processes and decision-making.
- Attending clinical with a possibly communicable infectious process.
- Failure to follow the five rights while administering medications.
- And any other action or failure to act that would jeopardize client safety.

(See also [Duty to Report](#))

Section 3.20 Classroom Grading

The following equivalencies between numerical averages and letter grades are used in the Nursing Program:

90 – 100	A
80 – 89	B
75 – 79	C
Below 75	F

Section 3.21 Notification of Test Failure

1. Student must pass each test with a grade of 75 or above and have an average of 75 or above on combined scores.
2. If student does not have a 75 grade and/or a 75-grade average, then he/she will be required to complete the study guide, templates, or objectives, depending on the instructor for that class, from the chapters covered by that test and turn them in to instructor prior to the next exam.
3. The student will also be required to complete the study guide and objectives, depending on the instructor for that class, from the chapters currently being lectured on and turn them in to instructor prior to the next exam.
4. Failure to complete the above requirements will result in the student receiving an incomplete for that class until required assignment turned in to the instructor.
5. Student must score a 75% or greater on the final exam to pass all Vocational Nursing courses.

Section 3.22 Clinical Grading

The nursing student must meet all required competencies for each semester to receive a passing grade before progressing to the next level. Failure to pass each clinical objective with a grade of 75 and an overall clinical grade of 75 in clinical will result in inability to progress in the Vocational Nursing Program.

Section 3.23 Scholastic Dishonesty

Scholastic dishonesty shall include, but not be limited to, cheating, plagiarism, having access to testing materials and collusion. Students found to have participated in scholastic dishonesty are subject to disciplinary action according to the Hill College Student Handbook. If a student is found to have cheated on any course assignment or exam, he/she will receive a failing grade for the work and may receive a failing grade for the course. Refer to academic misconduct. This includes possession of any part of an exam or possession any part of a test bank(s).

(See also [Academic Misconduct](#))

(See also [Unsafe Student](#))

(See also [Duty to Report](#))

Section 3.24 Academic Misconduct

Academic Integrity

In order to preserve the honor and integrity of the academic community, Hill College expects its students to maintain high standards of scholarly conduct.

Academic Honesty

All faculties shall have the right to examine materials in the student's possession during any academic exercise. In instances of academic misconduct, the faculty may immediately suspend the student from further work on the academic exercise.

ACADEMIC MISCONDUCT

Academic misconduct includes but is not limited to the following acts:

1. Collaborating with or seeking aid from another student during a test without permission from the test administrator.
2. Using test materials not authorized by the person administering the test.
3. Manipulating a test, assignment or final course grade.
4. Knowingly using, buying, selling, stealing, or soliciting, in whole or in part, the contents of an unadministered test, paper, or another assignment.
5. Forgery.
6. Plagiarism: defined as appropriation, buying, receiving as a gift, or obtaining by any means another's work and the unacknowledged submission or incorporation of it in one's own written work.
7. Collusion: defined as the unauthorized collaboration with another person in preparing written (& electronic) work for fulfillment of course requirements.
8. The unauthorized transporting or removal, in whole or in part, of the contents of the unadministered test.
9. Substituting for another student, or permitting another student to substitute for one's self, to take a test.
10. Bribing another person to obtain an unadministered test or information about an unadministered test.
11. Unauthorized use of any HC computer program.
12. Fabrication of information for use in any academic exercise.
13. The resubmission of previously graded course work by the student to meet a course requirement.
14. Suspected substance abuse and/or mental incapacity

Sanction 3.25 Sanctions

The following actions may be imposed on a student who has committed an act of academic misconduct:

I. Possible actions by the faculty member

- A. Notify the Program Director in writing that an incident has occurred and has been dealt with.
- B. Grant no credit for the work (exam or assignment) in question.
- C. Assign a grade of "F" or zero for the work in question.
- D. Recommend the student to be referred to the Incident Review Committee.
- E. If the alleged incident occurs during a final examination, a grade of "I" (incomplete) shall be given the student until a decision by the faculty is determined.

II. Possible actions by the Program Director

- A. The Program Director will investigate any misconduct or reported dishonesty related to testing and preparation of written assignments and documents the results of the investigation.
- B. Based on the results of the investigation, the Program Director shall refer the student through academic administration channels. The Program Director shall recommend to academic administration that one or more of the following specific actions be considered:
 - 1. Issue a warning and place a written report of the incident in the student's permanent record maintained in the Program Director's Office.
 - 2. Place the student on probation at the College for a specified period of time.
 - 3. Recommend the student be referred to the Incident Review Committee.

Section 3.26 Withdrawal

Students withdrawing from the Vocational Nursing Program must complete all withdrawal procedures as outlined in the current Hill College Catalog and Student Handbook. It is the student's responsibility to complete the withdrawal process.

Section 3.27 Reinstatement

In order to be reinstated, the applicant must:

1. Complete all withdrawal procedures;
2. Make a written request for reinstatement, including an official transcript of course work with course descriptions if transferring from another program;
3. Contact the director of the nursing program for the reinstatement process;
4. Demonstrate competency as evidenced by a score of 80 or above on each of the following skills with one attempt only:
 - a. Hand washing
 - b. Vital signs
 - c. Assessment
 - d. Catheterization
 - e. Medication administration
5. Demonstrate competency with dosage calculation as evidenced by a score of 90 or above on dosage calculation test.

This performance score will be accomplished with one attempt only.

****Skills Practice and Testing will not be scheduled the last two weeks of any semester. ****

NOTE: If the time elapsed between the initial withdrawal and readmission is more than two years, the student will be expected to repeat program requirements. A grade of "C" or better is required in all required courses. A student who has earned a grade of less than "C" in required courses will not be able to progress in the Vocational Nursing Program.

Requests for reinstatement will be considered and the final decision will be made by a committee consisting of the Director of the Program, Dean of Instruction for Health and Community Services, Vocational Nursing Director, one Vocational Nursing faculty member.

(See also [Dismissal](#))

Section 3.28 Disciplinary Probation

Disciplinary action will be enforced according to the guidelines in the Hill College Student Handbook.

Vocational Nursing Students are involved in instruction which involves the comfort, health and well-being of others. It is essential that all clinical care carried out in accordance with accepted nursing standards. When in the opinion of the Nursing Faculty, a student is not functioning in accordance with accepted nursing standards:

1. The student will be warned verbally of the deficiency.
2. The student will receive written notification of the cause and terms of the probation.
3. The student will be counseled by the instructor in an attempt to improve performance to an acceptable level.
4. The probation period will be for a specified period of time.
5. At the end of the probation period the student will be re-evaluated. If the deficiency has been corrected, the student will be allowed to finish the program. If the student feels that the probationary placement is unwarranted the student may follow the grievance procedure as outlined in the "Hill College Student Handbook".
6. If the student does not correct the deficiency the student will be referred to the Incident Review Committee.

Section 3.29 Dismissal

1. Vocational Nursing Students may be recommended for dismissal from the program for the following reasons:
 - a. Failure to maintain academic standards.
 - b. Demonstration of unprofessional behavior
 - c. Continued deficiency in meeting clinical competencies following clinical probation.
 - d. Over four clinical days missed during any one semester.
 - e. Failure to abide by the Student Conduct as set forth in the Student Handbook
 - f. Failure to abide by the rules set forth in the Vocational Nursing Handbook.
 - g. Failure to abide by the rules set forth in the Vocational Nursing Clinical Handbook.
 - h. Demonstrate competency with dosage calculation as evidenced by a score of 90 or above on dosage calculation test within 3 attempts.
 - i. Failure to complete all required skills check-offs with a 75% or above within the designated time frame within three attempts.
 - j. If a student misses more than 15% of class meetings.
 - k. If a student does not pass the final exam of required nursing courses with a 75%.
 - l. If a student does not have a final grade in the course of 75%.

Section 3.30 Clinical Accident and/or Incident Report

1. An institutional incident report should be made out when the student is injured while in the clinical area.
2. In the event of unusual occurrences involving a student, and/or patient, the following procedure should be followed:
 - a. Notify the clinical instructor and the nurse in charge of the clinical area where the incident occurred.
 - b. Complete incident report form with the assistance of the instructor.
3. An unusual occurrence may include such things as a medication error, patient injury witnessed by a student, and/or student injury.

(See form [Potential or Actual Incident Report](#))

Section 3.31 Insurance

1. All students are required to carry professional liability insurance. The insurance is provided by the college and the cost is included in fees assessed at registration.
2. All students need to be aware that many facilities now require the student to carry major medical health insurance. The student will be required to cover the cost incurred for carrying major medical health insurance not Hill College.
3. All students need to be aware that facilities may require a drug screening and/or criminal background check and the student will be required to cover the cost of all tests if the facility requests the above.
4. If the student does not have required major medical health insurance they will not be allowed to attend clinical.

