

Texas A&M International University

College of Nursing and Health Sciences



Faculty Handbook 2022-2023

AFFIRMED: MAY 24, 2022

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I. BYLAWS OF THE FACULTY ORGANIZATION

A. By-Laws of the College of Nursing and Health Sciences Faculty Organization

ARTICLE I: NAME

The name of this organization is the College of Nursing and Health Sciences Faculty Organization, hereinafter referred to as the Faculty Organization.

ARTICLE II: MISSION STATEMENT

The objective of the organization is to promote excellence of the programs and activities of the Canseco School of Nursing (CSON), Communication Sciences & Disorders Program (CSDO) and Kinesiology Non-Certification Program (Kine), all part of the College of Nursing and Health Sciences (CONHS).

ARTICLE III: FUNCTIONS

The functions of the organization shall be to:

1. Establish and implement the philosophy, purposes, and objectives of the CONHS.
2. Establish and implement the curricula and sequence of courses.
3. Establish and implement student admission, progression, and graduation policies and procedures.
4. Promote the rights and facilitate the responsibilities of faculty and students.
5. Promote excellence in all programs in the CONHS through systematic evaluation and revision based on the accreditation criteria for baccalaureate and master's programs of the Texas Board of Nursing (TBON) and national accrediting agencies.
6. Participate in the management of facilities, resources and services needed to implement the curricula of the programs.
7. Participate in the development of the annual CONHS budget.
8. Develop and maintain relationships with external agencies and organizations.
9. Participate in the recruitment and selection of faculty.
10. Develop and implement a plan for peer evaluation of teaching effectiveness.
11. Establish and monitor a nursing peer review plan.

ARTICLE IV: MEMBERSHIP

1. Active members, all full-time nursing faculty and faculty with a minimum 50% faculty appointment: voice and vote privileges.

2. The Nursing Lab Supervisor shall have voice and vote on the Simulation Committee and any others appointed by the Dean.

ARTICLE V: OFFICERS

The officers of the Organization shall be the Chair and the Secretary

1. The Dean of the CONHS shall serve as Chair.
2. The Secretary shall be elected by the faculty annually and will serve to review and submit minutes.

ARTICLE VI: A. COMMITTEE BYLAWS

In all committee by-laws, the singular shall include the plural and the masculine shall include the feminine as appropriate.

The Faculty shall elect committee members and chairs at the beginning of each academic year and may make changes during the year if necessary. The Chair and Secretary for all committees shall be elected by the committee. Each committee shall have at least one representative from the Baccalaureate of Science in Nursing (BSN) program, Master of Science in Nursing (MSN) program, Communication Sciences & Disorders Program (CSDO) and Kinesiology Non-Certification Program (Kine). Committees that have students in attendance, shall have at least one (1) representative from each program in the CONHS. Student will elect their peers. Students shall voice, but no vote.

Ad hoc committees shall be appointed by the Dean as needed.

Standing Committees

- I. Curriculum Committee
- II. Assessment & Evaluation Committee
- III. Faculty Affairs Committee
- IV. Policy and Procedures Committee
- V. Recruitment, Admission & Progression Committee
- VI. Simulation Committee
- VII. Scholarship Committee

B. Curriculum Committee

Article I: Objectives/Responsibilities

Section 1 Objectives. The objectives of this committee shall be to make recommendations to the faculty and the Dean on matters related to:

- A. philosophy, purposes, and objectives of the CONHS programs;
- B. conceptual framework;
- C. program curricula including prerequisites, organization of prerequisites and required courses;
- D. individual course development; and
- E. assurance that the curricula meets the Texas Board of Nursing (TBON) Differentiated Educational Competencies (DECs) and Accreditation Commission for Education in Nursing (ACEN) and other national standards as appropriate.

Section 2 Responsibilities. The responsibilities of the committee include:

- A. development and review of new courses;
- B. revision of existing courses as necessary;
- C. review of curricula, as per master evaluation plan, for consistency with appropriate program standards;
- D. assurance of appropriate progression of complexity to meet appropriate program standards related to program learning outcomes
- E. curriculum mapping related to DECs, ACEN standards, and other program competencies;
- F. submit new course and/or revision to the organization and Dean for approval; and
- G. report committee activities to the Faculty Organization for information and/or approval.

Article II: Membership

The committee shall be composed of at least five (5) faculty members elected by the Faculty as outlined in Article IV. A, and four (4) students as outlined in Article IV A. Students shall have voice but no voting privileges on Committees.

Article III: Officers and Duties of Officers

Section 1 Officers.

Officers shall include a chair and a secretary. The chair and secretary shall be elected by the Committee. The secretary shall be selected by the committee at the beginning of each academic year.

Section 2 Duties. The Duties of the officers shall be as follows:

A. The chair shall:

- set the time and place of committee meetings and prepare an agenda for each;
- preside at meetings;
- vote;
- represent the Curriculum Committee in communications with other committees, Program Coordinators and Directors, the Dean, CONHS Faculty and University Committees; and
- prepare a report of committee activities for each meeting.

B. The secretary shall:

- preside at meetings in the absence of the chair;
- maintain records of committee proceedings and publish these proceedings to committee members and the Dean; and
- keep a continuing record of all proceedings; and
- submit committee meeting minutes to the Dean's office.

Article IV: Meetings

The Committee shall meet at least once during each University academic semester, with additional meetings as necessary.

C. Assessment and Evaluation

Article I: Objectives/Responsibilities

Section 1 Objectives. The objectives of this committee shall be to make recommendations to the faculty and the Dean which:

- A. ensure that the Master Evaluation Plan is implemented and that the data is used to improve program outcomes;
- B. ensure that there is a plan in place for the systematic evaluation of students, faculty, clinical agencies, facilities/resources, and adequacy of library holdings;
- C. ensure that there is a system in place for documentation of the evaluation cited in A and B; and
- D. ensure that the plan for evaluation cited in A, B and C is carried out, communicated to faculty and used for program review and revisions.

Section 2 Responsibilities. The responsibilities of the committee shall be to:

- A. review all the existing evaluation methods and procedures for appropriateness and make recommendations for revision as necessary;
- B. develop new evaluation methods and procedures as needed. Requests for new evaluation procedures may be submitted to the Assessment and Evaluation Committee by University administration, the Dean, Program Coordinators, the Director of the BSN Program, the Director of the MSN Program, faculty members, and student groups;
- C. submit all revisions and new evaluation methods and procedures to the Policy and Procedures Committee for consideration;
- D. submit assessments and reports in a timely matter according to appropriate standards and guidelines to the Dean and appropriate University assessment committee;
- E. report evaluation findings to the Dean, appropriate CONHS committees and the faculty; and
- F. report committee activities to the faculty organization for information and/or approval.

Article II: Membership

The committee shall be composed of at least five (5) faculty members elected by the Faculty as outlined in Article II. A, and four (4) students as outlined in Article II A. Students shall have voice but no voting privileges on Committees.

Article III: Officers and Duties of Officers

Section 1 Officers.

The officers of this committee shall be the chair and secretary. The chair and secretary shall be elected by the committee.

Section 2 Duties of Officers. The duties of the officers shall include, but not be limited to, the following:

A. The chair shall:

- set the time and place of meetings and prepare an agenda for each;
- preside at meetings;
- vote;
- submit new and revised evaluation methods and procedures to the Policy and Procedures Committee for approval;
- represent the Evaluation and Assessment Committee in communications with the Dean, Coordinators, Directors, other committees, faculty and student groups and the University;
- receive requests for modifications of the existing evaluation plan;
- prepare a report of committee activities each academic year; and
- maintain action plans for quality improvement.

B. The secretary shall:

- keep a record of proceedings at each meeting;
- preside at committee meetings in the absence of the chair;
- publish records of the proceedings;
- maintain continuous records of committee proceedings; and
- submit minutes of meetings to the Dean's office.

Article IV: Meetings

The committee shall meet at least once each University academic semester and as necessary.

D. Policy & Procedures Committee

Article I: Objectives/Responsibilities

Section 1 Objectives. The objectives of this committee shall be to make recommendations to the faculty and the Dean which:

- A. ensure that all of the policies and procedures are current.
- B. ensure that there are policies and procedures documented to explain all of the CONHS practices and that they are consistent, and disseminated to the public, faculty and students in a timely matter.

Section 2 Responsibilities. The responsibilities of the Committee shall be to:

- A. review all existing policies and procedures and revise as necessary;
- B. develop new policies and procedures, as needed. Requests for new or amended policies may be submitted by University administration, CONHS administration, faculty, and students;
- C. submit all revisions and new policies and procedures to the faculty and Dean for approval;
- D. publish approved policies and procedures to all faculty and students;
- E. ensure that all current policies are in the appropriate handbooks and procedure manuals and are made available to the student. These policies will be available online at the CONHS website <http://www.tamtu.edu/academics.shtml>; and
- F. report committee activities to the faculty organization for information and/or approval.

Article II: Membership

The committee shall be composed of at least five (5) faculty members elected by the Faculty as outlined in Article II. A, and four (4) students as outlined in Article II A. Students shall have voice but no voting privileges.

Article III: Officers and Duties of Officers

Section 1 Officers.

The officers of the committee shall be the chair and secretary. The chair and secretary shall be elected by the Committee.

Section 2 **Duties of Officers.** The duties of the officers shall include, but not be limited to, the following:

A. The chair shall:

- set the time and place of meetings and prepare an agenda for each;
- preside at meetings;
- vote;
- submit revised policies and new policies to the Faculty and Dean for approval;
- represent the Policy & Procedures Committee in communications with the CONHS administration, other committees, faculty, and student groups;
- receive requests for new policies and procedures and revisions of existing policies and procedures; and
- prepare a report of committee activities each academic year.

B. The secretary shall:

- keep a record of proceedings at each meeting;
- preside at committee meetings in the absence of the chair;
- publish records of the proceedings to committee;
- maintain continuous records of committee proceedings; and
- submit meeting minutes to the Dean’s office.

Article IV: Meetings

The committee shall meet at least once each University academic semester and more often if necessary.

E. Faculty Affairs Committee

Article I: Objectives/Responsibilities

Section 1 **Objectives.** The objectives of this Committee shall be to maintain a faculty of excellence by making recommendations to faculty and to the Dean on matters related to:

- A. tenure;
- B. promotion;

- C. mentoring tenure track faculty;
- D. implementation of a faculty development program;
- E. implementing the peer review process for nursing faculty of the CONHS;
- F. selection of new faculty; and
- G. nomination of faculty awards by the CONHS or the University

Section 2 Responsibilities. The responsibilities of the committee include:

- A. mentoring of candidates for tenure and/or promotion as they prepare portfolios;
- B. making recommendations to the Policy & Procedure Committee about the tenure and promotion policy of the CONHS;
- C. pre-tenure and tenure review with appropriate recommendations pursuant to University, and CONHS policies;
- D. securing speakers and scheduling times for faculty development programs;
- E. assessing and making recommendations to the Dean when peer complaints are made;
- F. making recommendations to the Dean about hiring new faculty; and
- G. making recommendations to the Dean about faculty awards and or nominations.

Article II: Membership

Section 1 Faculty Members. The Dean shall appoint tenured & tenured track faculty members to serve on this committee. Only tenured faculty can vote on tenure and promotion decisions of the CONHS.

Section 2 Student Members. There are no student members because of the confidential nature of faculty affairs, tenure, promotion, and peer review.

Article III: Officers and Duties of Officers

Section 1 Officers. Officers shall include a chair and a secretary. The chair and secretary shall be elected by the Committee.

Section 2 Duties. Duties of officers shall be as follows:

- A. The chair shall:

- set the time and place of committee meetings and prepare an agenda for each;
- preside at meetings;
- vote;
- report committee proceedings and recommendations to the Dean;
- represent the Faculty Affairs Committee in communications with other committees, and administrators in the CONHS and the University;
- prepare written pre-tenure, tenure, and promotion recommendations;
- make recommendations to the Dean regarding the findings of the committee related to peer review hearings;
- make recommendations to the Dean about hiring new faculty;
- implement a professional development program;
- prepare a report of committee activities each academic year; and
- make recommendations on faculty awards.

B. The secretary shall:

- preside at meetings in the absence of the chair;
- maintain and publish records of committee meetings; and
- keep a continuing record of all proceedings;
- forward meeting minutes to the Dean’s office.

Article IV: Meetings

The committee will meet as necessary.

F. Admissions & Progression Committee

Article I: Objectives/Responsibilities

Section 1 Objectives. The objectives of this committee shall be to make recommendations to Faculty and the Dean regarding:

- A. admission of students to the CONHS;
- B. monitoring the progression and retention of students;
- C. facilitate collaboration between faculty and the Dean regarding admission, retention, and progression policies; and
- D. ensure fairness during appeal proceedings.

Section 2 **Responsibilities.** The responsibilities of the committee shall be to:

- A. perform admission, progression, and retention procedures and forward recommendations to the Dean;
- B. make recommendations to the appropriate Coordinator/Director & Dean about student petitions;
- C. evaluate recommendations from faculty regarding student progression and retention;
- D. maintain confidentiality;
- E. ensure withdrawal of a faculty member who has a perceived conflict of interest in an appeal procedure; and
- F. render a decision in appeal procedures.

Article II: Membership

Section 1 **Faculty Members.** The committee shall be composed of at least five (5) faculty members elected by the faculty, at the beginning of each academic year. There shall be at least one (1) faculty member from the BSN and MSN nursing faculty. There shall be at least one (1) faculty from the Communication Sciences & Disorder Program and at least one (1) faculty from the Kinesiology Non-Certification Program.

Section 2 **Student Members.** There are no student members because of the confidential nature of the subject matter of this committee.

Article III: Officers and Duties of Officers

Section 1 **Officers.** Officers shall include a chair and a secretary. The chair and secretary shall be elected by the committee. The secretary shall be elected by the committee.

Section 2 **Duties of Officers.** The duties of the officers shall include, but not be limited to, the following:

- A. The chair shall:
 - call meetings;
 - preside at meetings, including appeal proceedings;
 - vote;

- report recommendations and proceedings from the committee to the Faculty and the Dean;
 - receive feedback from the Dean and report it to the committee members;
 - represent the Admission & Progression Committee in communications with other committees, the Dean, Directors, and faculty;
 - prepare a report of committee activities each academic year.
- B. The secretary shall:
- preside at meetings in the absence of the chair;
 - keep minutes and maintain records of committee proceedings and publish these; and
 - maintain a continuing record of all proceedings; and
 - forward meeting minutes to the Dean’s office.

Article IV: Meetings

The committee shall meet at least once each academic semester prior to the admission of students for purposes of admission selections with additional meetings as necessary.

G. Simulation Committee

Article I: Objectives/Responsibilities

Section 1 Objectives. The objectives of the committee shall be to make recommendations to the faculty and the Dean on matters related to:

- A. purchase and maintenance of simulation and other learning technology equipment;
- B. faculty development to facilitate “best practices” in simulation and technology teaching/ learning methods; and
- C. establishing simulation and learning lab guidelines

Section 2 Responsibilities. The responsibilities of the committee include:

- A. reviewing information about simulation learning lab equipment available for purchase;
- B. attending seminars and presentations which highlight simulation and learning lab equipment;

- C. educating faculty on the use of simulation learning lab equipment and best practices; and
- D. working with faculty to develop guidelines and blueprint simulation learning lab scenarios according to best practice standards.