Section 3.32 Health Services

1. Hill College provides no on-campus facilities for treatment of illness or injury. In the event an emergency situation should arise which requires immediate medical attention, the local hospital provides emergency room service.
2. The student is encouraged to have a private physician or other qualified health care provider and to make arrangements for health care insurance. Students residing in the campus dormitories are required to carry health insurance.
3. If non-emergency questions arise regarding the student's personal health, they should be discussed with a physician after class or clinical hours.
4. If a student is injured or becomes ill during school hours, the instructor should be notified.
5. In the event of a serious illness or injury that hinders a student's ability to perform in the clinical setting, the student is required to have written documentation from a physician authorizing that the student can safely continue to give patient care to designated competency levels in the clinical situation.
6. The student is responsible for all medical costs arising from illness or injury during his/her instruction. It is particularly important that students understand that they are NOT employees of either Hill College or the clinical facility and are NOT covered under Workman's Compensation Insurance.

Section 3.33 Community Service Project

The student is required to participate in a community project in which he/she has chosen.

Participation in the project must be approved by the Vocational Nursing Program Director before participating in the project.

The student must wear appropriate attire, which is suited for the project (Usually what the other nurses are wearing).

This project must be completed by the graduation date. If the project is not completed by the graduation date, the student may fail the last clinical course or receive an “I” for a specific amount of time. After this specific amount of time, the student will then fail the last clinical course.

The student will be assigned a clinical day to complete the community project. The project does not have to be completed on this day but must be completed prior to graduation. The hours are designated to allow for this project.

Examples of projects may include:

1. Various screening programs (blood pressure, blood sugar, etc.)
2. Walk-a-thons (example: American Heart Association)
3. (Note: Student must assist in the planning and organization of projects such as these, not just merely walk.)
4. School district projects.
5. “Shots for Tots” (student may not administer meds).
6. Projects designed for Senior citizens
7. Health fairs.

Keep an eye on your local newspaper for any activities or projects that may be scheduled.

(See form Community Service)
(See form Community Service Verification)

Article 4 Personal Appearance and Performance Requirements

Hill College Health Science Standards for Personal Appearance Your Clinical Working Day

Our patients expect the best. Students have a responsibility to all of the patients to provide the best in health care services. To do this, here are some of your responsibilities during working day:

THE AVERAGE DAY PERSONAL APPEARANCE

Dress, grooming, and personal cleanliness standards contribute to the morale of all students and affect the professional image we present to patients, visitors, and the community. All female students are normally expected to wear hose if wearing a dress uniform. All students are expected to have their hair properly groomed and contained. Male students should be clean-shaven, or should keep their beards neatly trimmed. Clean hands and fingernails are a must. Students who work with patients should not use perfume or cologne. All students shall wear shoes with quiet heels and soles at all times. Students are not to wear pins, patches, or other items unless authorized to do so under Hill College Nursing departmental rules and procedures.

Students who appear for clinical inappropriately dressed, or without a name badge, will be sent home and receive an absence. In the event the student continues to report to clinical inappropriately dressed, the student will be subject to further corrective action, probation and/or could include dismissal from the program if the practice continues. Violations of the uniform dress code will be addressed on IC and ID of the clinical evaluation tool and repeated violations may result in clinical probation.

Consult your clinical instructor if you have questions as to what constitutes appropriate attire.

ATTENDANCE AND PUNCTUALITY

To maintain a productive clinical experience the Nursing Department expects students to be reliable and to be punctual in reporting for scheduled clinical assignment. Absenteeism and tardiness place a burden on everyone.

ALL NURSING STUDENTS ARE EXPECTED TO COMPLY WITH THE FOLLOWING STANDARDS FOR PROFESSIONAL APPEARANCE THIS INCLUDES CLASSROOM, CLINICAL LAB, AND THE CLINICAL SETTINGS.

Please note the following information for purposes of this dress code.

All CLINICAL STUDENTS are UNIFORMED.

Departmental, unit, or clinic guidelines may have additional requirements, but

may not waive any of the following guidelines set forth in these rules. The only appropriate approved jacket is a white lab coat with Hill College Vocational Nursing patch or emblem on left upper arm one inch below the shoulder seam. (No jackets, hoodies, or coats are to be worn during clinical lab or in the clinical setting.) (Students are allowed to wear hair in a ponytail in the classroom and may wear a jacket but no hood is allowed). If the student has to go to the lab or clinical setting they must abide by clinical dress rules including having the hair in a tight bun with no hair hanging free. Students may not enter the clinical lab or clinical site without a name badge. No blankets or pillows will be allowed in the classroom. Students may wear a headband or clips the color of the hair to restrain hair. Banana clips are not permitted.

REQUIREMENTS FOR ALL NURSING STUDENTS

AFTERSHAVE/PERFUME:

Aftershave, cologne, perfume or scented lotion should not be worn in patient care areas. They may be worn in non-patient care areas provided the scent is light and used in moderation. **Heavy scents are prohibited**

BUTTON/PINS:

Wear only insignias that have been approved by the Nursing Department.

CLOTHING:

Clothing worn by nursing students should be neat, clean, free of wrinkles, and in good repair.

DEODORANT:

Due to close contact with others, all students must wear deodorants or an antiperspirant.

GROOMING/HYGIENE:

Daily bathing is required by all students, and hair must be shampooed regularly to promote a neat and clean appearance. Daily oral hygiene is required.

GUM:

Chewing gum is not permitted. Breath mints or breath sprays are allowed.

NAME BADGES:

All students must wear an identification badge worn in the shoulder area in an upright, readable position with photo visible at all times this includes class or clinical lab.

BADGES MUST BE REMOVED WHEN AWAY FROM CLINICAL SITE. If the student is going to be in a healthcare facility following the clinical day they need change out of clinical attire.

SUNGLASSES:

Students do not wear sunglasses indoors.

TATTOOS:

Conspicuous tattoos are not considered to be in the best interest of the Nursing Department and are unacceptable. A tattoo can be considered conspicuous when it is visible. Methods to conceal tattoo, such as, but not limited to, makeup or bandages, **are not acceptable. THE ONLY ACCEPTABLE COVERING IS CLOTHING UNLESS APPROVED BY THE PROGRAM DIRECTOR. If a student has a tattoo on the neck, hands, or ears concealing makeup will need to be used to cover the tattoo since clothing will not cover that area. Tattoos on the back of the neck need to be covered with a turtleneck or dickie so they will not be seen.**

(See form [Appearance Rules Acknowledgment](#))

(See form [Uniform Rules Violations – Written Warning](#))

Section 4.01 The Nursing Department Look For Women

CLOTHING

Student wears the uniform prescribed by the department.

UNDERGARMENTS

Students are required to wear appropriate undergarments, such as underwear, slip, and a bra at all times. If a student has a tattoo on the back then a camisole or tshirt will need to be work that is white to cover when in the white uniform top.

It is unacceptable for the student to wear undergarments that are visible, or visible through the outer garments.

SHOES

Shoes are polished and kept in good repair. Shoelaces are of the same color as the shoes and are tied for safety.

ALL WHITE (excluding logo) leather, or simulated leather, athletic-type or nursing shoes must be worn, unless other specific footwear is required due to the nature of the job.

HOSIERY/SOCKS

Hosiery of white color is worn to coordinate with clothing. Tops of the hosiery should not be NON-UNIFORMED visible and should be **midcalf**. White socks or white compression stockings only are permissible with uniforms. **Hosiery or socks are required to be worn at all times. No peds or ankle socks are to be worn while in uniform.**

RINGS: Wear small ring or wedding band on ring finger limited to one ring.

WATCHES: Wear only one (1) plain watch with second hand. No smartwatches (i.e. Apple Watch).
No digital watches.

JEWELRY

Bracelets: No bracelets may be worn in clinical areas except for medical alert bracelets.

Necklaces: A single chain not exceeding 20 inches, including a small pendant not to exceed the size of a quarter, of gold or silver may be worn inside the neckline of the uniform.

Earrings: Select matched pair(s) of small stud in lower lobe only. Only one set may be worn.

Earrings, nose rings and other body piercing jewelry are not acceptable - this includes tongue, eyebrow, and lips.

HAIR

A neat, natural hairstyle is an essential part of a well-groomed appearance. Students must select styles that will not fall forward over the face while performing job duties. Teasing for body or shape is kept to a minimum. **Hair must be up off the shoulders (this means pulled up). No rabbit ears or braids that come forward. Hair must be worn where it falls down the back in a pony tail if in class or up in a smooth tight bun if in the clinical lab or on the clinical site. Hair must be pulled up in a bun in the clinical lab or in the clinical setting. Microorganisms are on hair. Hair must not fall forward in any way that hair could fall on the patient or patient's linen possibly causing infection.**

Facial hair must be neat and trimmed. The beard must be close cropped and trimmed and cannot extend below the chin.

NOT ACCEPTABLE

Extreme fashion statements such as shaving the head, radical haircuts or tinting hair in unnatural colors - blue, green, pink etc. Hair must be uniform natural colors. Not acceptable example: blonde with black underneath.

ALL STUDENTS

HAIR ACCESSORIES

Hair accessories may be worn for the purpose of preventing hair from falling forward on the face only. **Appropriate hair confinement is worn in areas required by law.**

Barrettes, combs and hair bands may be gold, silver or any color that coordinates with hair coloring.

MAKEUP

Foundation: If foundation bases are worn, students should select shades complementary to natural coloring. Application is light and well blended in order to avoid stains on clothing.

Blushers: Blushers may be used to enhance appearance, natural tones.

Eye Makeup: Eye makeup and mascara may be used to highlight the eyes in complimentary shades. **No artificial or weaved eyelashes are allowed. Only natural length and color.**

Lipstick: Lipstick may be applied in colors to enhance appearance, neutral tones.

FINGERNAILS

Fingernails are kept clean and well groomed and do not exceed one-eighth of an inch beyond the fingertip (this means when looking at the palm no fingernails should extend over the end of the finger). No fingernail polish of any color may be worn.

NOT ACCEPTABLE - Acrylic or Artificial nails may not be worn.

Section 4.02 The Nursing Department Look For Men

CLOTHING

Student wears the uniform prescribed by the department.

UNDERGARMENTS

Students are required to wear appropriate undergarments at all times. It is unacceptable for the student to wear undergarments that are visible, or visible through the outer garments.

SHOES

Shoes are polished and kept in good repair. Shoelaces are of the same color as the shoes and are tied for safety. Must be clean and neat!

ALL WHITE (excluding logo) leather, or simulated leather, athletic-type or nursing shoes must be worn, unless other specific footwear is required due to the nature of the job.

HOSIERY/SOCKS

Socks must be worn at all times and must coordinate with clothing. Tops of the socks should not be visible and should be **midcalf**. White athletic socks are permissible with uniforms.

RINGS

Wear a small ring or wedding band on the ring finger only limited to one ring.

WATCHES

Wear only one (1) plain watch with second hand. No smartwatches (i.e. Apple Watch). No digital watches.

JEWELRY

Bracelets: No bracelets may be worn in clinical areas.

Necklaces: A single chain not exceeding 20 inches, including a small pendant not to exceed the size of a quarter, of gold or silver may be worn inside the neckline of the uniform.

Earrings: Earrings, nose rings and other body piercing jewelry are not acceptable this includes tongue, eyebrow.

HAIR

A neat, natural hairstyle is an essential part of a well-groomed appearance. Students must select styles that will not fall forward over the face while performing job duties. Appropriate hair confinement is worn in areas required by law. **Hair must be up off the shoulders (this means pulled up). No rabbit ears or braids that come forward. Hair must be worn where it falls down the back in a pony tail in the classroom or up in a tight smooth bun in the clinical lab or at the clinical setting. Hair must be pulled up in a bun in the clinical lab or in the clinical setting. Microorganisms are on hair. Hair must not fall forward in any way that hair could fall on the patient or patient's linen possibly causing infection. A headband the same color as the hair may be used to contain loose hair.**

Facial hair must be neat and trimmed. The beard must be close cropped and trimmed and cannot extend below the chin.

NOT ACCEPTABLE

Extreme fashion statements such as shaving the head, radical haircuts or tinting hair in unnatural colors - blue, green, pink etc. Hair must be uniform natural colors. Not acceptable example: blonde with black underneath.

FINGERNAILS

Fingernails are kept clean and well groomed and do not exceed one-eighth of an inch beyond the fingertip.

SMOKING

The use and sale of all tobacco and/or e-cigarette products is prohibited inside all College District facilities. Students who are found with residue from, or items such as, but not limited to, cigarette butts, spittoons, tobacco juice, and tobacco waste in Hill College facilities are subject to disciplinary action. E-cigarette means an electronic cigarette or any other device that simulates smoking by using a mechanical heating element, battery, or electronic circuit to deliver nicotine or other substances to the individual inhaling from the device. Prior to clinical, during clinical time and while in uniform – this includes use of any tobacco products or E-cigarettes.

SMOKING IS NOT PERMITTED!

Section 4.03 Essential Performance Requirements for Nursing Students

Students are expected to demonstrate the ability to perform similar functions as would be expected in a nursing employment situation. All students must be able to tolerate physically taxing activities and perform during stressful situations in order to meet the demands of the profession.

Students must assess their own capabilities prior to entering the nursing program. The following list, although not comprehensive, identifies some of the more basic, minimum of essential skills necessary in the nursing program, as well as in the career.

Hours:

- Perform nursing student functions in a variety of health-care settings, up to 12 hours per shift (day or night), up to two shifts per week
- Attend nursing and other college classes an additional 1-5 days per week, as scheduled in the course catalog

Work Environment & Safety Issues:

- Be aware of potential bio-hazardous risks in health care settings which require wearing safety equipment such as masks, head coverings, glasses, latex or non-latex gloves, shoe coverings and gowns
- Be able to meet clinical agency, College and Department of Nursing performance standards
- Be able to arrange travel to and from academic and clinical sites
- Be aware that exposure to allergens (latex, chemicals, etc.) or other hazardous agents exists
- Follow all state, federal, College, Department of Nursing, clinical agency and HIPAA policies regarding confidentiality of patients' personal, family and health-related information
- Provide for patient safety in various situations and settings which may be physically demanding
- Perform multiple assignments/tasks concurrently
- Tolerate the mental demands of differing shifts, body rhythm changes, increasingly difficult patient workloads, fatigue
- Recognize that any patient could potentially cause you harm
- Administer cardiopulmonary resuscitation. (CPR)
- Must be able to possess the ability to maneuver/move a minimum of 30 lbs, weekly and sometimes daily.

Interpersonal Skills:

- Establish professional relationships
- Establish rapport with individuals, families and groups
- Respect cultural differences
- Negotiate interpersonal conflicts effectively

Communication Skills:

- Teach others appropriately and effectively
- Speak and write English clearly
- Listen/comprehend both spoken and written English
- Work quickly and accurately from both written and verbal orders
- Collaborate with others
- Manage information from multiple sources
- Communicate in English directly, and by electronic methods, including using the telephone
- Clearly and safely delegate to others and follow-up as needed
- Document accurately, clearly and effectively patient condition and response to treatment
- Know how and when to use the chain of command to resolve problems

Cognitive Abilities:

- Correctly perform mathematical calculations
- Analyze information from many sources and determine appropriate nursing interventions
- Understand principles/rationale behind nursing interventions
- Follow physicians' orders
- Successfully pass exams and course work
- Perform basic computer functions, including word processing, e-mail and web access
- Continually increase and update knowledge base

Emotional Stability:

- Provide client with emotional support
- Build positive relationships with patients, families, peers, and other healthcare providers Manage frustration/anger from unsatisfied patients, families or other healthcare providers Focus attention on appropriate tasks
- Successfully cope with personal emotions
- Cope with strong emotions in others
- Continuously be in a functional state of mental health
- Function safely under stressful conditions with the ability to adapt to ever-changing or life-threatening environments
- Acknowledge inability to answer all questions without causing fear, embarrassment, or loss of self-worth

- Acknowledge if you are unable to cope with specific situations and seek assistance
- Have the ability to emotionally detach from situations enough to function effectively, objectively, and professionally
- Recognize one's personal symptoms of stress, fatigue and burnout
- Manage self: fears, time, commitment, health, stress
- Ask for assistance/training when given responsibilities for unknown tasks

Critical/Analytical Thinking:

- Transfer knowledge appropriately from one situation to another
- Process and interpret information from multiple sources
- Analyze and interpret abstract and concrete data
- Determine and evaluate progression toward outcomes goals
- Problem solve effectively
- Prioritize and organize tasks according to patient needs and available resources
- Perform only those tasks/assignments for which you have been appropriately trained and given permission
- Use good judgment when making decisions
- Differentiate normal from abnormal patient situations and responses, and make decisions based on findings
- Recognize, correct (if possible) and report errors as soon as they are discovered
- Access resources as necessary for quality patient care
- Develop appropriate nursing plan of care for individual patients
- Coordinate patient care among health care providers

To verify a student's ability to provide essential nursing care during clinical training, a physical examination is required of all students. This examination will be documented by a physician/nurse-practitioner on the form provided by the Department of Nursing.

All prospective students must be in stable emotional or mental health. This must be documented on the student's physical examination form and signed by a license physician or nurse practitioner.

Article 5 Miscellaneous Rules

Section 5.01 Employment

1. The Vocational Nursing Program has no rule prohibiting outside employment while enrolled as a student in the program.
2. Identification with Hill College, including the school name, badge or school patch, cannot be worn while performing in such capacity.
3. Outside employment shall not conflict with theory or clinical hours.
4. Working extended hours on the night shift is a safety concern if the student is attending clinical the next day after working the entire night shift and is not allowed.