Article II: Membership

The committee shall be composed of at least five (5) faculty members elected by the Faculty as outlines in Article II. A, and four (4) students as outlined in Article II A. Students shall have voice but no voting privileges on Committees.

Article III: Officers and Duties of Officers

Section 1 Officers. Officers shall include a chair and a secretary. The chair and the secretary shall be elected by the Committee. The secretary shall be selected by the committee

Section 2 Duties. Duties of the officers shall be as follows:

- A. The chair shall:
 - set the time and place of committee meetings and prepare an agenda for each;
 - preside at meetings;
 - vote;
 - report committee proceedings to the faculty and the Dean;
 - represent the Simulation Committee in communications with other CONHS committees, the Dean and faculty; and
 - prepare a report of committee activities each academic year.
- B. The secretary shall:
 - preside at meetings in the absence of the chair;
 - maintain records of committee proceedings and publish these proceedings to the committee;
 - keep a continuing record of all proceedings; and
 - forward meeting minutes to the Dean’s office.

Article IV: Meetings

The committee shall meet at least once each University academic semester, with additional meetings called as necessary

H. Scholarship Committee

Article I: Objectives/Responsibilities

Section 1 Objectives. The objectives of the committee shall be to make recommendations to the faculty and the Dean regarding:

- A. awarding of scholarship funds to the students of the CONHS; and
- B. ensuring fairness of the distribution of scholarship monies

Section 2 Responsibilities. The responsibilities of the committee shall be to:

- A. review all applications of CONHS students who apply for scholarships
- B. recommend distribution of scholarship funds to students that met the criteria established by each donor
- C. maintain student confidentiality; and
- D. ensure withdrawal of a faculty member who has a perceived conflict of interest in awarding of scholarships.

Article II: Membership

Section 1 Faculty Members.

The committee shall be composed of at least five (5) faculty with representative from the BSN, MSN, and faculty of the Speech and Communication Sciences & Disorders Program (CSDO) and the Kinesiology Non-Certification Program (Kine) who are elected by the faculty at the beginning of each year.

Section 2 Student Members.

There are no student members because of the confidential nature of the subject matter of this committee.

Article III: Officers and Duties of Officers

Section 1 Officers.

Officers shall include a chair and a secretary. The chair and secretary shall be elected by the faculty.

Section 2 Duties of Officers.

The duties of the officers shall include, but not be limited to, the following:

A. The chair shall:

- call meetings;
- preside at meetings;
- call a vote of the committee;
- report recommendations and proceedings from the committee to the faculty and Dean;
- receive feedback from the Dean and report it to the committee members; and
- represent the Scholarship Committee in communications with other committees, the Dean, Coordinators, Directors, and faculty.

B. The secretary shall:

- preside at meetings in the absence of the chair;
- keep minutes and maintain records of committee proceedings and publish these;
- maintain a continuing record of all proceedings; and
- forward meeting minutes to the Dean's office.

Article IV: Meetings

The committee shall meet at least twice each academic semester prior to the admission of students for purposes of scholarship selections with additional meetings as necessary.

I. Testing Committee

Section 1: Objectives: The objectives of this committee shall be to make recommendations to the faculty and Dean on matters which:

- A. Ensure all periodical test questions given to students are formatted similar to the next generation NCLEX
- B. Ensure that the length of periodical tests given to student are sufficient to measure students' comprehension of course content
- C. Ensure that short course assignments and quizzes facilitates critical thinking among students.

- D. Ensure the supplemental course materials i.e. Shadow Health, HESI Adaptive Quizzing, Osmosis and other similar products subscribed in the nursing programs support student learning outcomes.

Section 2: Responsibilities. The responsibilities of the committee shall be to:

- A. Review all periodical test questions across all clinical nursing courses and ensure that these mirror those of current NCLEX and Next Generation NCLEX style questions.
- B. Make recommendations on types of nursing concepts that need to be focused in each nursing course.
- C. Make recommendations to faculty on types of assessments and teaching strategies that stimulate and facilitate critical thinking.
- D. Review and recommend supplemental instruction products that would best lead to student success in the program.
- E. Discuss recommendations in the Nursing Department meetings; submit recommendations to Nursing Chair and Nursing Dean.
- F. Submit meeting minutes to Dean's office.

Article II: Membership

Section 1 Faculty Members.

The committee shall be composed of at least one lead course faculty from each semester, the coordinator of the traditional BSN program, and the chair of the nursing department. Membership to this committee is appointed by the College Dean

Section 2 Student Members.

There are no student members because of the confidential nature of the subject matter of this committee.

Article III: Officers and Duties of Officers

Section 1 Officers.

Officers shall include a chair and a co-chair. The chair and co-chair shall be selected by the dean.

Section 2 Duties of Officers.

The duties of the officers shall include, but not be limited to, the following:

A. The chair shall:

- call meetings;
- preside at meetings;
- call a vote of the committee;
- report recommendations and proceedings from the committee to the faculty and Dean;
- receive feedback from the Dean and report it to the committee members; and

B. The co-chair shall:

- preside at meetings in the absence of the chair;
- keep minutes and maintain records of committee;
- maintain a continuing record of all proceedings; and
- forward meeting minutes to the Dean's office.

Article IV: Meetings

The committee shall meet at least twice each academic semester and as needed.

J. Commencement Committee

Article 1: Objectives/Responsibilities

Section 1: Objectives: The objectives of this committee shall be to make recommendations to the faculty and Dean on matters which:

- E. Ensure that student speaker to represent the CNHS is the best candidate based on the review of the committee members.
- F. Ensure that the content of the commencement speech is appropriate.
- G. Ensure that all students from all CNHS programs who meet the criteria are included in the selection.
- H. Ensure that Hooding events are planned and well-coordinated with CNHS staff and CNHS administration

Section 2: Responsibilities. The responsibilities of the committee shall be to:

- G. Review the commencement speech delivery for all qualified candidates
- H. Review the content and length of commencement speech of selected student speaker.
- I. Make recommendation to the Dean and University on selected student commencement speaker.
- J. Coordinate with staff and faculty regarding Hooding program.

Article II: Membership

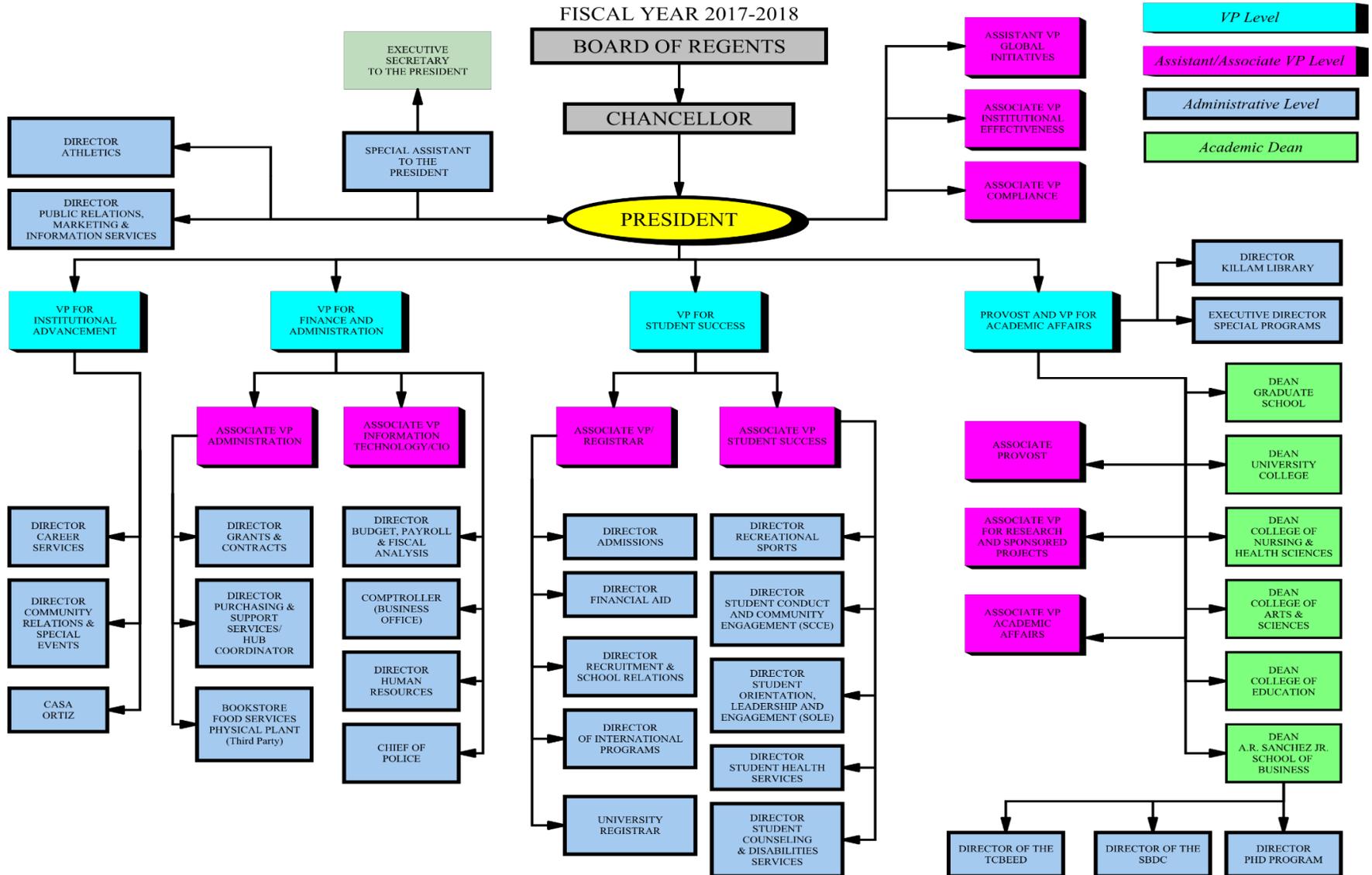
The committee shall be composed of CNHS faculty appointed by the Dean.

II. ORGANIZATIONAL CHARTS

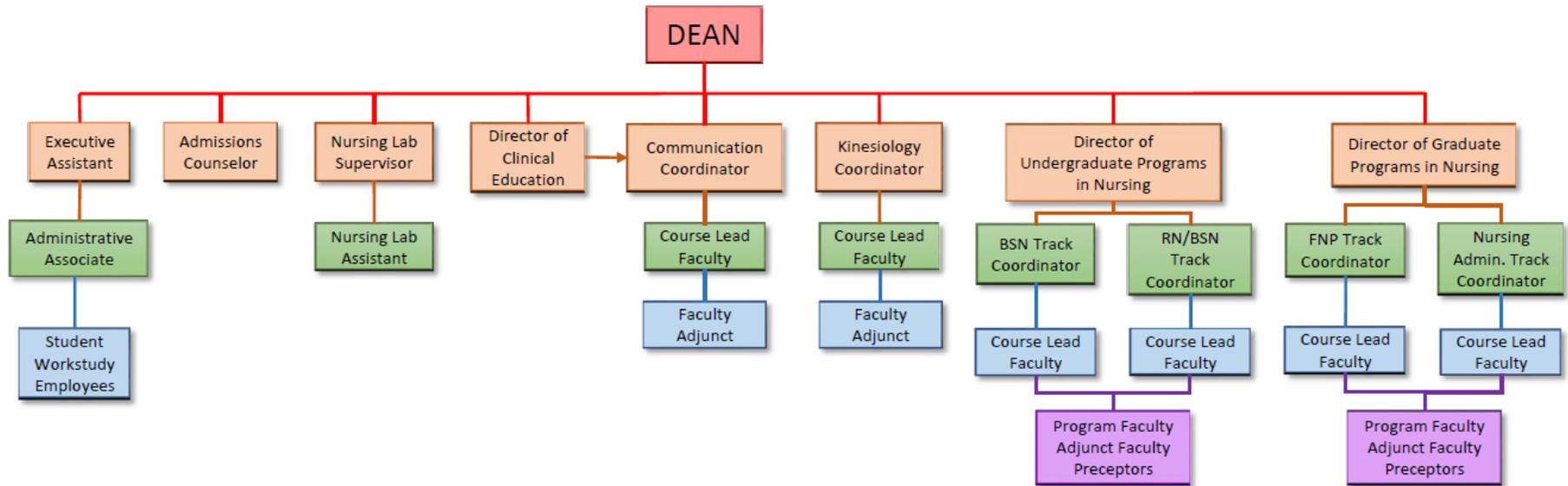
TAMU Functional Organizational Structure

TEXAS A&M INTERNATIONAL UNIVERSITY DEPARTMENTAL ORGANIZATIONAL STRUCTURE FISCAL YEAR 2017-2018

REVISED 10/9/17



College of Nursing and Health Sciences Organizational Structure



**III. CONHS MISSION AND PHILOSOPHY
CSON CONCEPTUAL FRAMEWORK**

A. Mission of the College of Nursing and Health Sciences

The mission of the College of Nursing and Health Sciences (CONHS) is to prepare health care providers to improve the well-being of complex and diverse populations.

B. Texas A&M International University Mission Statement

Texas A&M International University (TAMIU), a member of The Texas A&M University System, prepares students for leadership roles in an increasingly complex, culturally diverse state, national, and global society. TAMIU provides a learning environment built on a solid academic foundation in the arts and sciences. The University offers a range of baccalaureate and master's programs and the Doctor of Philosophy degree in International Business Administration. In addition, the University pursues a progressive agenda for global study and understanding across all disciplines.

Through instruction, faculty and student research, and public service, TAMIU improves the quality of lives for citizens of the border region, the state of Texas, and national and international communities.

C. Philosophy of the College of Nursing and Health Sciences

The faculty believe that the College of Nursing and Health Sciences (CONHS) of Texas A&M International University (TAMIU) is in a unique position, as a result of geographic location and institutional affiliation, to prepare health care providers to improve the well-being of complex, multicultural and diverse populations. Faculty believe that health care provider education must address a wide range of health beliefs in combination with dynamic political, social, economic and legal issues.

Health care providers have distinct educational needs and practice responsibilities. The faculty believe that health care provider education is a lifelong process that includes formal and informal components, and that teaching and learning are reciprocal activities during which faculty and students learn from each other. To effectively serve a diverse population amid rapid changes in health care systems and treatment, health care providers must develop critical decision making through enhanced creative and flexible problem solving skills. Diverse and changing health care needs can best be met by evidence-based practice based on theory and research. The faculty of the College of Nursing and Health Services (CONHS) are committed to educating outstanding clinicians, scholars, health advocates, mentors and leaders who will be instrumental in addressing the health care needs of communities. Strong communication skills are essential to enactment of these roles and health care providers must also be increasingly concerned with the ethical, legal, political and socioeconomic dimensions of their practice.