Section 5.02 Telephone / Cell Phone

All incoming calls involving students will come through the nursing faculty and will be handled by them. Only emergency calls will be accepted.

The following are not allowed within any clinical facility:

1. Cell phones
2. Incoming or outgoing personal phone calls unless emergency
3. Use of patients' telephone for personal use

Cell phones are only allowed in the nursing classroom at the instructor's direction.

Students may only use cell phones on class days on class breaks but must have the phone off in class unless being directed for use. Students may be directed during educational activities in class at the instructors discretion.

Emergency calls can be directed to the director of the program to allow quick notification to the student.

Section 5.03 Witnessing Documents

Students may not witness any permits or other legal medical documents.

Section 5.04 Achievement Tests

The student is required to take the achievement tests. The student is responsible for the fee involved, and payable to Hill College in the Business Office at the Hill County or Johnson County Campus.

Section 5.04.01 Content Mastery Achievement Test

1. Achievement tests will be given at end of each class each semester.
2. The achievement test will count as 10% of the course grade.
 - a. Student must pass with a minimum score of proficiency Level 2 or meet the requirements below to complete the course.
 - b. If the student does not pass test, he/she will be given an incomplete grade for that class until requirements completed.
 - c. Student will be required to compile a study guide of missed questions on the achievement test and provide rationales for correct answers.
 - d. Students will that do not score a minimum of proficiency Level 2 will be required to complete remediation as outlined in the matrix.

See pages 29-34 for more information and grading rubrics

1. Students will be required to pass the Comprehensive PN predictor with a minimum score of 70 or meet the requirements below to complete the class and/or program.

2. The Comprehensive PN Predictor first attempt will count as 10% of the VNSG 1462 course grade.

If student does not pass the Comprehensive PN Predictor:

- a. Student will be counseled on unacceptable scores and requirements needed to complete the class/program.

- b. Student will be required to do remediation as outlined in the matrix.

- c. Student will then retake the Comprehensive PN Predictor. The cost of the second exam will be the student's responsibility.

- d. If the student fails the second Comprehensive PN Predictor with a score of less than 70, he/she will be required to complete 2000 NCLEX questions.

- e. The student will be given an incomplete grade until requirements met.

See Page 29-34 for information and grading rubric

Section 5.05 Smoking

The use and sale of all tobacco and/or e-cigarette products is prohibited inside all College District facilities. Students who are found with residue from, or items such as, but not limited to, cigarette butts, spittoons, tobacco juice, and tobacco waste in Hill College facilities are subject to disciplinary action. E-cigarette means an electronic cigarette or any other device that simulates smoking by using a mechanical heating element, battery, or electronic circuit to deliver nicotine or other substances to the individual inhaling from the device. Because many clinical facilities do not allow their employees to smoke on their campus the Hill College students will not be allowed to smoke on any clinical facility campus, regardless of the smoking policy of the facility.

Students may not smoke while in uniform on class or clinical days.

Prior to classroom/clinical, during classroom/clinical time and while in uniform – this includes use of any tobacco products or E-cigarettes.

Section 5.06 Drugs and Alcohol

Hill College has a drug policy (refer to the current [Hill College Student Handbook](#)). Hill College Vocational Nursing Department will reserve the right to do drug testing if the Program Director or the nursing instructors suspect substance and/or alcohol abuse within the student body of the Hill College nursing program while the students are participating in any Hill College activity on or off campus. Students are not to attend any class or clinical under the influence of drugs or alcohol or the student may be recommended for dismissal from the nursing program.

Section 5.07 Grade Information Rules

In compliance with the Family Educational Rights and Privacy Act 1974 (FERPA), as Amended, information classified as “directory information” may be disclosed to the general public without prior written consent from a student unless the Hill College Student Information Services is notified in writing by the student before the census date in the term. Hill College will not be responsible for the release of Directory Information prior to receiving the **Request to Withhold/Release Disclosure of Directory Information Form** in Student Information Services. A hold will remain on the student record until the student cancels the request to withhold directory information in writing. For additional information regarding the Family Educational Rights and Privacy Act (FERPA) or to access the Request to Withhold/Release Disclosure of Directory Information Form, please see the website at https://www.hillcollege.edu/Admissions_Aid/FERPA.html. In accordance with FERPA, the following rules will be implemented by all Health Occupations faculty.

1. No grades will be posted.
2. No grade will be given over the telephone to a student or any other person under any circumstances.
3. No identification of grade status such as Pass-Fail will be given over the telephone to a student or any other person under any circumstances.

Section 5.08 Professionalism

Students are expected to conduct themselves in a professional manner while in the VN Program. This includes appropriate uniform, personal conduct, appropriate conflict resolution, and following rules, policies, and procedures outlined by Hill College, the VN Nursing Program, and any host facility. Compliance with rules and regulations of the Texas Board of Nursing and Standards of Nursing and the ANA Standards are also expected. Any inappropriate professional conduct will be grounds for discipline, and may include suspension or may be recommended for dismissal from the nursing program.

Students are expected to maintain confidentiality at all times. Information regarding any student or client shall be repeated only in the classroom or a controlled clinical setting. Refer to the clients by initials rather than by names.

Due to the potential to discuss confidential care provided to clients, or sharing of personal student information, tape recording of any type is prohibited. Posting to any public media of any information obtained during any type Hill College activity is considered a breach of confidentiality and is strictly prohibited.

While all information contained in the above listed documents is important, the student must understand the following excerpts of the information can have an immediate impact the student's ability to progress through the program:

1. All written work must be submitted by college email using 12 font & New Times Roman or Arial type. Correct format includes APA format and doc, docx, or pdf forms as provided.
2. All work must be submitted on time, with proper grammar, spelling and in properly typed format.

3. **No Late work accepted. If work is not turned in a zero will result.**
4. **Any breach of the Federal HIPAA Regulations will result in a grade of zero “0” for all work involved.**
5. **Any violation of HIPAA or confidentiality may be grounds for discipline,** possible referral to the Incident Review Committee, and recommended for possible suspension or termination from the course. The student may be removed from the clinical setting.
6. Due to the potential to discuss care provided clients, or sharing of personal student information, tape recording of any type is prohibited. This includes no phones in clinical settings or functioning phones during lecture/lab.

Posting to any public media of any information obtained during any type of Hill College activity is considered a breach of confidentiality and is strictly prohibited.

Section 5.09 Social Media

Hill College Vocational Nursing has a zero tolerance for social media violations. Any student found to have a violated the social media rules by the incident review committee will receive a failing grade in VNSG 1360, VNSG 1461, or VNSG 1462 and will not be allowed to progress in the program.

Use the following link:

[15.29 Use of Social Media by Nurses](#)

Section 5.10 White Paper: A Nurse's Guide to the Use of Social Media

Double click on the document to read

Or use the following link: https://www.ncsbn.org/Social_Media.pdf



Article 6 Rules and Regulations Acknowledgement

Hill College

Vocational Nursing Department

RULES AND REGULATION AGREEMENT

I hereby certify that I have read the rules and regulations for the Vocational Nursing Program at Hill College. In addition, I certify that the said rules and regulations have been verbally explained to me.

I certify that I fully understand the rules and regulations and that I will abide by said rules and regulations.

I understand that completion of the Hill College Vocational Nursing Program will not assure my passing any state board examination for licensure.

(See printable form [Rules and Regulations Agreement](#))

Article 7 Infectious/Communicable Disease Exposure Rule

Hill College

Vocational Nursing Department

INFECTIOUS / COMMUNICABLE DISEASE EXPOSURE RULE

I understand that in my role as a student vocational nurse I may be exposed to infectious / communicable diseases. I understand I will be taught Standard Precautions (formerly known as Universal Precautions or Body Substance Isolation) and Transmission Based Precautions as recommended by Centers of Communicable Diseases (CDC) and OSHA. Knowledge regarding Standard Precautions procedures will be implemented when caring for all patients regardless of their infectious status. Applying the knowledge of Standard Precautions and Transmission – Based Precautions reduce the potential for transmitting blood – borne, airborne, droplet, or contact pathogens and those from moist body substances and fluid. This involves all contagious disease processes.