Health care professionals use the therapeutic process through which the health care provider engages individuals, patients, families and communities for the purpose of meeting health needs. Health care providers understand health and illness to be relative conditions that include life experiences and biological phenomena. Effective health care providers utilize a broad framework based on the humanities and the social and biological sciences. Furthermore, the

provider-patient relationship requires a broad understanding of diverse individuals and communities along with the therapeutic use of self.

D. Conceptual Framework of the Canseco School of Nursing

The conceptual framework of the Canseco School of Nursing (CSON) is portrayed as a pair of hands joined within a globe. The globe signifies the international context of the nursing program. The hands are joined in such a way that the individual fingers are intertwined and hidden within the clasp of the two hands.



At one level, the clasped hands represent the interaction between nurse and partner, be that patient, individual, family, population, community, or member of the interdisciplinary health care team. In this interchange, the fingers of the two hands become so intertwined that it becomes difficult to determine which fingers derive from which hand.

At another level, the two hands represent the two foci of the curriculum: expertise in clinical nursing care and nursing in partnership with communities. Together these two capacities can effect dramatic changes in the world with which they interact.

The hand clasp can be loosened somewhat to reveal individual fingers that represent the strands of the nursing curriculum, as described by the ten curricular objectives: (1) a broad base of knowledge; (2) cultural competence; (3) critical thinking and the research process; (4) the nursing process; (5) health promotion; (6) professional nursing roles; (7) societal trends; (8) law and ethics; (9) life-long learning; and (10) service to the profession and community.



The ten strands are defined within the context of the overall program philosophy of multicultural and community partnership, as follows:

1. A broad base of knowledge includes grounding in the natural and social sciences, the liberal arts as well as awareness of tradition and prior learning and experience.
2. Transcultural nursing and cultural aspects of care include awareness of individual and cultural variations in health status, human development, values, beliefs, attitudes,

history and environment and how these differences affect the need for and acceptance of nursing care within a global context.

3. Critical thinking includes the use of problem solving, clinical judgment/decision making and the research process to apply appropriate principles for the resolution of ever changing societal and professional problems.
4. The nursing process involves assessing, diagnosing, planning, implementing and evaluating evidenced-based and culturally-appropriate nursing care in collaboration with patients, families, populations, communities and other members of the health care team.
5. Health promotion strategies incorporate the three modes of Leininger's Transcultural Nursing Care theory (preservation, accommodation and re-patterning) to promote health of individuals/patients, families, populations and communities within the limits of culturally acceptable behaviors.
6. Professional nursing roles include those of provider of patient-centered care, health care team member/collaborator, leader/manager, educator, scholar, patient safety advocate, activist, mentor, and entrepreneur.
7. Societal trends involve analysis of the impact of evolving socioeconomic, political and demographic changes on nursing practice and health care systems.
8. Legal and ethical principles that guide professional nursing practice include adherence to the Texas Nurse Practice Act, standards of professional nursing, nursing codes of ethics, and statutory and case law.
9. Lifelong learning incorporates current evidence-based knowledge of nursing and health care standards.
10. Service to the profession and community includes participation in activities of nursing- and health- related organizations of the University and community.

E. CSON Program Objectives - BSN Program

During the course of studies, the student will:

1. Synthesize knowledge from the arts, humanities, sciences, and other disciplines in developing a framework for nursing knowledge and practice.
2. Explore the effect of variations in health status, developmental processes, values, beliefs and attitudes, culture, history, and environment on nursing care needs.
3. Use critical thinking, clinical judgment/decision making, problem-solving, and the research process in the development of nursing knowledge and practice.
4. Assess, diagnose, plan, implement, and evaluate evidenced-based and culturally-appropriate safe nursing care with patients, families, populations and communities.
5. Evaluate utilization of health promotion strategies in the development of nursing practice.
6. Develop professional nursing practice frameworks and roles, including the provider of patient-centered care, health care team member/collaborator, leader/manager, educator, scholar, patient-safety advocate, activist, mentor, and entrepreneur.
7. Evaluate the impact of evolving technological, socioeconomic, political and demographic changes on nursing practice and health care systems.
8. Adhere to legal and ethical principles in the development of professional nursing practice.
9. Articulate a commitment to life-long learning.
10. Participate in nursing- and health-related service opportunities.

F. CONHS Communication Sciences and Disorders Program Objectives and Mission

Program Mission

The mission of the Bachelor of Science in Communication Sciences and Disorders program is to provide culturally and linguistically diverse state of the art educational, and leadership experiences in speech-language and audiology. Through research, clinical and outreach experiences, the program seeks to enhance the quality of life for communicatively impaired citizens of the border region, the State of Texas, and national and international communities.

Program Learning Objectives

Graduates of the program will be able to:

1. Graduates will explain the normal aspects of speech-language and hearing as they relate to human communication.
2. Graduates will analyze trends in discipline specific professional practice and research principles.
3. Graduates will observe and critically evaluate clinical practice in communication disorders.
4. Graduates will develop effective discipline specific oral and written communication skills.
5. Graduates will apply foundational principles required to justify a basic knowledge of assessment and treatment of disorders related to speech-language and hearing.

G. CONHS Kinesiology (Non-Certification) Program Objectives

During the course of studies, the student will:

1. Explain and/or demonstrate the theoretical and/or scientific principles that can be used to address issues or problems in Kinesiology.
2. Apply knowledge and skills required to assess human performance related characteristics of individuals from diverse populations.
3. Evaluate and interpret the components of health related fitness.

4. Analyze and discuss current issues in health, physical activity and wellness.
5. Develop quality wellness program(s) for the individual and/or community.

H. CSON Master of Science in Nursing Program Objectives

Upon completion of the MSN program, graduates will:

1. Critically analyze, interpret and utilize appropriate knowledge, research and theories to meet the health care needs of diverse client populations across the lifespan.
2. Collaboratively plan the delivery of culturally sensitive health care with organizations and the community.
3. Contribute to the advancement of nursing profession through evidenced-based research and practice.
4. Synthesize the leadership management, negotiating, teaching/coaching and consulting roles to foster continual improvement in order to meet changing societal and environmental needs.
5. Operationalize ethical, legal, political, and economic principles in application to management of healthcare delivery across the lifespan.
6. Advocate for advanced nursing practice through a commitment to lifelong learning and community service.

IV. FACULTY AND STAFF JOB DESCRIPTIONS

TITLE: Dean, College of Nursing and Health Sciences

Job Description: The Dean of the College of Nursing and Health Sciences (CONHS) is the chief academic administrator of the College of Nursing and Health Sciences (CONHS) and all its programs. The Dean reports to the Provost and Vice President for Academic Affairs. The Dean works with highly motivated and creative faculty to pursue the University's mission of improving the quality of life for the border region and the nation through higher education.

Qualifications:

- Earned doctorate in Nursing or a doctorate in a related discipline with Master's degree in Nursing.
- Academic credentials commensurate with appointment at the rank of full professor with tenure.
- Record of excellence in teaching, scholarship and service.
- Licensed (unrestricted) as a Registered Nurse in the State of Texas.
- Minimum of three years teaching experience in a professional educational program.
- Successful evidence of knowledge and skills/abilities in administration (and budgetary experience) within a professional nursing educational program.
- Evidence of commitment to student-centered education.
- Experience with academic and professional accreditation processes and strategic planning.
- Established record of funded scholarship.
- Experience with fostering innovative community collaborations, including those with healthcare providers.
- Experience working with under-served and under-represented populations.

Responsibilities:

- Provide visionary leadership for achieving the College's mission and goals, including promotion of excellence in teaching, scholarship and service.
- Serve as the chief academic administrator of the College and the Canseco School of Nursing (CSON).
- Identify and pursue opportunities for College advancement through philanthropy and grantsmanship.
- Manage budget, personnel, space and other resources with efficiency and accountability.
- Coordinate and facilitate evaluation and reporting requirements to maintain state and national accreditation of programs. Foster an organizational culture that supports collegiality and professional development of students, faculty and staff.
- Advance the College's commitment to multi-culturalism among the faculty, staff and students.
- Promote scholarship, teaching, university service and community outreach with relevant programs, goals and activities.
- Perform other related duties as assigned.

TITLE: Nursing Department Chair

Job Description: Faculty member/administrator who serves as an instructional leader and manages the instructional and operational processes of the nursing department. In addition to teaching, a Department Chair's major responsibilities include, but are not limited to, personnel supervision; course and program development; and functions related to the planning and scheduling of course offerings. This position is for a 12-month appointment.

Qualification/Experience

- Education - a terminal degree at the doctoral level from an accredited university. Either the Master's or Doctoral Degree must be in Nursing;
- 2 or more years of clinical experience.
- Current unencumbered license to practice as a registered nurse in the state of Texas.
- A minimum of 2 years teaching experience.

Preferred Qualifications/Experience:

- Experience in a BSN program;
- Eligibility for tenure track and for rank at the Assistant or Associate Professor level at the time of hire;
- Knowledge and/or experience with nursing accreditation agencies (e.g. ACEN and CCNE) and the Texas Board of Nursing;
- Evidence of successful teaching and knowledge of learning principles for adult education, including nursing curriculum development, administration, and evaluation;
- Experience with distance and/or hybrid education;
- Experience developing new programs and working with healthcare partners.

Responsibilities

- Support the mission of Texas A&M International University and the College of Nursing and Health Sciences.
- Teaching, advising and administrative responsibilities that will vary and be contingent on programmatic needs.
- Develop and maintain an environment conducive to the teaching and learning processes.
- Provide leadership within the faculty for the development and implementation of the curriculum, including visioning for future programming and innovative curricular development.
- Oversee tasks involved with maintaining State approval and national accreditation (if applicable);
- Provide oversight for course/clinical/lab scheduling, and faculty workload;
- Actively contribute and take part in faculty and staff recruitment;
- Conduct faculty performance evaluations;

- Maintain relationships and represent the program with local, state, and regional organizations and committees.
- Serve on and participate in college and university committees.
- Assist in hiring and mentoring new full-time faculty and adjunct faculty.
- Mentor tenure-track faculty.
- Evaluate faculty. Faculty evaluations focus on scholarship, teaching, and service (to university and/or community).
- Provide leadership in program assessment.
- Develop and administer the department budget.
- Supervise Staff Assistant (who in turn supervises student workers)
- Mediate faculty-student and faculty-faculty conflicts.
- Represent department programs at the university and in the community.
- Teach one class in the fall and in the spring semesters and in one summer session; pursue research agenda.
- Other duties as designated by the Dean/Associate Dean of the CONHS.

TITLE: Health Science Department Chair

Job Description

Faculty member/administrator who serves as an instructional leader and manages the instructional and operational processes of the nursing department. In addition to teaching, a Department Chair's major responsibilities include, but are not limited to, personnel supervision; course and program development; and functions related to the planning and scheduling of course offerings. This position is for a 12-month appointment. Salary is commensurate with education and experience.

Essential Duties and Responsibilities:

- Support the mission of Texas A&M International University and the College of Nursing and Health Sciences.
- Teaching, advising and administrative responsibilities that will vary and be contingent on programmatic needs.
- Develop and maintain an environment conducive to the teaching and learning processes.
- Provide leadership within the faculty for the development and implementation of the curriculum, including visioning for future programming and innovative curricular development.
- Serve on and participate in college and university committees.
- Assist in hiring and mentoring tenure-track faculty, new full-time faculty, and adjunct faculty.
- Create or coordinate semester schedules and manage registration and enrollment.
- Evaluate faculty and staff yearly. Faculty evaluations focus on scholarship, teaching, and service.
- Provide leadership in program assessment.
- Develop and administer the department budget.
- Mediate faculty-student and faculty-faculty conflicts.
- Represent department programs at the university and in the community.
- Teach one class per term in the fall and spring semesters and in one class during the summer session; pursue research agenda.
- Other duties as designated by the Dean/Associate Dean of the CONHS.

Minimum Requirements:

- Education – earned doctorate in Public Health or a doctorate in a related discipline in Health Science from an accredited university;
- 2 or more years of teaching experience;
- Leadership experience in an undergraduate or graduate program;

- Eligibility for tenure or placement on tenure-track at the rank of Associate Professor or Professor at the time of hire;
- Evidence of successful teaching and knowledge of learning principles for adult education, curriculum development, administration, and evaluation;
- Experience and knowledge of online delivery methods, distance education and/or hybrid education;
- Excellent oral and written communication and interpersonal skills with the ability to work effectively with others; and
- Experience developing new programs and working with healthcare partners.

TITLE: Director, Graduate Programs in Nursing

Job Description: The Director is responsible for the implementation and evaluation of the Master of Science in Nursing programs. The Director reports to the Dean of the College of Nursing and Health Sciences.

Qualifications:

- Master's degree in Nursing.
- Earned doctorate in Nursing or related field.
- Academic credentials commensurate with appointment to the rank of associate professor.
- Five (5) years of clinical experience.
- Three (3) years of teaching experience.
- Previous experience as a department chair or as a program coordinator or similar administrative experience.
- Unrestricted/unencumbered license to practice registered nursing within the state of Texas.

Responsibilities: The MSN Director has all the responsibilities of the faculty plus all of the following responsibilities:

- Plan, develop, implement and evaluate all tracks within the MSN program.
- Recruit qualified faculty for the MSN program.
- Assign faculty teaching and clinical responsibilities in the MSN program.
- Mentor faculty in teaching and scholarship.
- Evaluate faculty performance.
- Maintain administrative oversight of the MSN programs.
- Communicate needs of the program to the Dean of the CONHS.
- Implement Master Evaluation plan for the graduate program.
- Analyze evaluation data for the master evaluation plan for the graduate program.
- Coordinate and communicate findings of the evaluation data to the CSON Assessment and Evaluation Committee.
- Prepare University assessment reports related to the MSN programs.
- Develop plan of action based on the evaluation data of the CSON Assessment and Evaluation Committee.
- Monitor national and state standards for curriculum on course revisions.

TITLE: Director, Undergraduate Programs in Nursing

Job Description: The Director is responsible for the implementation and evaluation of the Bachelor of Science in Nursing program. The Director reports to the Dean of the College of Nursing and Health Sciences (CONHS).

Qualifications:

- Master's degree in Nursing.
- Earned doctorate in Nursing or related field.
- Academic credentials commensurate with appointment to the rank of assistant or associate professor.
- Five (5) years of clinical experience.
- Three (3) years of teaching experience.
- Previous experience as a department chair or as a program coordinator of similar administrative experience.
- Unrestricted/unencumbered license to practice registered nursing within the state of Texas.

Responsibilities: The BSN Director has all the responsibilities of the faculty plus all of the following responsibilities:

- Plan, develop, implement and evaluate the traditional and transition (RN/BSN) tracks in the BSN program.
- Work with the admissions counselor to recruit and provide academic advisement to pre-nursing and nursing students.
- Recruit qualified faculty for the BSN program.
- Assign faculty teaching and clinical responsibilities in the BSN program.
- Mentor faculty in teaching and scholarship.
- Evaluate faculty performance.
- Maintain administrative oversight of the BSN program.
- Communicate the needs of the program to the Dean of the CONHS.
- Implement Master Evaluation plan for the undergraduate program.
- Analyze evaluation data from the master evaluation plan for the undergraduate program.
- Coordinate and communicate findings of the evaluation data to the CONHS Assessment and Evaluation Committee.
- Prepare University assessment reports related to the BSN programs.
- Develop plan of action based on the evaluation data of the CONHS Assessment and Evaluation Committee.
- Monitor national and state standards for curriculum for course revisions.