The Standard Precautions are followed whenever there is potential for contact with:

- Blood
- All body fluids, secretions, and excretions regardless of whether they contain visible blood
- Non intact skin
- Mucous membranes

The Transmission Based Precautions are followed for pathogens that are:

- Airborne
- Droplet
- Contact

(See printable form [Infectious Communicable Disease Exposure Rule Acknowledgement](#))

Article 8 Texas Administrative Code

Texas Board of Nursing

Texas Administrative Code (TAC)

www.bon.state.tx.us

Vocational Nursing

The following Texas Administrative Code rules are included in this section:

Rule: §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
§214.8	Students
§217.11	Standards of Nursing Practice
§217.12	Unprofessional Conduct

(See printable form [TAC Acknowledgment Form](#))

Article 9 Texas Occupations Code and Rules Regulating the Practice of Nursing

The following Texas Occupation Code rules are included in this section:

Rule: §301.252	License Application
Rule: §301.257	Declaratory Order of License Eligibility
Rule: §301.452	Grounds for Disciplinary Action
Rule: §301.4521	Physical and Psychological Evaluation
Rule: §301.453	Disciplinary Authority of Board; Methods of Discipline
Rule: §301.4535	Required Suspension, Revocation, or Refusal of License for Certain Offenses
Rule: §301.454	Notice and Hearing
Rule: §301.455	Temporary License Suspension or Restriction
Rule: §301.4551	Temporary License Suspension for Drug or Alcohol Use
Rule: §301.456	Evidence
Rule: §301.457	Complaint and Investigation
Rule: §301.458	Initiation of Formal Charges; Discovery
Rule: §301.459	Formal Hearing
Rule: §301.460	Access of Information
Rule: §301.461	Assessment of Costs
Rule: §301.462	Voluntary Surrender of License
Rule: §301.463	Agreed Disposition
Rule: §301.464	Informal Proceedings
Rule: §301.465	Subpoenas; Request for Information
Rule: §301.466	Confidentiality
Rule: §301.467	Reinstatement
Rule: §301.468	Probation
Rule: §301.469	Notice of Final Action

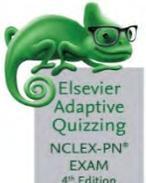
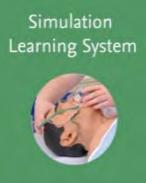
(See printable form [TOC Acknowledgement Form](#))

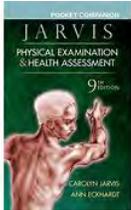
Article 10 Hill College Vocational Nursing Book List

Spring 2023 VNSG 1500 Textbook List

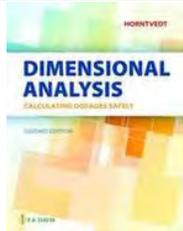
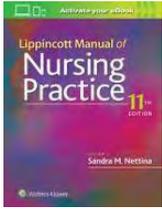
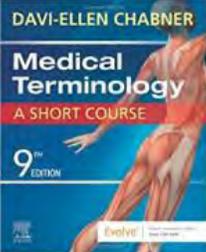
There is a Vocational Nursing Bundle for the course codes.

These books must be purchased by the 1st day of class for the Fall Semester.

<p>Title Fundamental Concepts and Skills for Nursing 6th Edition</p> <p>Author: Williams, Patricia</p> <p>ISBN: 97803236884211</p> <p>Publisher: Elsevier - Health Sciences Division</p> <p>Publication Date: 2021</p>	
<p>Title Study Guide for Fundamental Concepts and Skills for Nursing</p> <p>Author: Williams, Patricia</p> <p>ISBN: 9780323483261</p> <p>Publisher: Elsevier - Health Sciences Division</p> <p>Publication Date: 2021</p>	
<p>Title Elsevier Adaptive Quizzing for the NCLEX-PN Exam 4th edition</p> <p>ISBN: 9780323882361</p> <p>Publisher: Elsevier - Health Sciences Division</p> <p>Publication Date: 2021</p>	
<p>Title SimChart 1 year access</p> <p>ISBN: 9781455711710</p> <p>Publisher Elsevier – Health Sciences Division</p>	
<p>Title Simulation Learning System for RN 2.0</p> <p>Author: Elsevier</p> <p>ISBN: 9780323356190</p> <p>Publisher: Elsevier - Health Sciences Division</p> <p>Publication Date: 2018</p>	
<p>Title Shadow Health Digital Clinical Experience (Undergraduate)</p> <p>Author: Shadow Health, Inc.</p> <p>ISBN: 9780323753678</p> <p>Publisher: Shadow Health Inc.</p>	

Publication Date:		
Custom bundle for access code 9780443166235	See four descriptions above	
Title: Pocket Companion for Physical Examination & Health Assess. 9th Author: Carolyn Jarvis ISBN: 978032827843 Publisher: Elsevier - Health Sciences Division Publication Date: 2023		
Title: Saunders Complete Review for NCLEX PN 8th Edition Author: Silvestri ISBN: 9780323733052 Publisher: Saunders Publication Date: 2022		

The Items in the next section are purchased separately.

Title: Dimensional Analysis 2nd Edition (Required) Author: Tracy Horntvedt ISBN: 978-0-8036-61899 Publisher: F. A. Davis Company Publication Date: 2019	*This book is required by the 1st day of class.	
Title: The Lippincott Manual of Nursing Practice 11th Edition Author: Nettina ISBN: 978-1496379948 Publisher: Lippincott Williams&Wilkins Publication Date: 2019		
Title: Medical Terminology: A short Course, 9th Edition Author: Chabner, Davi-Ellen ISBN: 9780323479912 Publisher: Elsevier - Health Sciences Division Publication Date: 2022	*If you have taken Medical Terminology you will not need this book.	

The items in this section are only recommended and can be purchased separately (the student is **not required** to purchase these books):

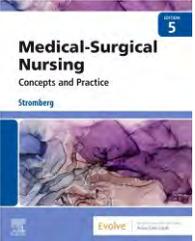
F. A. Davis The Perfect Package 24nd Edition ISBN: ISBN-13: 978-1-7196-4443-3

<p>Title Author: ISBN: Publisher: Publication Date:</p>	<p>Davis's Drug Guide for Nurses®, 18th Edition April Hazard Vallerand; Cynthia A. Sanoski ISBN-13: 978-1-7196-4640-6 F. A. Davis Company 2021</p>	 <p>THE PERFECT PACKAGE A Comprehensive Collection for Nurses</p>
<p>Title Author: ISBN: Publisher: Publication Date:</p>	<p>Davis's Comprehensive Manual of Laboratory and Diagnostic Tests with Nursing Implications 9th Edition Anne M. Van Leeuwen; Mickey L. Bladh ISBN-13: 978-1-7196-4058-9 F. A. Davis Company 2021</p>	
<p>Title Author: ISBN: Publisher: Publication Date:</p>	<p>Taber's Cyclopedic Medical Dictionary (Thumb-Indexed Version) 24th Edition Donald Venes; Clarence Wilbur Taber ISBN-13: 978-1-7196-4285-9 F. A. Davis Company 2021</p>	

Also required are Navy Scrubs, uniform red pants with white top, Vocational Nursing Patches, Vocational Nursing Supply bag which is also attached here Supply bag ISBN 9200520021030

These books and codes must be purchased by the 1st day of class for the Spring Semester. Same textbooks used for Summer Semester.

Medical Surgical Nursing VNSG1509 & VNSG 2510

<p>Title Author: ISBN: Publisher: Publication Date:</p>	<p>deWit's Medical-Surgical Nursing 5rd Edition Holly Stromberg; 9780323810210 Elsevier - Health Sciences Division March 2023</p>	
<p>Title Author:</p>	<p>Study Guide for deWit's Medical-Surgical Nursing 5th edition Holly Stromberg; Carol Dallred</p>	

ISBN: 9780323810234
 Publisher: Elsevier - Health Sciences Division
 Publication Date: March 2023



Maternity and Pediatric Nursing VNSG1334 & VNSG1330

<p>Title Introduction to Maternity and Pediatric Nursing 9th Edition Author: Gloria Leifer ISBN: 9780323826808 Publisher: Elsevier - Health Sciences Division Publication Date: 2022</p>	
<p>Title Study Guide for Introduction to Maternity and Pediatric Nursing Author: Gloria Leifer ISBN: 9780323826815 Publisher: Elsevier - Health Sciences Division Publication Date: 2022</p>	
<p>Title Shadow Health Maternal Health Author ISBN: 9780323753807 Publisher: Elsevier - Health Sciences Division Publication Date: 2021</p>	
<p>Title Shadow Health Pediatric Author ISBN: 9780323753814 Publisher: Elsevier - Health Sciences Division Publication Date 2021</p>	

Article 11 Differentiated Essential Competencies of Graduates of Texas Nursing Program

Section 11.01 Competency Statements for Vocational Nurse Graduates

The curriculum for vocational nursing (VN) education is delivered as a certificate program of approximately one year in length offered by a college, university, or career school or college, or in a hospital or military setting. Texas Board of Nursing (BON or Board) Rule 214 for Vocational Nursing Education requires didactic and clinical learning experiences designed to prepare graduates to practice as safe, competent nurses who are able to demonstrate the competencies outlined in the DEC's.