**TITLE: Director of Clinical Education in Communication Sciences
and Disorders Program**

Job Description: The Director is responsible for writing curriculum for clinical education, vetting local clinical externship sites and establishing working relationships with clinical instructors on campus, developing a business plan, operating budget, and client base to establish an on-campus speech and hearing clinic, and establishing and maintaining systems for tracking the knowledge and skills of students engaged in practicum in accordance with American Speech-Language-Hearing-Association standards.

Qualifications:

- Master's degree in speech-language pathology.
- Doctoral degree preferred.
- ASHA Certificate of Clinical Competence (CCC-SLP)
- Texas State License to practice speech-language pathology (or immediate eligibility).
- Five (5) years of clinical experience.
- Three (3) years of teaching experience.

Responsibilities: The Director has all the responsibilities of a faculty plus all the following responsibilities:

- Coordinates supervision of undergraduate student practicum and provide direct supervision of students as needed.
- Maintains clinical data and monitors student progress in clinical practice.
- Responsible for establishing and maintaining affiliation agreements with off campus placements.
- Ensures the quality of student clinical education and the ethical provision of clinical services in compliance with appropriate standards for program accreditation and student credentialing.
- Responsible for clinical education of undergraduate students.
- Responsible for teaching courses within the department.
- Collaborates with research/clinical faculty.
- Provides services to the department through collaboration, advising, and committee membership.

TITLE: Program Director Bachelor of Science Public Health (BSPH)

Job Description: The Undergraduate BSPH Program Director will work alongside the Dean and Associate Dean of the College of Nursing and Health Science (CONHS) as well as other members of the college's leadership team. The Director is responsible for program development, administration, evaluation, faculty oversight and development, scholarship, community service and teaching within the BSPH program, as well as collaboration with community partners.

Required Qualification:

A Masters in Public Health and earned doctorate in a health-related field, or a Doctor of Public Health (DrPH). A PhD in Public Health is preferred.

At least three years of teaching experience in a public health program with administrative experience of at least a year in higher education.

Evidence of leadership within the field of public health or a closely aligned discipline.

Preferred Experience and Education:

Academic experience with skills and experience with instructional and course design.

Experience advising and mentoring undergraduate and graduate students.

Excellent oral and written communication and interpersonal skills with the ability to work effectively with others.

Responsibilities: The Director of the Bachelor of Science in Public Health has the responsibilities of a faculty member plus the following responsibilities:

- Support the mission of Texas A&M International University and the College of Nursing and Health Sciences.
- Teaching, advising and administrative responsibilities that will vary and be contingent on programmatic needs.
- Work with faculty to develop syllabi and content for related courses.
- Collaborate with public health partners and staff so the presence of students and their activities are supportive of the agency/organization goals and needs.
- Evaluate student's progress in course work and clinical experiences.
- Maintain office hours to meet student needs and administrative duties.
- Advise students throughout their program of studies, as appropriate.
- Plan, develop, implement and evaluate the curriculum yearly.
- Plan course assignments to faculty and hire adjuncts when needed.
- Serve on and participate in college and university committees.
- Initiate and participate in scholarly and professional activities at the local, state and national levels.
- Provide service to the community through participation in the planning and presentation of various programs focused on promoting the increased well-being of the community.
- Demonstrate strong community engagement, working with community-based organizations and addressing health care disparities in public health.

- Demonstrate scholarship through grantsmanship and scholarly publication.
- Perform other duties as designated by the Dean/Associate Dean of the CONHS.

TITLE: RN/BSN Track Coordinator

Job Description: A faculty member who is assigned by the Dean responsibility for coordinating the educational progress of students in the RN/BSN (transition) track.

Qualifications:

- Full-time faculty member.

- Minimum of three (3) years experience advising and teaching in RN/BSN program.
- Knowledge of University (SACS) and nursing accrediting standards.

Responsibilities: The coordinator has all the responsibilities of the faculty plus all of the following:

- Work with the Director of the BSN program to coordinate educational progress of students in the RN/BSN track.
- Serve as the academic advisor and work with the CONHS admissions counselor for all RN/BSN track students.
- Work with each student and the CONHS admissions counselor to develop a degree plan.
- Recommend to the Director of Undergraduate Programs teaching assignments each semester for the courses in the RN/BSN program.
- Facilitate the collection of all evaluation data for the RN/BSN program.
- Work with the Chair of the Evaluation and Assessment Committee to analyze RN/BSN data and make recommendations for improvement.
- Work with the Curriculum Committee to monitor compliance with state and national competencies.
- Make recommendations to the Curriculum Committee regarding the revision or changes in the plan of studies based upon evaluation data.

TITLE: BSN Track Coordinator

Job Description: A faculty member who is assigned by the Dean the responsibility for coordinating the educational progress of students in the traditional BSN program.

Qualifications:

- Full-time faculty member.
- Minimum of three (3) years experience teaching in BSN program.
- Knowledge of University (SACS) and Nursing (TBON and ACEN) accrediting standards.

Responsibilities: The Coordinator has all of the responsibilities of the faculty plus all of the following:

- Facilitate the coordination of the educational progress of students in the traditional BSN program with the Director of the BSN program.
- Recommend to the Director of Undergraduate Programs teaching assignments each semester for the courses in the traditional BSN program.
- Facilitate the collection of all evaluation data for the traditional BSN program.
- Work with the Chair of the Evaluation and Assessment Committee and the Director of the BSN program to analyze traditional BSN data and make recommendations for improvement.
- Work with the Curriculum Committee to monitor compliance with state and national competencies.
- Make recommendations to the Curriculum Committee regarding the revision or changes in the plan of studies based upon evaluation data.

TITLE: Coordinator for MSN- Nursing Administration Program (NADM)

Job Description: A faculty member who is assigned the responsibility to teach assigned nursing courses and supervise student clinical experiences.

Qualifications:

- Earned doctorate in Nursing or related field with a Master of Science in Nursing Administration.
- Five (5) years of teaching nursing experience.
- Unrestricted/unencumbered license to practice registered nursing within the state of Texas.

Responsibilities:

- Teach assigned nursing courses and supervise student clinical experiences.
- Evaluate students' progress in course work and clinical experiences at the master's level.
- Complete all administrative aspects of courses taught and coordinate the MSN in Nursing Administration.
- Advise students throughout their program of study.
- Plan, develop, implement, and evaluate the curriculum.
- Serve on College and University committees.
- Assist in recruitment efforts.
- Assist Director/Chair in collecting and analyzing data for University Assessment reporting.
- Initiate and participate in scholarly activities at the local, state, and national levels.

TITLE: Coordinator for MSN- Family Nurse Practitioner Program (FNP)

Job Description: A faculty member who is assigned the responsibility to teach assigned nursing courses and supervise student clinical experiences.

Qualifications:

- Earned doctorate in Nursing or related field with a Master of Science as a FNP.
- Five (5) years of teaching nursing experience.
- Unrestricted/unencumbered license to practice registered nursing within the state of Texas.
- Current FNP certification and current clinical practice as an FNP.

Responsibilities:

- Evaluate students' progress in course work and clinical experiences at the master's level.
- Complete all administrative aspects of courses taught and coordinate the FNP Program.
- Advise students throughout their program of study.
- Plan, develop, implement, and evaluate the curriculum.
- Serve on College and University committees.
- Assist in recruitment efforts.
- Assist Director/Chair in collecting and analyzing data for University Assessment reporting.

TITLE: Coordinator of the Communication Sciences and Disorders Program

Job Description: A faculty member who is assigned by the Dean the responsibility for coordinating the educational progress of students in the communication sciences and disorders program.

Qualifications:

- Full-time faculty member with a terminal degree.
- Minimum of three (3) years experience teaching in a Communication Sciences and Disorders program.
- Knowledge of University (SACS), Knowledge and Skills Acquisition (ASHA) and other accrediting standards.

Responsibilities: The Coordinator has all of the responsibilities of the faculty plus all of the following:

- Facilitate the coordination of the educational progress of students in the communication sciences and disorders program.
- Recommend to the Dean of the CONHS teaching assignments each semester for the courses in the traditional communication sciences and disorders program.
- Facilitate the collection of all evaluation data for the communication sciences and disorders program.
- Work with the Chair of the Evaluation and Assessment Committee to analyze communication sciences and disorders student data and make recommendations for improvement.
- Work with the Curriculum Committee to monitor compliance with state and national competencies.
- Make recommendations to the Curriculum Committee regarding the revision or changes in the plan of studies based upon evaluation data.

TITLE: Coordinator of the Kinesiology (Non-Certification) Program

Job Description: A faculty member who is assigned by the Dean the responsibility for coordinating the educational progress of students in the Non-Certification Kinesiology program.

Qualifications:

- Full-time faculty member.
- Minimum of three (3) years experience teaching in a Kinesiology program.
- Knowledge of University (SACS) and other accrediting standards.

Responsibilities: The Coordinator has all of the responsibilities of the faculty plus all of the following:

- Facilitate the coordination of the educational progress of students in the non-certification kinesiology program.
- Recommend to the Dean of the CONHS teaching assignments each semester for the courses in the traditional kinesiology program.
- Facilitate the collection of all evaluation data for the kinesiology program.
- Work with the Chair of the Evaluation and Assessment Committee to analyze non-certification kinesiology student data and make recommendations for improvement.
- Work with the Curriculum Committee to monitor compliance with state and national competencies.
- Make recommendations to the Curriculum Committee regarding the revision or changes in the plan of studies based upon evaluation data.

TITLE: Full-Time Nursing Faculty

Job Description: The faculty of the school of nursing have as their primary responsibility, the teaching of assigned nursing courses each semester and the provision of appropriate clinical supervision in a variety of settings. Faculty are expected to engage in scholarship and service. Service includes serving on the CONHS, University, and professional/community committees.

Qualifications:

- Master's degree in Nursing.
- Earned doctorate in Nursing or related field preferred.
- One (1) year of teaching experience (preferred).
- Five (5) years of clinical nursing experience.
- For those faculty members who are advanced practice nurses, maintain and meet all certification requirements for their specialty.
- Unrestricted/unencumbered license to practice registered nursing within the state of Texas.

Responsibilities:

- Teach assigned nursing courses.
- Supervise student clinical experiences.
- Evaluate students' progress in course work and clinical experiences.
- Complete all administrative aspects of courses taught.
- Maintain office hours as required by academic teaching load, but not less than six (6) hours per week.
- Advise students throughout their program of studies as appropriate.
- Plan, develop, implement and evaluate the curriculum as appropriate.
- Serve on and participate in college and university committees.
- Initiate and participate in scholarly and professional activities at the local, state and national levels.
- Provide service to the community through participation in the planning and presentation of various programs focused on promoting the increased well-being of the community.

TITLE: Part-Time (Adjunct) Nursing Faculty

Job Description: To meet student demand for nursing courses and to comply with state and national standards part-time faculty may be used in the CONHS.

- Adjunct Faculty positions are temporary appointments, assigned per semester and on an as-needed basis.

Qualifications:

- Master's degree in Nursing.
- An unencumbered, unrestricted nursing license in the State of Texas.
- An earned doctorate in the discipline (or closely related field) is preferred.
- Previous teaching experience at the collegiate level is preferred.
- Prior relevant nursing experience is preferred.

Responsibilities:

- May teach up to nine (9) semester credit hours within the required discipline at clinical or on campus sites or online as dictated by student demand.
- Hold office hours and assist students as needed.

TITLE: Full-Time Communication Sciences and Disorders Program Faculty

Job Description: The faculty of the communication sciences and disorders program have as their primary responsibility, the teaching of assigned communication sciences and disorders courses each semester and the provision of appropriate clinical supervision in a variety of settings. Faculty are expected to engage in scholarship and service. Service includes serving on the CONHS, University, and professional/community committees.

Qualifications:

- Master's degree in Communication Sciences and Disorders.
- Earned doctorate in Communications Sciences and Disorders or doctoral degree in Audiology.
- One (1) year of teaching experience (preferred).
- Five (5) years of clinical experience with pediatric and/or adult clients.
- Be able to obtain Texas licensure for speech-language pathology or audiology.
- ASHA certification is preferred.

Responsibilities:

- Teach assigned speech-language pathology or audiology courses.
- Supervise student clinical experiences.
- Evaluate students' progress in course work and clinical experiences.
- Complete all administrative aspects of courses taught.
- Maintain office hours as required by academic teaching load, but not less than six hours per week.
- Advise students throughout their program of studies as appropriate.
- Plan, develop, implement and evaluate the curriculum as appropriate.
- Serve on and participate in college and university committees.
- Initiate and participate in scholarly and professional activities at the local, state and national levels.
- Provide service to the community through participation in the planning and presentation of various programs focused on promoting the increased well-being of the community.

TITLE: Full-Time Kinesiology Faculty

Job Description: The faculty of the non-certification kinesiology program have as their primary responsibility, the teaching of assigned non-certification kinesiology courses each semester and

the provision of appropriate supervision of students in a variety of settings. Faculty are expected to engage in scholarship and service. Service includes serving on the CONHS, University, and professional/community committees.

Qualifications:

- Master's degree in kinesiology.
- Earned doctorate in kinesiology or related field preferred.
- One (1) year of teaching experience (preferred).
- Five (5) years of kinesiology experience.
- For those faculty members who are certified in kinesiology, maintain and meet all certification requirements for their specialty.

Responsibilities:

- Teach assigned courses.
- Supervise student clinical experiences if appropriate.
- Evaluate students' progress in course work and clinical experiences.
- Complete all administrative aspects of courses taught.
- Maintain office hours as required by academic teaching load, but not less than six hours per week.
- Advise students throughout their program of studies as appropriate.
- Plan, develop, implement and evaluate the curriculum as appropriate.
- Serve on and participate in college and university committees.
- Initiate and participate in scholarly and professional activities at the local, state and national levels.
- Provide service to the community through participation in the planning and presentation of various programs focused on promoting the increased well-being of the community.

TITLE: Clinical Nursing Preceptor

Job Description: The clinical preceptor works directly with a designated faculty member to determine student learning needs and assignments. The preceptor guides, facilitates, and monitors the student in achieving clinical objectives and supervises the student's performance of skills and nursing activities to ensure safe practice. The clinical preceptor reports to the faculty member designated for the specific course.

Qualifications:

- An advanced practice nurse, a physician or other health care professional acceptable to the BON.
- Appropriate unrestricted/unencumbered license to practice within the state of Texas (if a license is required).
- Engaged in current practice.