The BON approved curriculum includes requirements for instruction in the five basic areas of nursing care: (1) children; (2) mothers and newborns; (3) elderly; (4) adults; and (5) individuals with mental health problems. The initial clinical instruction takes place in the skills and simulation laboratories, progressing to faculty supervised, hands-on clinical experiences with actual patients in health care settings. Clinical experiences in psychiatric nursing are optional, but the mental status of patients should be considered in all clinical settings.

Required nursing and support courses provide instruction in nursing roles; biological, physical, social, behavioral, and nursing sciences, including body structure and function, microbiology, pharmacology, nutrition, signs of emotional health, human growth and development; vocational nursing scope of practice, and nursing skills. Content may be integrated within the core nursing curriculum or may be taken as stand-alone courses. With advances of education and practice, programs may include content in the use of technology and informatics through learning experiences in the clinical practice arena, simulated practice, and skills laboratories.

All levels of prelicensure nursing education prepare graduates to demonstrate the DEC's and the competencies for each educational level are based upon the preparation in the program of study. Graduates of VN nursing education programs who have qualified and completed all aspects of the application to take the NCLEX-PN® will receive a temporary authorization to practice under direct supervision up to 75 days while awaiting testing and licensure.

The entry-level graduate of a VN program provides nursing care within a directed scope of practice under appropriate supervision. The vocational nurse uses a systematic problem-solving process in the care of multiple patients with predictable health care needs to provide individualized, goal-directed nursing care. The vocational nurse contributes to the plan of care by collaborating with interdisciplinary

team members and with the patient's family. The new graduate can readily integrate technical skills and use of computers and equipment into practice.

Educational opportunities exist for Licensed Vocational Nurses (LVNs) to articulate into professional nursing education programs. Vocational nursing represents the beginning level of the nursing practice continuum in the roles of Member of the Profession, Provider of Patient-Centered Care, Patient Safety Advocate, and Member of the Health Care Team. The entry-level competencies of the VN graduate are listed on the following pages

Article 12 Exit Competencies

ESSENTIAL COMPETENCIES OF GRADUATES OF TEXAS VOCATIONAL NURSING EDUCATIONAL PROGRAMS SEMESTER I

I. Member of the Profession:

- A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.
- B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.
- C. Contribute to activities that promote the development and practice of vocational nursing.
- D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.

II. Provider of Patient-Centered Care:

- A. Use clinical reasoning and knowledge based on the vocational nursing program of study and established evidence-based practice as the basis for decision-making in nursing practice.
- B. Assist in determining the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients and their families, and in interpreting health-related data based on knowledge derived from the vocational nursing program of study.
- C. Report data to assist in the identification of problems and formulation of goals/outcomes and patient-centered plans of care in collaboration with patients, their families, and the interdisciplinary health care team.
- D. Provide safe, compassionate, basic nursing care to assigned patients with predictable health care needs through a supervised, directed scope of practice.
- E. Implement aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors.
- F. Identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes.

III. Patient Safety Advocate

- A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.
- B. Implement measures to promote quality and a safe environment for patients, self, and others.
- C. Assist in the formulation of goals and outcomes to reduce patient risks.
- D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.
- E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.

IV. Member of the Health Care Team

- A. Communicate and collaborate in a timely manner with patients, their families, and the interdisciplinary health care team to assist in the planning, delivery, and coordination of patient-centered care to assigned patients.
- B. Participate as an advocate in activities that focus on improving the health care of patients and their families.
- C. Participate in the identification of patient needs for referral to resources that facilitate continuity of care, and ensure confidentiality.
- D. Communicate patient data using technology to support decision-making to improve patient care.

SEMESTER II

I. Member of the Profession:

- A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.
- B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.
- C. Contribute to activities that promote the development and practice of vocational nursing.
- D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.

II. Provider of Patient-Centered Care:

- A. Use clinical reasoning and knowledge based on the vocational nursing program of study and established evidence-based practice as the basis for decision-making in nursing practice.
- B. Assist in determining the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients and their families, and in interpreting health-related data based on knowledge derived from the vocational nursing program of study.
- C. Report data to assist in the identification of problems and formulation of goals/outcomes and patient-centered plans of care in collaboration with patients, their families, and the interdisciplinary health care team.
- D. Provide safe, compassionate, basic nursing care to assigned patients with predictable health care

- needs through a supervised, directed scope of practice.
- E. Implement aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors.
 - F. Identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes.
 - G. Implement teaching plans for patients and their families with common health problems and well-defined health learning needs.

III. Patient Safety Advocate

- A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.
- B. Implement measures to promote quality and a safe environment for patients, self, and others.
- C. Assist in the formulation of goals and outcomes to reduce patient risks.
- D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.
- E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.

IV. Member of the Health Care Team

- A. Communicate and collaborate in a timely manner with patients, their families, and the interdisciplinary health care team to assist in the planning, delivery, and coordination of patient-centered care to assigned patients.
- B. Participate as an advocate in activities that focus on improving the health care of patients and their families.
- C. Participate in the identification of patient needs for referral to resources that facilitate continuity of care, and ensure confidentiality.
- D. Communicate patient data using technology to support decision-making to improve patient care.
- E. Assign nursing activities to LVNs or unlicensed personnel based upon an analysis of patient or work place need.

SEMESTER III

I. Member of the Profession:

- A. Function within the nurse's legal scope of practice and in accordance with regulation and the policies and procedures of the employing health care institution or practice setting.
- B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.
- C. Contribute to activities that promote the development and practice of vocational nursing.
- D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning.

II. Provider of Patient-Centered Care:

- A. Use clinical reasoning and knowledge based on the vocational nursing program of study and established evidence-based practice as the basis for decision-making in nursing practice.
- B. Assist in determining the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients and their families, and in interpreting health-related data based on knowledge derived from the vocational nursing program of study.
- C. Report data to assist in the identification of problems and formulation of goals/outcomes and patient-centered plans of care in collaboration with patients, their families, and the interdisciplinary health care team.
- D. Provide safe, compassionate, basic nursing care to assigned patients with predictable health care needs through a supervised, directed scope of practice.
- E. Implement aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors.
- F. Identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes.
- G. Implement teaching plans for patients and their families with common health problems and well-defined health learning needs.
- H. Assist in the coordination of human, information, and physical resources in providing care for assigned patients and their families.

III. Patient Safety Advocate

- A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.
- B. Implement measures to promote quality and a safe environment for patients, self, and others.
- C. Assist in the formulation of goals and outcomes to reduce patient risks.
- D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.
- E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act.
- F. Accept and make assignments that take into consideration patient safety and organizational policy.

IV. Member of the Health Care Team

- A. Communicate and collaborate in a timely manner with patients, their families, and the Interdisciplinary health care team to assist in the planning, delivery, and coordination of patient-centered care to assigned patients.
- B. Participate as an advocate in activities that focus on improving the health care of patients and their families.
- C. Participate in the identification of patient needs for referral to resources that facilitate continuity of care, and ensure confidentiality.
- D. Communicate patient data using technology to support decision-making to improve patient care.
- E. Assign nursing activities to LVNs or unlicensed personnel based upon an analysis of patient or work place need.
- F. Supervise nursing care by others for whom the nurse is responsible.
- G. Assist health care teams during local or global health emergencies or pandemics to promote health and safety, and prevent disease.

Matrix Identifying Texas Board of Nursing Differential Essential Competencies in the Current Hill College Vocational Nursing Program 2021-2023									
	VNSG 1500	VNSG 1360	VNSG 1509	VNSG 1461	VNSG 1334	VNSG 2510	VNSG 1462	VNSG 1330	VNSG 1331
Civility	X	X	X	X	X	X	X	X	X
Community readiness for emergencies, crises	X		X		X	X			
Culture of Safety	X	X	X	X	X	X	X	X	X
Global Health	X		X			X			
Just Culture	X		X			X			
Nursing Peer Review						X	X		
Self-Care						X	X		
Service Excellence						X	X		
Social Determinants of Health	X		X		X	X		X	
Social Justice	X		X		X			X	
Vulnerable patients/populations	X		X		X			X	
Workplace violence	X		X			X			

Vocational Nursing Marketable Skills

- Cultural Competency
- Critical Thinking
- Adaptability
- Communication
- Teamwork

Article 13 Secretary Commission on Achieving Necessary Skills (SCANS)