Responsibilities:

- Comply with the written assignments between the faculty, the preceptor and the affiliating agency that delineate the functions and responsibilities of the parties involved.
- Adhere to written clinical objectives specified for each student experience.
- Communicate regularly with the designated faculty member and the student for the purpose of monitoring and evaluating learning experiences (The designated faculty member is responsible for the student's learning experience).
- Supervise student clinical learning experiences without the physical presence of the designated faculty member in the affiliate agency or clinical practice setting (The faculty member must be readily available by telephone, pager, or email).
- Evaluate the student's performance in the clinical setting.
- Provide feedback to the student's faculty member regarding student's performance in the clinical setting.

TITLE: Teaching/Research Assistant

Job Description: Teaching/Research Assistants work under the supervision of a faculty member. The designated faculty member will monitor and evaluate teaching/research experiences.

Qualifications:

- Possesses the expertise to function effectively and safely in the designated area of teaching/research.

Responsibilities:

- Responsible to the supervising faculty member of the assigned teaching/research.
- Attends teaching/research-related meetings.
- Participates in outcome and evaluation methods.
- Research Assistants may input data into statistical programs.
- Participates in data collection and assessments as directed by the faculty member.
- Demonstrates professionalism related to confidentiality of records and information.
- Teaching assistants will provide tutoring as assigned.

TITLE: Nursing Laboratory Supervisor

Job Description: Nursing Laboratory Supervisor is responsible for the general daily operation of the nursing skills lab, Simulation Laboratory, learning resource center and computer lab.

Qualifications:

- Bachelor's degree.
- Three (3) or more years medical, nursing or other health related field.
- One (1) or more years experience as a supervisor/manager in a medical or health related field.
- Possess organizational skills, time management skills and competency in scheduling.
- Interact effectively with students and university personnel.
- Ability to communicate effectively orally and in writing.
- Ability to interact effectively and professionally with students, faculty and University personnel.
- Ability to troubleshoot technological issues.
- Ability to organize information from multiple sources and multi-task.
- Position requires a flexible schedule (days/evenings as needed).

Responsibilities: The supervisor is responsible to the Dean of the School of Nursing for the following duties:

- Identify and assist faculty to implement effective ways to increase the use of simulation in nursing education.
- Work collaboratively with the faculty in developing writing, programming, and implementing simulation activities.
- Manage all inventory and supplies for simulation activities and nursing skills labs.
- Make recommendations for improvements, equipment purchase, and supplies needed to improve simulation/lab needs.
- Maintain schedule of nursing labs, computer lab, and simulation labs.
- Oversee the setup and breakdown of simulation and skills labs.
- Insures all supplies and equipment are available and in working condition.
- Oversee the maintenance and repair of manikins and other equipment in the simulation and nursing labs.
- Supervise the Nursing Lab Assistant.
- Maintain confidentiality related to student information and simulations.
- Perform other related duties as assigned by the Dean.

TITLE: Nursing Laboratory Assistant

Job Description: Functions as an assistant to the Nursing Laboratory Supervisor.

Qualifications:

- Associate degree
- Two (2) or more years experience in a healthcare related environment.
- Ability to communicate effectively orally and in writing.
- Possess excellent time management skills.
- Ability to multitask and work independently.
- Ability to troubleshoot IT related issues and/or suggest resolution.
- Ability to interact effectively and professionally with the students, faculty and University personnel.
- Possess computer skills and knowledge, specifically in Microsoft Office or similar software.
- Position requires a flexible schedule (days/evenings as needed).
- Must be able to lift items over 40 lbs.

Responsibilities:

- Reports directly to the Nursing Laboratory Supervisor.
- Assist in set up, running and breakdown of simulation labs and any require supplies.
- Maintenance and repair of nursing manikins requiring minimal assembly and use of common tools.
- Operate simulation equipment in Simulation Laboratory.
- Computer lab assistance as needed
- Perform other related duties as assigned.

TITLE: Admissions Counselor

Job Description: The Admissions Counselor is responsible for admissions, registration and academic advising for prospective and current students of the College of Nursing and Health Sciences. The Advisor inputs admission data and provides the Recruitment, Admission and Progression Committee with student admission rankings each semester. The Advisor also represents the College of Nursing and Health Sciences (CONHS) at University recruitment activities.

Qualifications:

- Bachelor's degree.
- Two (2) or more years experience in computer and data management, university/college student service, customer service or other position of responsibility.
- Proficient computer knowledge, including word processing and spreadsheets.
- Ability to communicate effectively orally and in writing.
- Ability to interact effectively and professionally with the general public.
- Experience working with students and managing student records.

Responsibilities:

- Perform admissions, registration and academic advising for prospective and current students of the CONHS.
- Provide academic advising to the students in the CONHS.
- Process admission and registration of students in the nursing program.
- Coordinate with other university departments to facilitate nursing student's admission.
- Examine and assess college transcripts and accurately compute grade point averages.
- Monitor student academic success.
- Work collaboratively with, as well as provide support to, the School of Nursing Admission and Progression Committee (APC).
- Maintain, track and report student outcomes (admission, progression, retention and graduation)
- Maintain confidential student records
- Responsible for maintaining and reporting student immunizations and other required criteria in the clinical area
- Participate in recruitment functions
- Organize and conduct presentations regarding admissions and academic information of the CONHS.
- Perform other related duties as assigned

TITLE: Executive Assistant

Job Description: The Executive Assistant, under general supervision, provides administrative support to high level administrators for an executive. Work involves coordinating high-level operations of an agency or division. Exercises discretion and independent judgment with respect to matters of significance.

Qualifications:

- Bachelor's degree in applicable field or equivalent combination of education and experience.
- Three (3) years of related administrative experience to an administrator or other responsible position.

Responsibilities:

- Provides administrative support to high level administrators for an executive.
- Coordinates high-level operations of an agency or division.
- Exercises discretion and independent judgment with respect to matters of significance.
- Coordinates calendars, meetings, and other activities.
- Provides technical guidance and advice on administrative matters to agency executives, management, or staff.
- Coordinates and monitors action items and assignments made by the administrator.
- Drafts and manages correspondence and communications, schedules appointments, manages calendar, and coordinates travel.
- Prepares travel arrangements and itineraries, and may approve and process travel reimbursements.
- Prepares notices or agendas for meetings.
- Assists in compiling reports, maintains records and other documents, and coordinates special events.
- Communicates policies, procedures, standards, and methods as well as interprets policies, rules, and regulations.
- Responds to inquiries, resolving problems or inquiries.
- Reviews administrative practices and programs and assists in formulating policies.
- Plans and coordinates logistical and administrative support for events, meetings or other special functions and provides on-site support.
- Researches, compiles, and applies information, making evaluative judgments on appropriate data to use.
- May serve as an office manager.
- Responsible for fiscal records management.

TITLE: Administrative Associate

Job Description: The Administrative Associate works under general supervision and provides complex administrative support work.

Qualifications:

- High school graduate or equivalent with post-secondary education.
- Two (2) or more years experience in secretarial or other position of responsibility.
- Experience in a supervisory role.

Responsibilities:

- Works under general supervision and provides complex administrative support work.
- Performs word processing, desktop publishing, presentation and data management activities, and assists staff with the use of these applications.
- Composes correspondence, reports, publications and presentations, including editing and proofreading.
- Creates and maintains spreadsheets and databases.
- Researches and analyzes administrative requirements for specific programs or projects.
- Provides technical information regarding administrative procedures, services or programs.
- Performs mail services as needed.
- Applies, interprets, and communicates policies and procedures and serves as a resource for answering questions regarding policies.
- Maintains a variety of fiscal, administrative and academic records.
- Posts information to agency records and modifies forms or records.
- Verifies, processes, and reviews forms, reports and other documents.
- Makes arrangements for meetings, appointments, conferences and travel.
- May assist in setting up meetings, seminars and other special events to include requesting facilities, equipment and food.
- Maintains office supplies and equipment.
- Maintains office reference materials including online office materials.
- May coordinate activities and assign work to student workers.
- May participate in the hiring training and supervision of student workers and other support staff.

TITLE: Student/Work Study Employee

Job Description: Perform general office duties including but not limited to answering telephones, typing, filing, and photocopying. Provide clerical support to University employees which may include conducting background research, maintaining records, and/or assisting with special projects related to the department.

Qualifications for Student Employees (Non-need based):

- Must be enrolled or pre-registered for at least six (6) semester credit hours during the fall and spring semesters and must have and maintain a minimum institutional overall GPA of 2.0.
- If graduate student, must be enrolled or pre-registered for at least six (6) semester credit hours during the fall or spring semesters and must have and maintain a minimum GPA of 3.0.
- All students (undergraduate and graduate) must be enrolled for at least three (3) semester credit hours during the summer term in which the work is to be done; be admitted for the fall semester; and/or have been enrolled as a student the prior semester/term and have a reasonable expectation of returning the next semester/term.

Qualifications for Student Employees (Need based):

- Must be enrolled for at least six (6) semester credit hours during the fall and spring semesters in a degree-granting course of study and must have and maintain an overall minimum institutional GPA of 2.0 (3.0 for graduate students).
- Must be a U.S. Citizen or an eligible non-citizen.
- Must demonstrate financial need.
- Must not be in default or delinquent on any loan plan with the university, state, or federal government.
- Must have a current and complete folder with the OFA (Office of Financial Aid).
- Must meet all other requirements as stated in the SAP (Satisfactory Academic Progress) policy (see OFA web site for most current and updated SAP requirements).

Responsibilities:

- Assist in performing receptionist duties by assisting individuals, receiving/ routing calls and directing all forms of inquiries.
- Provide clerical support to the CONHS which includes using copy machine, fax, and perform basic functions using computer/office software.
- Follow written/oral instruction with minimal supervision.
- Run errands within campus.
- Maintain confidentiality.
- Perform other duties as assigned.

V. FACULTY POLICIES AND PROCEDURES

**Note: CONHS delineates a policy and procedure that is applicable to all faculty in the CONHS.
CSON delineates a policy and procedure applicable to only CSON faculty.**

CONHS Employment Requirements

POLICY:

In order to ensure compliance with TAMIU employment requirements, TBON criteria and ACEN standards, potential employees must submit the necessary information to validate that the individual meets position requirements.

PROCEDURE:

All prospective faculty of the College of Nursing and Health Sciences (CONHS) are expected to submit the following documentation:

1. All faculty in the COHNS must meet the university, state and national standards for employment.
 - a. University Application for Faculty Employment
 - b. Official transcripts
 - c. Current curriculum vitae
 - d. Current unencumbered Texas RN license if appropriate
 - e. Names and contact information of three references
 - f. Criminal history investigation
2. Other documentation may be needed for clinical assignments, as follows:
 - a. All of the documents on the “New Employment Checklist” are required for the personnel file and/or by clinical learning sites.
 - b. Nursing faculty will be verified by the CONHS with the Texas Board of Nursing for Texas Registered and Advance Practice Nursing Licenses. The applicant should not mail duplicate copies, but provide the license type(s), number(s), expiration date(s), full name and Social Security number so that the verification process can be completed.
 - c. The same information provided for the nursing license(s) will be needed to verify certification(s) including the type of certification and the name of the certifying agency.
 - d. Professional Liability Insurance is provided for any assignment in the teaching role via a group student policy. Any additional coverage required for faculty practice is the responsibility of the individual faculty member. The University does not provide any insurance coverage for faculty practice.
 - e. A Texas Driver’s License is required to sign out and drive University vehicles. Due to the increasing number of outreach programs and out of town clinical, access to a reliable vehicle is important.
 - f. A list, which is updated annually, of immunizations as required by clinical agencies, is provided in the CSON Student Handbooks. The usual childhood immunizations, in addition to Hepatitis B, varicella and tuberculin testing, are required for all CSON nursing faculty.
 - g. It is the applicant’s responsibility to request official copies of all transcripts carrying the award of your initial professional (registered) nursing degree or diploma and all graduate degrees.

CONHS Employee Orientation

POLICY:

The Lead Faculty in each course will serve as mentor for new faculty members. The mentor will arrange and schedule orientation activities as appropriate. This is supplemental to the general TAMIU orientation that each new faculty member receives from the University.

PROCEDURE:

1. Lead Course Faculty will serve as mentors for new faculty members. They will:
 - a. Provide tours of the campus and off-campus facilities;
 - b. Obtain a course syllabus and textbooks for the new faculty member and assist in clarifying information about the course, classrooms, labs and clinical sites.
 - c. Explain the major concepts in the curriculum, including core courses.
 - d. Give guidelines on how to use equipment.

2. The administrative assistant or designee will:
 - a. Obtain and maintain office information, including an email address, a long distance code, office equipment and business cards;
 - b. Demonstrate how to use the fax and copy machines.

CONHS Travel Reimbursement for Faculty Development/CONHS Related

POLICY:

Reimbursement will be given for travel for CONHS related business. Travel to seminars, workshops, or conferences may be reimbursed to the faculty. Travel for conferences and seminars must enhance the teaching effectiveness of the faculty. The approval of the Dean of the CONHS is required prior to travel to the event.

PROCEDURE:

1. The funds for CONHS related travel will be allocated by the Dean. Certain hotels/ motels within the State of Texas offer a "State Rate" for state employees on official state business. State employees are required to use these facilities, when available.
2. Failure to use an approved hotel/ motel, rental car, etc., may result in the refusal by the State to reimburse the employee for travel.
3. All travel regulations are based on state and system guidelines. These regulations may be found on the TAMIU website at <http://www.tamtu.edu/comptroller/>.
4. Employees must check with their department secretary for internal department procedures.

CONHS Telephone/Long Distance

POLICY:

University telecommunications facilities must be used by faculty for official CONHS business. A long distance access code is assigned to faculty members by the University. This code is used for long distance calls to conduct CONHS business. All long distance calls using the access code are charged to the CONHS account. The Dean of CONHS is responsible for requesting access codes for new faculty members.

PROCEDURE:

1. Contact your department secretary for procedure and approvals.
2. All requests must be approved by CONHS Dean.

CONHS Employee Sick Leave

POLICY:

The Texas A&M University System provides sick leave/vacation leave to eligible employees in accordance with state law.

PROCEDURE:

1. Contact TAMIU Office of Human Resources for procedure, eligibility and further information.

CONHS Professional Development Plan

POLICY:

In those rare cases in which a faculty member's evaluation shows deficiencies that are deemed egregious, the chair or director must immediately notify the faculty member in writing and work with the faculty member to remediate those deficiencies. Should those "egregious deficiencies" not be remedied by the time of the annual evaluation, the chair, with the approval of the Dean, may require that the faculty member immediately engage in the Professional Development Plan process outlined below. For purposes of this process, "egregious deficiencies" shall be defined as behavior that compromises the learning environment for students and/ or faculty.

If tenured faculty members or clinical faculty receive two consecutive annual performance reviews that indicate serious deficiencies or if on a single annual evaluation, they have been found to have "egregious deficiencies" requiring immediate remediation, they must undergo a professional review. When serious and mitigating circumstances exist for faculty members who would otherwise be required to undergo review, department or division chairs (director) may request in writing from their Dean or director's approval of an exemption from the professional review process, with final approval by the Provost and notification of the President. The purposes of performance reviews will be to identify and acknowledge patterns of seriously deficient performance, to create plans of action to eliminate these deficiencies, and to monitor the progress of faculty members as they implement their Professional Development Plans. University Faculty Handbook: http://www.tamtu.edu/senate/documents/handbookcomplete_2017.pdf.

PROCEDURE:

The professional review process must follow the University procedure:

1. First, department or Dean will notify affected faculty in writing that they are subject to professional review. They will also explain in writing the details of the process.
2. Second, an ad hoc professional review committee of three faculty members will be created by the Dean with the consultation and agreement of the program director and the affected faculty member. If the Dean, program director and faculty member cannot come to an agreement on the composition of the committee, then the following guidelines must be followed by the Dean in appointing a committee: two of the members must be selected from the college's promotion and tenure committee, one selected by the Dean and one selected by the faculty member and the final member of the committee will be selected by the Faculty Senate President (or by the Faculty Senate Vice-President if the Faculty Senate President has a conflict of interest).
3. Third, within one month of being notified of the need for professional review, the faculty member will prepare a dossier to present to the committee. The dossier should contain all

documents and supporting material that the faculty member wishes the professional review committee to consider. While it may contain much more, at the very least the dossier will include a current curriculum vitae, a teaching portfolio (with the exception of librarians), a description of recent university and community service and a description of recent scholarly or creative work.

4. Fourth, the program director will add to the dossier any additional material that the program director considers relevant to the development of the Professional Development Plan for the faculty member under review. The faculty member under review may examine these materials and respond in writing prior to their submission to the ad hoc professional review committee; the faculty member may also add additional materials to the dossier at any time during the review process.
5. Fifth, within one month of receiving the complete dossier, the ad hoc professional review committee will review it, meet with both the faculty member under review and the program director, and issue a report. The report must be submitted in writing to the faculty member, the program director, the Dean and the Provost. The report may reach one of three possible conclusions:
 - a. **No Deficiencies.** The committee reports that it identified no deficiencies of any consequence. The committee's report negate and supersede the "unsatisfactory" prior annual review of the faculty member.
 - b. **Some Deficiencies.** The committee reports that it did identify some deficiencies of consequence but that these deficiencies were not substantial or chronic, much less egregious, and thus no Professional Development Plan is required. The committee report, however, must describe these deficiencies, and it is expected that the faculty member and the program director will work together to ensure that these minor deficiencies do not become serious and do not result in "unsatisfactory" evaluations in the future.
 - c. **Serious Deficiencies.** The committee reports that chronic or substantial deficiencies do indeed exist and must be addressed by a Professional Development Plan. The report must elaborate on the nature of these deficiencies.
6. Sixth, within two (2) weeks of receiving the committee's recommendation, the Provost must accept, reject or modify the findings of the committee and submit back to the committee, the program director and the faculty member a written report that announces and justifies his or her ruling.
7. Seventh, within two weeks of the Provost's issuing of a ruling that "serious deficiencies" exist, the ad hoc professional review committee must meet with the faculty member and the program director to begin working to create a Professional Development Plan to submit to the Dean and the Provost for approval.

8. The Professional Development Plan describes in detail how the faculty member will remedy the specific deficiencies identified by the ad hoc professional review committee. The written plan must be created with collaboration of the ad hoc professional review committee, the faculty member, the program director and the Dean and it should meet the needs of the faculty member, the department and the college or school. It is the responsibility of the faculty member to cooperate fully in the development of this plan and to make a good faith effort to implement it. It is the responsibility of the committee, the program director and the Dean to insure that the plan is designed to be a meaningful and effective means of returning the faculty member to full professional productivity.
9. Plans must be tailored to the specific circumstances of the faculty members for whom they are developed, but all plans must: (1) describe specifically the deficiencies to be addressed by the plan; (2) identify specific goals that must be met to remedy the deficiencies; (3) describe what the faculty member will do to meet these goals; (4) establish intermediate and final time lines for the completion of the activities necessary to meet the goals of the plan; (5) identify the specific criteria to be used in assessing the faculty member's annual progress toward meeting the goals of the plan; and (6) identify the resources that the University will devote to the support of the faculty member's efforts to complete the plan.
10. In general, Professional Development Plans may allow up to three (3) years for the faculty member to return to full productivity. However, in those cases in which the faculty member's deficiencies are deemed "egregious", the plan may require reasonable improvement within as short a time as one year. The faculty member and the program director will meet at the end of each semester to discuss the faculty member's progress toward fulfilling the Professional Development Plan. At the end of the academic year, the program director will submit a written progress report to the ad hoc professional review committee, the Dean and to the Provost. A copy of the written report must be sent to the faculty member. The regular annual evaluation of the faculty member in question should draw upon the findings of the progress report.
11. As soon as the faculty member has completed the Professional Development Plan, or by the deadline established by the plan, the program director must write a final report to the faculty member, the ad hoc professional review committee, the Dean and the Provost. Because it is the commitment of the faculty and administrators involved in the process to support faculty members fully in their efforts to return to full productivity and thus benefit not only the faculty member but the entire university, it is expected that in all but a very small minority of cases the final report will be positive. These findings become final upon certification by the Provost.
12. On those rare occasions when a faculty member has not been successful in completing the Professional Development Plan, the program director will consult with the ad hoc professional review committee, the Dean and the Provost prior to writing a negative report. If the committee, the program director, the Dean and the Provost agree that the faculty member's failure to meet the goals of the plan are minor and likely temporary, then they

may grant the faculty member an additional year to remedy the remaining deficiencies. If they deem the faculty member's failure of such seriousness that they constitute separately good cause for dismissal under all current policies regarding tenure, academic responsibility and academic freedom, then the Provost may initiate dismissal proceedings. These finding become final upon certification by the Provost.

Appeals

1. If a faculty member disagrees with the findings of "serious deficiencies" by the ad hoc professional review committee, the faculty member may appeal the decision to the Dean first and then the Provost.
2. When a faculty member, program director and the Dean cannot agree on a Professional Development Plan, then the University Promotion, Tenure and Retention Committee will intercede, mediate the dispute and issue a draft of the plan for the review and approval of the Provost.
3. If at any stage in the review process a faculty member believes that the provisions of the process are being applied unfairly, the faculty member may file a grievance as outlined in GRIEVANCES section of the Faculty Handbook.

CSON Certification(s) for Nursing Faculty

POLICY:

All clinical faculty members shall maintain current certification(s) as required by their clinical agencies.

PROCEDURE:

1. The Dean's office checks for current RN and or APRN license if appropriate using the Texas Board of Nursing (TBON) website for full-time and part-time faculty. The dean's office will monitor any license that expires during the academic year.
2. The Dean's office checks for current RN and or APRN license using the TBON website for adjunct faculty. The Dean's office will monitor any license that expires during the semester.

CSON Nursing Peer Review

Background

This Nursing Peer Review Policy is established pursuant to the Texas Nursing Practice Act (NPA) and all provisions of this policy are meant to comply with the NPA and all the rules and regulations promulgated to implement the provisions of the act.

POLICY:

Peer Review means the evaluation of nursing services, the qualifications of a nurse, the quality of patient care rendered by a nurse, the merits of a complaint concerning a nurse or nursing care and a determination or recommendation regarding a complaint. This includes:

- The evaluation of the accuracy of a nursing assessment and observation and the appropriateness and quality of the care rendered by a nurse;
- A report made to a nursing peer review committee concerning an activity under the committee's review authority;
- A report made by a nursing peer review committee to another committee or to the Texas Board of Nursing (TBON) as permitted or required by law; and
- Implementation of a duty of a nursing peer review committee by a member, an agent or an employee of the committee.

The peer review process is one of fact finding, analysis and study of events by nurses in a climate of collegial problem solving focused on obtaining all relevant information about an event. After investigation and review, the nursing peer review committee determines whether grounds exist to report the nurse. If grounds exist, the nursing peer review committee makes the report to the TBON.

The nursing peer review that applies to the CSON is Incident-based (IBPR), in which case peer review is initiated by a facility, association, school, agency, or any other setting that utilizes the services of nurses.

Due Process rights for Incident-Based Peer Review (IBPR) [[Rule 217.19\(d\)](#)]

PROCEDURE:

Conduct Subject to Reporting

1. Conduct subject to reporting is that which:
 - a. Violates the NPA or a TBON rule and contributes to the death or serious injury of a patient;
 - b. Causes a person to suspect that the nurse's practice is impaired by chemical dependency or drug or alcohol abuse;
 - c. Constitutes abuse, exploitation, fraud or violation of professional boundaries;

- d. Indicates that the nurse's continued practice of nursing could reasonably be expected to pose a risk of harm to a patient or another person, regardless of whether the conduct consists of a single incident or a pattern of behavior; or
2. A person who is required to report a nurse because of impairment by chemical dependency or mental illness may report to a peer assistance program approved by the TBON (TPAPN) and bypass review by the nursing peer review committee, but this bypass is not available if the impaired nurse committed a practice violation.

Committee Membership

NPR law, Section 303.003 required that a Nursing Peer Review Committee that conducts a review that involves the practice of professional nursing (including an RN with advanced practice authorization) must:

- a. have nurses as three-fourths of its members have only registered nurses and vocational nurses as voting members.
- b. A nursing peer review committee that conducts a peer review that involves the practice of professional nursing must have registered nurses as two-thirds of its members, and may have only registered nurses as voting members.
- c. where feasible have at least one nurse who has a working familiarity with the area of nursing practice in which the nurse being reviewed practices.

The Peer Review Committee (PRC) Chair is appointed by the Dean of the CSON for a term to be determined by the Dean. The PRC Chair is responsible for maintaining all records pertaining to a peer review proceeding, including, but not limited to policies in effect at the time of the PRC proceeding, identities the specific nurses who were members of the PRC and designation of the licensure and areas of practice. Documents are to be permanently archived. The Dean of the CSON and any administrative faculty shall not be a members of this committee.

Section 303.004. Peer Review by Two Entities.

- (a) A nurse who, as a temporary agency nurse, faculty member, or similar staff member, practices nursing for an educational institution, health care facility, agency, or entity, or a person other than the person who employs or directly compensates the nurse is subject to peer review by both the employer and the other person.
- (b) For the purposes of exchanging information, the peer review committee reviewing the nurse's conduct is considered to be established under the authority of both entities.
- (c) The two entities may contract as to which entity will conduct peer review of the nurse.

Good Faith

The peer review committee shall at all times act in good faith as that term is defined by the TBON.

Initiation of a Complaint

1. Faculty in the CSON practice and supervise students in a variety of clinical practice areas and shall, to the extent possible, be subject to this nursing peer review rather than the nursing peer review of another institution.
2. A written complaint shall be submitted to the chair of the peer review committee on Form A of this policy. The peer review committee will then proceed as follows:
 - a. Give written notice to the nurse being reviewed on Form B of this policy:
 - In person,
 - By certified mail, return receipt requested, at the nurse's last known address, or
 - Electronically via the nurse's TAMIU email address
 - b. The notice shall inform the nurse that:
 - His/ her practice is being evaluated by the Nursing Peer Review Committee,
 - The date the committee will not meet sooner than twenty-one (21) calendar days and not more than forty-five (45) calendar days from date of notice,
 - The nurse will receive a copy of the peer review plan, policies and procedures,
 - The nurse has the right to be accompanied to hearing by a nurse peer or attorney,
 - The nurse has the right to be represented by an attorney, but must notify the nursing peer review committee at least fifteen (15) calendar days before the hearing.
3. If the nursing peer review committee is represented by an attorney, the nurse being reviewed is entitled to "parity of participation of counsel". Both attorneys are able to participate to the same extent.

The notice should include:

- A copy of this policy
- A copy of Rule 217.19 (Nursing Peer Review)
- A description of the event(s) to be evaluated in sufficient detail to inform the nurse of the incident, circumstances and conduct (error and omission), including date(s), time(s), location(s) and individual(s) involved
- The patient/ client shall be identified by initials or number to the extent possible to protect confidentiality BUT the nurse shall be provided the name of the patient/ client,
- Name, address, telephone number and email address of the chair of the Faculty Affairs Committee to receive any response by the nurse,
- Copies of any documents or other material concerning the event OR provide the nurse the opportunity to review, in person or by attorney, the documents or other material concerning the event at least fifteen (15) calendar days prior to appearing before the committee,
- Provide the nurse the opportunity to submit a written statement regarding event under review,

- The nurse is provided the opportunity to appear before the committee, make a verbal statement, ask questions and respond to questions of the committee and provide a written statement regarding the event under review.
- The nurse shall have the opportunity to:
 - call witnesses, question witnesses, and be present when testimony or evidence is being presented;
 - be provided copies of the witness list and written testimony or evidence at least 48 hours in advance of the proceeding;
 - make an opening statement to the committee;
 - ask questions of the committee and respond to questions of the committee; and
 - make a closing statement to the committee after all evidence is presented.

Discover

1. The nurse shall be provided with a witness list and written testimony or evidence at least forty-eight (48) hours in advance of the proceeding.
2. A nurse whose practice is being evaluated may choose not to participate in the proceeding after notification. However, the evaluation will still be done.

Committee Meeting

The chair of the Faculty Affairs Committee shall preside at the committee meetings and conduct the peer review. Rules governing court proceedings and admissibility of evidence do not apply.

Order of Meeting

1. The order of the meeting will be determined by the chair of the Faculty Affairs Committee. Opening statements may be made by each side (peer review committee and nurse being evaluated). Both sides will have the opportunity to present evidence, including witnesses, documents or other evidence. The nurse will have the opportunity to question witnesses and question the validity and veracity of the documents or other evidence. The nurse may also ask and respond to questions of the committee.
2. At the conclusion of the meeting, the Faculty Affairs Committee will meet in private to reach a decision. A determination that a deficiency in care is attributable to a nurse shall be based on the extent to which the nurse's conduct was the result of a deficiency in the nurse's judgment, knowledge, training or skill. It shall NOT be based on factors outside the nurse's control.

Decision

1. The committee must complete its evaluation within 14 calendar days from the date of the peer review hearing.

2. The Chair of the Faculty Affairs Committee shall provide written notice to the nurse on Form C with ten (10) calendar days of when the committee's review has been completed. This will be in person, or by certified mail, with return receipt requested, at the last known address of the nurse or electronically via the nurse's TAMIU email address. This notice shall permit the nurse to file a written rebuttal within ten (10) calendar days after receiving notice. This rebuttal shall be made a permanent part of the peer review record.
3. Disciplinary action prior to conducting Incident-Based Peer Review [NPA 301.405(e) Employment and licensure issues are separate. An employer may take disciplinary action before review by the peer review committee is conducted, as peer review cannot determine issues related to employment. The role of peer review is to determine if licensure violations have occurred and, if so, if the violations require reporting to the board. If a report to the BON is already required under 301.405(c), then the role of the peer review committee is to investigate whether external factors impacted the error or situation, and to report their findings to a patient safety committee if they determine there were external factors that mitigate or aggravate the circumstances impacting the nurse's actions.
4. Duty to report by employer [Section 301.405 (b) If an employer terminates a nurse for non-practice-related reasons (such as too many absences, or non-patient-related misconduct) this is an employment, not licensure, issue and is not board-reportable.