FOUNDATION	
Basic Skills: Reads, writes, performs arithmetic and mathematical operations, listens, and speaks.	
F1 Reading	Locates, understands, and interprets written information in prose and in documents such as manuals, graphs, and schedules.
F2 Writing	Communicates thoughts, ideas, information, and messages in writing; creates documents such as letters, directions, manuals, reports, graphs, and flow charts.
F3 Arithmetic	Performs basic computations; uses basic numerical concepts such as whole numbers, etc.
F4 Mathematics	Approaches practical problems by choosing appropriately from a variety of mathematical techniques.
F5 Listening	Receives, attends to, interprets, and responds to verbal messages and other cues.
F6 Speaking	Organizes ideas and communicates orally.
Thinking Skills: Thinks creatively, makes decisions, solves problems, visualizes, knows how to learn, and reasons.	
F7 Creative Thinking	Generates new ideas
F8 Decision Making	Specifies goals and constraints, generates alternatives, considers risks, and evaluates and chooses best alternative.
F9 Problem Solving	Recognizes problems and devises and implements plan of action.
F10 Seeing Things in the Mind's Eye	Organizes and processes symbols, pictures, graphs, objects, and other information.
F11 Knowing How to Learn	Uses efficient learning techniques to acquire and apply new knowledge and skills.
F12 Reasoning	Discovers a rule or principle underlying the relationship between two or more objects and applies it when solving a problem.
Personal Qualities: Displays responsibility, self-esteem, sociability, self-management, integrity, and honesty	
F13 Responsibility	Exerts a high level of effort and perseveres towards goal attainment.
F14 Self-Esteem	Believes in own self-worth and maintains a positive view of self.
F15 Sociability	Demonstrates understanding, friendliness, adaptability, empathy, and politeness in group settings.
F16 Self-Management	Assesses self accurately, sets personal goals, monitors progress, and exhibits self-control.
F17 Integrity/Honesty	Chooses ethical courses of action.

COMPETENCY	
Resources: Identifies, organizes, plans, and allocates resources.	
C1 Time	Selects goal-relevant activities, ranks them, allocates time, and prepares and follows schedules.
C2 Money	Uses or prepares budgets, makes forecasts, keeps records, and makes adjustments to meet objectives.
C3 Materials and Facilities	Acquires, stores, allocates, and uses materials or space efficiently
C4 Human Resources	Assesses skills and distributes work accordingly, evaluates performance, and provides feedback.
Information: Acquires and uses information.	
C5	Acquires and evaluates information.
C6	Organizes and maintains information.
C7	Interprets and communicates information.
C8	Uses computers to process information.
Interpersonal: Works with others.	
C9 Participates as a member of a team	Contributes to group effort.
C10	Teaches others new skills.
C11 Serves Clients/Customers	Works to satisfy customer's expectations.
C12 Exercises Leadership	Communicates ideas to justify position, persuades and convinces others, responsibly challenges existing procedures and policies.
C13 Negotiates	Works toward agreements involving exchange of resources; resolves divergent interests.
C14 Works with Diversity	Works well with men and women from diverse backgrounds.
Systems: Understands complex interrelationships.	
C15 Understands Systems	Knows how social, organizational, and technological systems work and operates effectively with them.
C16 Monitors and Corrects Performance	Distinguishes trends, predicts impacts on system operations, diagnoses system's performance, and corrects malfunctions.
C17 Improves or Design Systems	Suggests modifications to existing systems and develops new or alternative systems to improve performance.
Technology: Works with a variety of technologies	
C18 Selects Technology	Chooses procedures, tools or equipment, including computers and related technologies
C19 Applies Technology to Task	Understands overall intent and proper procedures for setup and operation of equipment.
C20 Maintains and Troubleshoots Equipment	Prevents, identifies, or solves problems with equipment, including computers and other technologies.

Article 14 Forms

The forms on the following pages need to be printed out, signed, and turned in on the 1st class day.

Community Service form and Verification are for use when completing your community service.



Appearance Rule Acknowledgment

The following statement must be signed, dated and returned.

By my signature below, I acknowledge that I have received, read and understand the requirements set forth by the **Appearance Rules**. I also confirm by my signature that I agree to comply with the Hill College Standards for Personal Appearance.

Potential Student Signature

Printed Name

Date



Essential Performance Requirements for Nursing Students Acknowledgment

Students are expected to demonstrate the ability to perform similar functions as would be expected in a nursing employment situation. All students must be able to tolerate physically taxing activities and perform during stressful situations in order to meet the demands of the profession.

Students must assess their own capabilities prior to entering the nursing program. The following list, although not comprehensive, identifies some of the more basic, minimum of essential skills necessary in the nursing program, as well as in the career.

Hours:

- Perform nursing student functions in a variety of health-care settings, up to 12 hours per shift (day or night), up to two shifts per week
- Attend nursing and other college classes an additional 1-5 days per week, as scheduled in the course catalog

Work Environment & Safety Issues:

- Be aware of potential bio-hazardous risks in health care settings which require wearing safety equipment such as masks, head coverings, glasses, latex or non-latex gloves, shoe coverings and gowns
- Be able to meet clinical agency, College and Department of Nursing performance standards
- Be able to arrange travel to and from academic and clinical sites
- Be aware that exposure to allergens (latex, chemicals, etc.) or other hazardous agents exists
- Follow all state, federal, College, Department of Nursing, clinical agency and HIPAA policies regarding confidentiality of patients' personal, family and health-related information
- Provide for patient safety in various situations and settings which may be physically demanding
- Perform multiple assignments/tasks concurrently
- Tolerate the mental demands of differing shifts, body rhythm changes, increasingly difficult patient workloads, fatigue
- Recognize that any patient could potentially cause you harm
- Administer cardiopulmonary resuscitation. (CPR)
- Must be able to possess the ability to maneuver/move a minimum of 30 lbs, weekly and sometimes daily.

Interpersonal Skills:

- Establish professional relationships
- Establish rapport with individuals, families and groups
- Respect cultural differences
- Negotiate interpersonal conflicts effectively



Communication Skills:

- Teach others appropriately and effectively
- Speak and write English clearly
- Listen/comprehend both spoken and written English
- Work quickly and accurately from both written and verbal orders
- Collaborate with others
- Manage information from multiple sources
- Communicate in English directly, and by electronic methods, including using the telephone
- Clearly and safely delegate to others and follow-up as needed
- Document accurately, clearly and effectively patient condition and response to treatment
- Know how and when to use the chain of command to resolve problems

Cognitive Abilities:

- Correctly perform mathematical calculations
- Analyze information from many sources and determine appropriate nursing interventions
- Understand principles/rationale behind nursing interventions
- Follow physicians' orders
- Successfully pass exams and course work
- Perform basic computer functions, including word processing, e-mail and web access
- Continually increase and update knowledge base

Emotional Stability:

- Provide client with emotional support
- Build positive relationships with patients, families, peers, and other healthcare providers
Manage frustration/anger from unsatisfied patients, families or other healthcare providers
Focus attention on appropriate tasks
- Successfully cope with personal emotions
- Cope with strong emotions in others
- Continuously be in a functional state of mental health
- Function safely under stressful conditions with the ability to adapt to ever-changing or life-threatening environments
- Acknowledge inability to answer all questions without causing fear, embarrassment, or loss of self-worth
- Acknowledge if you are unable to cope with specific situations and seek assistance
- Have the ability to emotionally detach from situations enough to function effectively, objectively, and professionally
- Recognize one's personal symptoms of stress, fatigue and burnout
- Manage self: fears, time, commitment, health, stress
- Ask for assistance/training when given responsibilities for unknown tasks



Critical/Analytical Thinking:

- Transfer knowledge appropriately from one situation to another
- Process and interpret information from multiple sources
- Analyze and interpret abstract and concrete data
- Determine and evaluate progression toward outcomes goals
- Problem solve effectively
- Prioritize and organize tasks according to patient needs and available resources
- Perform only those tasks/assignments for which you have been appropriately trained and given permission
- Use good judgment when making decisions
- Differentiate normal from abnormal patient situations and responses, and make decisions based on findings
- Recognize, correct (if possible) and report errors as soon as they are discovered
- Access resources as necessary for quality patient care
- Develop appropriate nursing plan of care for individual patients
- Coordinate patient care among health care providers

To verify a student's ability to provide essential nursing care during clinical training, a physical examination is required of all students. This examination will be documented by a physician/nurse-practitioner on the form provided by the Department of Nursing.

All prospective students must be in stable emotional or mental health. This must be documented on the student's physical examination form and signed by a license physician or nurse practitioner.

Name (Print) _____ Student ID _____

Signature _____ Date _____



Uniform Rule Violations – Written Warning

Student Name (printed) _____

You are hereby given a written warning for uniform rule violations for the following reason(s).
Continued violation of the uniform rule will result in probation.