If an employer terminates a nurse (voluntarily or involuntarily), suspends for seven (7) or more days, or takes other substantive disciplinary action against a nurse or substantially equivalent action against an agency nurse for nursing practice errors/concerns, the employer must report to the Board (BON) in writing on Form D:

- a. the identity of the nurse;
 - b. the conduct subject to reporting that resulted in the termination, suspension or other substantive disciplinary action or substantially equivalent action; and
 - c. any additional information the board requires.
5. Due process rights under peer review for nurses who voluntarily resign or is involuntarily terminated [NPA §301.405(c) and [Rule 217.19\(f\)\(1\)](#)
 - a. SB993 (80th Legis. Session, 2007) amended NPA (TOC) §301.405(c) requiring that even if a mandatory report by the employer has been, or will be, made to the BON under §301.405(b), the peer review committee must still meet to determine if external factors beyond the nurse's control impacted the nurse's deficiency in care. If the peer review committee believes external factors were involved in the incident (whether or not the nurse is being reported to the BON) the committee is now required to also

report the issue to the entity's patient safety committee, or to the CNO/nurse administrator if there is no patient safety committee.

- b. Because the nursing peer review committee is reviewing the incident solely to determine existence of external factors, due process rights of incident-based peer review do not apply. In addition, a peer review committee cannot make a determination that would negate the duty of the employer to report the nurse under §301.405(b) or of the CNO/nurse administrator to report the nurse under §301.402(b).
6. Recommendations by IBPR Committee be followed by the employer. The nursing peer review committee does not have authority to make employment or disciplinary decisions. The employer must make their own decision about appropriate disciplinary actions; however, the employer may choose to utilize the decisions of the peer review committee in determining what action they wish to take with regard to the nurse's employment. In addition, an employer may not prohibit a peer review committee from filing a report to the BON if the PRC has determined in good faith that a nurse's practice must be reported to the Board in compliance with §301.403, Rule [217.11\(1\)\(K\)](#), and Rule [217.19](#).
 7. If the committee finds that a nurse has engaged in conduct reportable to the TBON, the committee shall submit a report to the TBON on Form D which includes: (a) the identity of the nurse; (b) a description of any corrective action taken against the nurse and (c) a statement as to whether the committee recommends that formal disciplinary action be taken against the nurse.

Confidentiality

1. A nursing peer review committee meeting is confidential and any communication made to a nurse peer review committee is privileged. It is:
 - Not subject to subpoena or discovery in any civil matter
 - Is not admissible as evidence in a judicial or administrative proceeding
 - May not be introduced into evidence in a nursing liability suit arising out of the provision of or failure to provide nursing services
2. If a peer review committee determines that a nurse has NOT engaged in conduct required to be reported to the TBON, an individual whose knowledge of the nurse's conduct was acquired only through peer review may not report that nurse to the TBON for that conduct. An individual is not prohibited from reporting the nurse if the individual:
 - Has independent knowledge about the nurse's conduct or
 - Believes the committee made its determination in bad faith
3. A member, agent or employee of a nursing peer review committee or participant in a proceeding before the committee may not disclose or be required to disclose a communication made to the committee or a record or proceeding of the committee.
4. A person who attends a nursing peer review committee proceeding in any capacity may not disclose or be required to disclose:

- Information acquired in connection with the proceeding
 - An opinion formed
 - An opinion, recommendation or evaluation of the committee or committee member
5. All nurses who participate in a nursing peer review process shall sign a confidentiality agreement.

Disclosure of Information

1. The Faculty Affairs Committee, on request, SHALL disclose written or oral communications made to the committee and the records and proceedings of the committee to: (a) a licensing authority of any state or (b) a law enforcement agency investigating a criminal matter. The Faculty Affairs Committee MAY disclose written or oral communications made to the committee and the records and proceedings of the committee to:
- The association, school, agency, facility or other organization under whose authority the committee is established
 - Another nursing peer review committee
 - A peer assistant program approved by the TBON (TPAPN)
 - A government agency or accrediting organization that accredits health care facilities or schools of nursing or surveys a facility for quality of care
 - A person engaged in bona fide research, if all information that identifies a specific individual is deleted

CONHS Outside Employment

POLICY:

The CONHS encourages faculty to maintain clinical skills and knowledge to enhance the University mission. Faculty practice involves delivering some form of direct hands-on care to clients in the nurse's respective clinical specialty area or providing consultation in the faculty member's area of expertise.

PROCEDURE:

1. At the beginning of the academic year, faculty who practice outside the University must complete a TAMU System Faculty Consulting and External Professional Employment Application and Approval Form. This form may be found in the TAMU Human Resources website.
2. This form will be submitted to the Dean of the CONHS for approval or disapproval.
3. If the request is approved by the Dean of the CONHS for external employment, it will be submitted to the Provost for approval or disapproval.
4. The process is only complete when returned to the Dean with the Provost's approval.
5. If outside employment is denied by either the Dean or Provost, the Dean will notify the faculty member

CONHS Faculty Peer Evaluation

POLICY:

In order to assess the teaching effectiveness, the CONHS will use peer evaluations to identify both strengths and/ or weaknesses of a faculty member's teaching strategies. The purpose of the evaluation is to provide positive feedback about excellent performance and/ or to make constructive recommendations about performance criteria that need to be addressed to ensure that student learning outcomes are being met.

PROCEDURE:

1. A faculty member will select a peer to evaluate teaching effectiveness.
2. The peer evaluator will submit their peer evaluation to the appropriate coordinator or director who will forward to the Dean.
3. If the evaluation indicates there is a need for improvement, the appropriate coordinator/director and faculty will work together to develop an Evaluation Action Form. The Evaluation Action Form will be forwarded to the chair of the Evaluation Assessment Committee.
4. The chair of the Evaluation & Assessment Committee will forward to the Dean's office for filing in the personnel file of the faculty.

CONHS Administration Evaluation

POLICY:

In order to assess the teaching effectiveness, the CONHS will use evaluations to identify both strengths and/ or weaknesses of a faculty member's teaching strategies. The purpose of the evaluation is to provide positive feedback about excellent performance and/ or to make constructive recommendations about performance criteria that need to be addressed to ensure that student learning outcomes are being met.

PROCEDURE:

1. Program coordinators/directors will attend clinical and/or lecture for all full-time faculty.
2. If the evaluation indicates there is a need for improvement, the appropriate coordinator/director and faculty will work together to develop an Evaluation Action Form. The Evaluation Action Form will be forwarded to the chair of the Evaluation & Assessment Committee.
3. The chair of the Evaluation & Assessment Committee will forward to the Dean's office for filing in the personnel file of the faculty.

CONHS Annual Faculty Evaluation

POLICY:

The annual faculty evaluation is conducted to ensure that faculty are meeting the TAMIU criteria in the areas of teaching, research and service. The annual faculty evaluation is used to determine merit, post-tenure review and the need for Performance Development Plans (PDP).

PROCEDURE:

1. Annual faculty evaluations are conducted during the Spring semester according to TAMIU guidelines.
2. The faculty member must submit a self-evaluation to the Dean one month prior to the TAMIU timeline due date using digital measures and/or CONHS guidelines.
3. The self-evaluation must contain the following:
 - a. Summary of teaching performance will include the following:
 - Mean score for the first four (4) items of the student evaluation.
 - Review of positive and negative student comments.
 - If appropriate, HESI subscores on dimensions of patient care, member of a team, research and evidenced based practice, basic safety design and effective communication.
 - Changes made to course based on the above data or nursing HESI tests.
 - Assessment of changes/revision to course.
 - Innovative teaching and learning strategies developed and implemented.
 - Evaluation of innovative teaching/learning strategies.
 - b. Summary of research/ scholarly activities: This summary will include any research projects, grants, presentations and peer reviewed articles. This section should also include a list of any conferences attended and the CEUs.
 - c. Summary of Service: This summary should include CONHS and University service on committees. This section should include any service to the community such as boards, committees and professional organizations.
4. After reviewing the self-evaluation, the Dean will complete the annual faculty form.
5. The Dean will review the evaluation with the faculty member and allow the faculty to provide a response.
6. The annual faculty evaluation will be forwarded to the Provost for review.
7. The evaluation will be placed in the faculty member's personnel file.

CONHS Merit Funding

PROCEDURE:

1. If merit funding is available, the Dean of the CONHS will evaluate all full-time and fifty (50%) faculty appointments in the area of teaching, scholarship, and service.
2. The Dean of the CONHS will use the following guidelines to evaluate the faculty. The rating is calculated as follows:

<u>Non-Tenure Track Faculty:</u>	<u>Tenure Track Faculty:</u>
Teaching = 50%	Teaching = 50%
Scholarship = 10%	Scholarship = 40%
Service = 40%	Service = 10%
3. The Dean's merit recommendations are forwarded to the Provost for final review and approval.
4. The recommended merit raise is contingent upon University approval and availability of funds.

CONHS Faculty Evaluation Instruments PPE and Evaluation Criteria

The Professional Portfolio Evaluation (PPE) is the primary mechanism for the annual evaluation of faculty members in the College of Nursing and Health Science. All faculty must submit a PPE each year. The information contained in the PPE will provide much of the documentation used to evaluate faculty performance for the year. Department chairs will use the evaluation criteria found in rubrics for the evaluation of teaching, research, and service found at the end of this document.

The Professional Portfolio Evaluation system includes the following categories, which carry the following percentage weights in the overall evaluation of faculty in different categories:

Faculty Category	Teaching (Classroom or clinical)	Scholarship/Research & Creative Work	Service	Chair Evaluation
Non-Tenure Track	70	-	20	10
Tenure-Track	40	45	5	10
Tenured (w/o Research Release)	50	30	15	5
Tenured (with Research Release)	35	45	15	5

By vote of the faculty of the college in 2007 and in accordance with the Post-Tenure Review Process outlined in the *TAMIU Faculty Handbook*, a score of below 70 by a tenured faculty member is deemed evidence of “serious deficiencies” which must be addressed in a professional development plan if a faculty member receives two consecutive evaluations below 70. See the *TAMIU Faculty Handbook* for details.

Description of the Professional Portfolio Evaluation System

Phase I: *Teaching*

The evaluation of faculty teaching efforts is to be based primarily on the evidence supplied by a teaching portfolio and supplemented by other relevant data. The evaluation will follow the criteria set forth in the rubric for evaluating teaching found at the end of this document. The portfolio must contain both student perceptions of faculty teaching performance (“student evaluations”) and a narrative describing the faculty member’s efforts to achieve or maintain teaching excellence. The narrative must be accompanied by supporting documentation. Among the documents that should be considered for inclusion in the portfolio are:

- Peer evaluations of teaching.
- Student comments and testimonials
- Evidence of attendance at teaching workshops and conferences on pedagogy and field of practice.
- Students' scores on tests/standardized tests and/or clinical skills showing evidence of learning, possibly pre- and post-test results.
- Students' work showing evidence of learning which would include, but are not limited to, such items as workbooks, class logs, portfolios, essays, creative works, projects, presentations in local, regional and national conferences.
- Teaching Independent Study courses that have academic credit hours
- Teaching Independent Study courses that do not have academic credit hours
- Development of continuing education units or short courses that are for non-credit
- Supervision of undergraduate student research
- Documentary evidence of assistance to students outside of class with course-related problems, advisement, securing employment, letters of recommendation, workshops and tutorial sessions.
- Special course materials prepared by the professor for students, such as workbooks, manuals, specialized instructional packets, collections of readings.
- Copies of corrected students' work (classroom or clinical) showing suggestions for improvement and encouragement.
- Evidence of innovation and/or general improvements in course development and delivery. For example, evidence in innovation in teaching methods and production of textbooks, or educational "software"; evidence-based teaching strategies, including technologies that promote student success.
- Development of teaching materials for on-campus or on-line course delivery.
- Instruction in WIN sections.
- Instruction in Honors sections.
- Evidence of the use of student and professional feedback to improve teaching.
- Evidence of participation in programmatic or development grants related to teaching/learning
- Presents innovations in teaching techniques and/ or evidence-based clinical practices at regional, national, or international professional conferences
- Quality Matters™ certification for courses developed for online delivery.

The preceding list is merely suggestive. Any evidence of teaching excellence should be included in the portfolio.

Evaluation Criteria

The descriptive criteria for the evaluation rubrics below were developed by college faculty committees containing representatives from all college departments. For each level of performance, the committees have identified the appropriate score for the university's official

faculty evaluation and for the score range on the college's PPE faculty evaluation, which is used for merit pay purposes. Scores 3 and above or 70% or above are deemed satisfactory. Scores 2 and below are deemed unsatisfactory. As with all rubrics, the following rubrics are meant to provide a list of descriptive statements typical of those meriting a certain score. Evaluators, however, must inevitably use their best judgment in interpreting whether or not a faculty member has met all or simply most of the descriptive criteria to merit a particular score. As an example, an evaluator may not consider student evaluations of much use for determining the quality of teaching if the percentage of respondents for a class falls well below the department mean.

I. Teaching

5 (90-100) Faculty maintains and presents evidence of exceptional standards of teaching and learning. Students are presented with clear objectives, held to the highest academic standards and consistently challenged to think critically on the subject matter. Students develop a clear understanding of their responsibility in learning. The students should indicate the opinion that the instructor effectively presents relevant information, and the course materials are well prepared and organized. Feedback on student works regular and timely. Evaluation and grading perceived as fair. The student evaluations of faculty receiving a score of "5" for teaching are most often 4.7 or higher.

4 (80-89) Faculty maintains and presents evidence of very high standards teaching and learning. Students are presented with clear objectives, held to the high academic standards and regularly challenged to think critically on the subjectmatter. The students should indicate the opinion that the instructor effectively presents relevant information, and the course materials are well prepared and organized. Feedback on student work regular and timely. Evaluation and grading perceived as fair. The student evaluations of faculty receiving a score of "4" for teaching are most often 4.0 or higher.

3 (70-79) Faculty maintains and presents evidence of high standards of teaching and learning. Students are presented with clear objectives, held to the high academic standards and regularly challenged to think critically on the subjectmatter. Students opinions indicate some dissatisfaction with preparation and/or organization. Feedback on student work regular and timely. Evaluation and grading perceived as fair. The student evaluations of faculty receiving a score of "3" for teaching are most often 3.5 or higher.

2 (60-69) Evidence indicates low standards of teaching and learning. Little evidence of students being sufficientlychallenged to think critically. Course objectives not clearly stated. Somewhat ill-prepared or disorganized. Instructor displays little motivation or enthusiasm. Students indicate little feedback on submitted work. Evaluation and grading perceived as unfair. The student evaluations of faculty receiving a "2" for teaching are most often below a 3.5.

1 (59-60) Evidence indicates low standards of teaching and learning. Little evidence of students being sufficiently challenged to think critically. No course objectives, preparation,

organization. Instructor resists change and rejects constructive criticism. Evaluation and grading perceived as unfair. The student evaluations of faculty receiving a “1” for teaching are most often below a 3.5.