Circle the number of all that apply:

1. Hair down in face or inappropriate colors
2. Excessive makeup
3. Tattoos exposed
4. Excessive/inappropriate jewelry
5. Pant length (touching floor)
6. Inappropriate/visible or no undergarments
7. Uniforms dirty/wrinkled
8. Inappropriate/dirty shoes
9. School patch loosely secured or no patch.
10. Inappropriate or missing watch
11. Missing ID badge
12. Excessive scents (perfume, lotions, colognes, body odors)
13. Sagging pants
14. Uniform too small
15. Inappropriate or no socks
16. Dangling Earrings/tongue rings/or other visible piercings
17. Acrylic nails or nail polish
18. Other

Student comments:

Instructor Comments:

Students Signature

Date



Instructor Signature

Date

Rules and Regulation Agreement

The College student is considered a responsible adult. The conduct of students on the premises of Hill College must not interfere with the orderly processes and governance of the College. The student's enrollment in the College District indicates acceptance of those standards of conduct. I have read the Hill College Vocational Nursing Program Student Handbook and I understand that it is my responsibility to be knowledgeable of and to comply with the contents and provisions of Hill College Policy, rules and regulations stated within. In addition, I certify that the said rules and regulations have been verbally explained to me.

I am aware that it is my responsibility to read the Hill College Catalog and the Hill College Student Handbook and to abide by all policies, procedures, rules and regulations set forth in those documents.

I understand that completion of the Hill College Vocational Nursing Program will not assure my passing any state board examination for licensure.

Signature of Student



Date

Infectious / Communicable Disease Exposure Rule

I understand that in my role as a student vocational nurse I may be exposed to infectious / communicable diseases. I understand I will be taught Standard Precautions (formerly known as Universal Precautions or Body Substance Isolation) and Transmission Based Precautions as recommended by Centers of Communicable Diseases (CDC) and OSHA. Knowledge regarding Standard Precautions procedures will be implemented when caring for all patients regardless of their infectious status. Applying the knowledge of Standard Precautions and Transmission – Based Precautions reduce the potential for transmitting blood – borne, airborne, droplet, or contact pathogens and those from moist body substances and fluid. This involves all contagious disease processes.

The Standard Precautions are followed whenever there is potential for contact with:

- Blood
- All body fluids, secretions, and excretions regardless of whether they contain visible blood
- Non intact skin
- Mucous membranes

The Transmission Based Precautions are followed for pathogens that are:

- Airborne
- Droplet
- Contact

Signature of Student



Date

Texas Board of Nursing
Texas Administrative Code (TAC) Acknowledgment
Vocational Nursing

The following Texas Administrative Code rules are included in this section:

- Rule: [§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
[§214.8](#) Students
[§217.11](#) Standards of Nursing Practice
[§217.12](#) Unprofessional Conduct

I, _____, acknowledge that I have received a copy of the Texas Administrative Code that pertains to the Hill College Vocational Nursing Program. I acknowledge that the above rules have been explained to me. I understand it is my responsibility to seek further clarification regarding the contents of the above rules if needed and can be found on the following website: <http://www.bon.texas.gov/nursinglaw/pdfs/bon-rr.pdf>

Signature

Date





Texas Board of Nursing

Texas Occupation Code (TOC) Acknowledgement Vocational Nursing

The following Texas Occupation Code rules are included in this section:

Rule: §301.252	License Application
Rule: §301.257	Declaratory Order of License Eligibility
Rule: §301.452	Grounds for Disciplinary Action
Rule: §301.4521	Physical and Psychological Evaluation
Rule: §301.453	Disciplinary Authority of Board; Methods of Discipline
Rule: §301.4535	Required Suspension, Revocation, or Refusal of License for Certain Offenses
Rule: §301.454	Notice and Hearing
Rule: §301.455	Temporary License Suspension or Restriction
Rule: §301.4551	Temporary License Suspension for Drug or Alcohol Use
Rule: §301.456	Evidence
Rule: §301.457	Complaint and Investigation
Rule: §301.458	Initiation of Formal Charges; Discovery
Rule: §301.459	Formal Hearing
Rule: §301.460	Access of Information
Rule: §301.461	Assessment of Costs
Rule: §301.462	Voluntary Surrender of License
Rule: §301.463	Agreed Disposition
Rule: §301.464	Informal Proceedings
Rule: §301.465	Subpoenas; Request for Information
Rule: §301.466	Confidentiality
Rule: §301.467	Reinstatement
Rule: §301.468	Probation
Rule: §301.469	Notice of Final Action

I, _____, acknowledge that I have received a copy of the Texas Administrative Code that pertains to the Hill College Vocational Nursing Program. I acknowledge that the above rules have been explained to me. I understand it is my responsibility to seek further clarification regarding the contents of the above rules if needed and can be found on the following website:

<http://www.bon.texas.gov/nursinglaw/pdfs/npa2011.pdf>

Signature

Date



Potential or Actual Incident Report

To be filled out by instructor:

Date: _____ Clinical area _____

Student's name: _____

Nature of error: _____

Description of Incident: (To be filled out by the Student)

How can I prevent a recurrence?

Student Signature

Date

Instructor Signature

Date



Community Service

Students Name: _____

Date of Project: _____

Sponsor of Project: _____

Location and Time of Project: _____

Purpose of Project: _____

Activities the student participated in: _____

Student Evaluation of Project: _____



Community Service Verification

Dear Community Project Sponsor:

The Hill College vocational nursing students are required to participate in a community project of their choice, after approval by the Vocational Nursing Program Director. This may be a project in the student's local community or elsewhere. Please sign below verifying that the student did participate in the project.

Thank you,

Hill College

Vocational Nursing

Janis Grimland BSN, RN, Vocational Nursing Program Director

Community Sponsor Signature: _____

Date of Project: _____

Exact time in which student participates: _____

(Example: 5:00 p.m. – 9:00 pm) (Minimum of 4 hours)

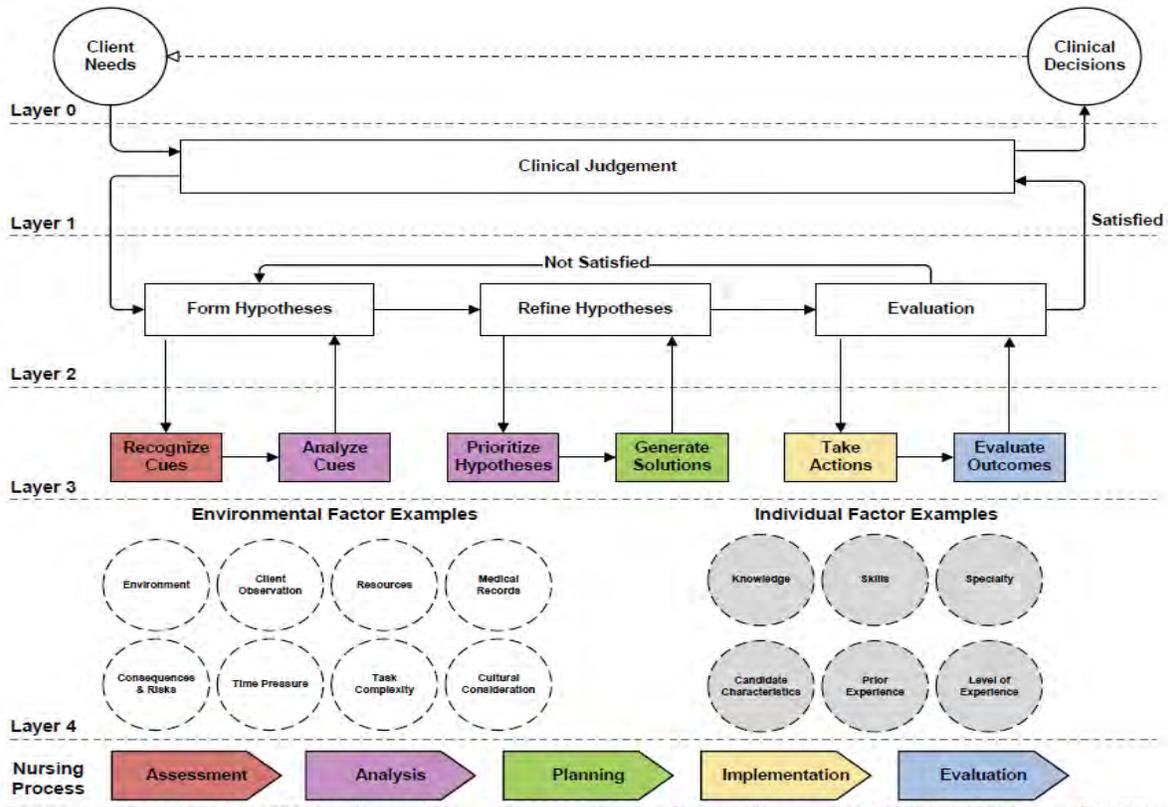
Student signature: _____



Hill College Vocational Nursing

Hill College is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award the associate degree. Contact the Southern Association of Colleges and Schools Commission on Colleges at [1866 Southern Lane, Decatur, Georgia 30033-4097](#) or call 404-679-4500 for questions about the accreditation of Hill College.

NCSBN[®] Clinical Judgement Measurement Model



Website for general NGN resources:
<https://www.ncsbn.org/ngn-resources.htm>