0 (<50) Evidence reflects no interest in teaching or learning. Instructor shows no motivation for improvement. No course objectives, preparation, organization. The student evaluations of faculty receiving a “0” for teaching are most often below a 3.5.

Phase II: *Research, Scholarly Activities, and Creative Work*

The evaluation of a faculty member’s engagement in research, publication, and other scholarly products will be based on the criteria described in the evaluation for research in the rubric found at the end of this document. The evaluation will be determined by evidence of the three types of activities listed below:

A. Pre-publication Activities

Credit for properly documented and significant pre-publication activities is important to provide incentives for faculty to engage in major, multi-year research projects. These activities include, but are not limited to, the following:

- Drafts of grants submitted for funding
- Exploration of archival collections or existing datasets
- Creation of research materials (e.g., questionnaires)
- Data collection and analysis
- Field and lab research activities
- Drafts of papers in progress (reports, articles, book chapters, and books, etc.)

Documentation for all activities described in the narrative should be made available to the Department Chair, who, in turn, will give appropriate research credit for the pre-publication activities.

B. Publications

These activities include books, articles, scholarly reports, other publications (e.g., creative as well as scholarly). The narrative of scholarly activities described above should be followed by a listing, with appropriate explanation and documentation of publications, grant applications and other scholarly products during the past year, examples of which are listed below:

- Completion of a grant proposal that has been approved for external funding.
- Sole authorship of a book
- Sole authorship of an article in a refereed journal.

- Co-authorship of an article in a refereed journal.
- Co-authorship of a book
- Editing of a book or journal.
- Sole authorship of a chapter in a book.
- Co-authorship of a chapter in a book.
- Sole or co-authorship of a research paper or other document published as part of a conference proceedings.
- Sole authorship of an article in a non- refereed journal.
- Co-authorship of an article in a non- refereed journal.
- Sole authorship of a research monograph published for distribution among professionals affiliated with a research agency.
- Co-authorship of a research monograph published for distribution among professionals affiliated with a research agency.
- Sole authorship of a research paper published for distribution among professionals affiliated with a research agency.
- Co-authorship of a research paper published for distribution among professionals affiliated with a research agency.
- Sole authorship of a teaching syllabus, reference bibliography or teaching exercise which is published in a professional association's resource manual.
- Editor of a newsletter.
- Co-editor of a newsletter.
- Software publication– to be treated as publication in a refereed or non-refereed journal.
- Book review.
- Works published, exhibits shown, performances given.
- Patents.

C. Involvement in Professional Organizations and Meetings.

Activities include, but are not limited to, presentations, panels, workshops, sessions chaired or moderated at conferences, and other external venues for which professional participation of an individual has been solicited.

- Workshop or paper presentation at a national conference.
- Workshop or paper presentation at a state or regional conference.
- Moderator or session chair at a national, state, or regional conference.
- Discussant or respondent for a session at a national conference.
- Discussant or respondent for a session at a state or regional conference.
- External reviewer of journal submissions, grants, monograph, book manuscript by another scholar.
- External reviewer for promotion and tenure decisions for a faculty member at another university.
- Attendance at a national conference in the area of expertise.

- Attendance at a state or regional conference in the area of expertise.
- Participation in the planning of a national, state, or regional conference.
- Officer of a professional organization.
- Member of a committee of a professional organization.

Note to Tenure-Track Faculty: Tenure is not a “sum of the parts.” In the relationship of yearly evaluations and final decisions about tenure and promotion, do not assume that acceptable yearly evaluations add up to tenure. For instance, a faculty member might earn a “3” in research each year because of presenting conference papers, but if at the end of the tenure-track period the faculty member has not published sufficiently, then tenure is almost certainly to be denied.

Note on Co-Authorship: Generally, sole authorship carries greater credit than co-authorship. Also, the position of the author’s name in the series of co-authors generally signifies the weight of the author’s contribution to the research or the writing, but the protocols of each discipline vary in how this contribution is signified (e.g., first author as principal researcher or last author as principal researcher or alphabetical equality).

Note on Selectivity/Status of Publication: The faculty member in submitting the PPE should describe to the chair and the dean the nature of his or her contribution to a co-authored publication. The faculty member should also provide to the chair and the dean whatever evidence is available to demonstrate the influence or status or selectivity of the journal or publisher in which the publication appeared.

Note on International/National Referred Journals

International/national referred journals must be SCOPUS, SCIE, or an SSCI index journal. Quality publications that are not indexed above should be verified by faculty with evidence.

5 (90-100): Faculty must have one of the following: 1). published 1 or 2 articles in a national/international refereed journal or a book, in his/her field of study (i.e., 1st author, mentor, corresponding author; or at least 25% contribution); 2). have a grant approved; or 3). the faculty member demonstrates his/her impact in the field by providing citation counts (e.g., 2-4 citations) published by the Social Science and/or Science Citation Indexes of his/her work.

4 (80-89): Faculty must have one of the following: 1). published an article in a refereed journal (generally defined) and one or more conference papers at major conferences in the field; or 2). the faculty member wrote one or more competitive grants that were not funded and made demonstrable progress in his or her own research (e.g., manuscripts, conference papers).

- 3 (70-79):** Faculty must have completed all of the following: 1). presented at least one paper at a regional or national conference in his/her own field; 2). have an active research agenda; 3). and have working papers (as evidenced by manuscripts in draft form, research data, etc.).
- 2 (60-69):** Faculty in this category have an active research agenda but failed to publish, write a grant, or produce evidence of substantial progress toward publication of an article during the year. Such a faculty member, however, has remained current in his or her field and is likely to publish or secure a grant in subsequent years.
- 1 (50-59):** Faculty in this category do not have an active research agenda but are current in their fields and are capable of being more productive than they have been. They may attend conferences.
- 0 (<50):** Faculty in this category do not have an active research agenda and are not current in their fields.

Phase III: *Service*

Service encompasses a variety of professionally related activities through which members of the faculty profession employ their academic expertise for the benefit of the University, the community, and the profession. Texas A&M International University places a strong emphasis on service to the University and its mission. A faculty member provides service to the University through active participation and leadership in college and University committees, councils, special projects, or duties for which the faculty member is held accountable. Community service by TAMIU faculty is recognized in any and all of those areas. For purposes of evaluation, however, activities must relate to one's academic field or discipline or else be clearly approved by the University. Participation and leadership in professional activities and associations may be considered service when it does not include peer review. Certificates of recognition, letters of appreciation, official minutes, newsletters, products of projects, and other tangible evidence of service rendered may document Service of all types. (From the TAMIU Faculty Handbook)

Service to the University and the community is expected of all CNHS faculty members who are tenured, tenure track or non-tenure track. There are minimum service obligation expectations per year for all faculty, based on your faculty track.

Tenure-Track & Tenured Faculty

- Tenure-track with years 1-3 at TAMIU: two college obligations in addition to one university/community/professional/student obligation per academic year

- Tenure-track with years 4-6 at TAMIU: two college obligations in addition to two university/community/professional/student obligations per academic year
- Tenured faculty: three college obligations in addition to two university/community/professional/student obligations per academic year

Non-Tenure Track Faculty

- Assistant-level with years 1-3 at TAMIU: two college obligations in addition to one university/community/professional/student obligation per academic year
- Assistant-level with years 4-5 at TAMIU: two college obligations in addition to two university/community/professional/student obligations per academic year
- Assistant-level with more than 6 years at TAMIU or Associate-level: three college obligations in addition to three university/community/professional/student obligations per academic year

In this context, “service obligations” will be interpreted to mean a wide variety of possible tasks. Faculty will be evaluated for merit pay based on the service activity during the annual PPE. A narrative is to be included in their PPE discussing the service activities, and the roles/responsibilities of the faculty. Documentation such as committee minutes, advising rosters or other proof of involvement, will further strengthen the faculty’s evaluation.

Service obligations may include but are not limited to the following:

Department/College/University

Service on departmental, college or University committee includes such as membership on either a standing or specially appointed committee, development of degree programs and new courses, recruitment and/or open house participation, and chairperson on a committee. All faculties are assigned to specific college committees, those who are chair or co-chairs for the committee with active participation will be evaluated as such.

1. Special consideration will be given to service on the following committees: Faculty Senate, Grievance Committees, University Honor Council, Institutional Review Board, Institutional Animal Care and Use Committee, College and University Promotion and Tenure Committees, and College and University Curriculum Committees.
2. Special consideration will also be given to service as a faculty mentor to junior faculty, a program coordinator or a volunteer to be chair or co-chair of committees.
3. For non-tenured faculty, research and/or grant writing/submissions are optional and will be given special consideration.

Community

Supervision of a non-mandatory student internship/project that benefits a community organization, service on a community committee, service on a community committee board, participation in the events of a community organization or outreach program.

Student

- Advisor/supervisor/sponsorship of a student club or honor society, supervision of a field trip, service on university committees relating to Student Affairs.
- Teaching non-credit Independent Study courses
- Documentary evidence of assistance to students outside class with course-related problems, advisement, securing employment, letters of recommendation, workshops and tutorial sessions.
- Instruction in Honors program

Professional

Consulting services or workshops in the area of expertise, speaking engagements, service to professional organizations and professional association development.

Evaluation Criteria

5	Extraordinary	Exceeds excellent expectations with more than additional service activities and/or two special consideration service activities (See 1, 2, &3).
4	Excellent	The minimum service requirements plus two additional service activities and/or one special consideration service activity.
3	Good	Meets the minimum service requirements. It is expected that all CNHS faculty would rank at this level at a minimum.
2	Less than expected	Passive participant in college committees and/or did not meet the minimum service requirements
1	Poor	Absence from college committees. Makes no effort in engaging students or self in a professional manner.

CONHS Tenure and Tenure Track Rank Criteria

POLICY:

Faculty will be reviewed by two Promotion and Tenure committees (CONHS and TAMIU) when the recommendation is for promotion and/or conferral of tenure. The following criteria have been established by the CONHS for academic rank descriptors, promotion and tenure. Faculty must meet the length of service requirements for academic rank as outlined in the TAMIU faculty handbook as described for the Promotion and Tenure Process. See University Faculty Handbook at http://www.tamtu.edu/senate/documents/handbookcomplete_2017.pdf.

PROCEDURE:

1. Full-time faculty member with a terminal degree has the right to initiate the process for promotion and/ or tenure. Faculty will notify the Dean of the CONHS of their intent to apply for promotion and/ or tenure. Procedures and timelines for recommendation for promotion and/ or tenure will be followed as outlined in the TAMIU Faculty Handbook at http://www.tamtu.edu/senate/documents/handbookcomplete_2017.pdf. The Dean will provide guidance regarding the materials necessary, as well as the style, format and presentation of materials.
2. The Faculty Affairs Committee will review and make recommendations to the Dean regarding tenure and/or promotion. Only tenured faculty can vote on a tenure and/or promotion review panel. A minimum of three (3) tenured faculty shall compose the tenure/promotion panel. If there are insufficient CONHS tenured faculty, then the faculty member and the Dean of the CONHS in consultation with the Provost will select additional members of the panel.
3. Faculty members are expected to demonstrate cumulative mastery of criteria for each rank below that is being sought.

Definition of Terms:

Terminal Degree: Faculty must hold an earned doctorate in their discipline.

Teaching: Teaching includes knowledge in the field and quality in teaching. The CONHS maintains a clear and fair process for evaluating teaching effectiveness. Student evaluations, peer and administrative review are used to evaluate teaching performance.

Scholarship: Scholarship involves academic peer review of both the quality and quantity of the scholarly products. Scholarship of Discovery involves the search for new knowledge and for a richer understanding of existing knowledge. Productivity may be documented in the form of scholarly books, articles, and oral presentations of research.

Scholarship of Integration and Teaching emphasizes fitting one's research or the research of others into larger intellectual patterns. This may take the form of a textbook, multi-media production, writing that makes one's field accessible to a wider audience, cross-curricular innovation and interdisciplinary instructional achievements.

Scholarship of Application brings learning and knowledge to bear upon the solution of practical problems. Productivity may take the form of publications and presentations derived from consultation, technical assistance, policy analysis and program evaluation.

Service: Service encompasses a variety of professionally related activities through which members of the faculty employ their academic expertise for the benefit of the University, the community and the profession. Service of all types may be documented by certificates of recognition, letters of appreciation, official minutes, newsletters, products of projects and other tangible evidence of service rendered.

A. Assistant Professor

This rank is the entry level for a tenure-line position. Appointment to assistant professor indicates the candidate can be expected to perform satisfactorily in all required academic duties and holds promise for further professional development. The faculty holding this rank must meet the following qualifications.

1. Academic Preparation

The minimum appropriate degree for appointment to the rank of assistant professor on a tenure track is the doctorate degree or a related field along with a Master's of Science degree (if appropriate).

2. Experience

Teaching experience or work experience is related to the teaching field.

3. Teaching

- Demonstrate an ability to present focused content effectively.
- Adhere to established academic standards in the classroom and clinical areas as outlined in the criteria for progression, course syllabi and clinical evaluation tools.
- Is recognized by colleagues and students for effective teaching.
- Adheres to the CONHS and clinical agency policies and procedures during clinical instruction.
- Demonstrate the ability to maintain relationships with agencies to facilitate student learning experiences.
- Provide adequate supervision and support for students in the clinical area.
- Demonstrate concern for students and sensitivity to students' needs.
- Provide individual assistance to students according to the CONHS policies.

4. Scholarship

- Continue to advance in scholarly or creative activity beyond instructional assignments.
- Demonstrate evidence-based practice.
- Evidence of ability to facilitate scholarship activities
- Disseminate practice knowledge through publications and/ or presentation.
- Demonstrates two of the following:
 - Research addressing a community problem or concern.
 - Research addressing a University issue.
 - Research related to promoting the role of a professional organization.
 - Research involved in preparation of presentations at professional meetings.
 - Research required for preparation of grant proposals.

5. Service

- Serve as a contributing member of the CONHS and its committees.
- Serve as a contributing member of the University and its committees when invited or assigned.
- Serve as a representative of the College and the University by providing information about the program and/or recruiting.
- Participate in projects to assist the CONHS and the University.
- Project a positive presence to the community.
- Demonstrate a willingness and ability to work effectively with colleagues to support the mission and the common goals of the University and the CONHS.

Community

- Serve as consultant for clinical and community agencies or groups.
- Serve as a member and/ or officer of community-based public service groups.
- Participate in community activities which promote public health.

Profession

- Hold membership in professional organizations.
- Participate in professional organizations at the local and state level.

B. Associate Professor

This rank represents maturity, experience and leadership in the academic profession. In addition to fulfilling faculty responsibilities, the following qualifications must be met for consideration of appointment to this rank. The achievement of this academic preparation and experience does not in itself ensure appointment to this rank.

1. Academic Preparation

The minimum appropriate degree for appointment to the rank of Associate Professor on a tenure track is an earned doctorate degree in their profession or a related field. If nursing faculty, a MSN is required.

2. Experience

Five (5) years experience of full-time faculty employment including at least three (3) years in the rank of Assistant Professor.

3. Teaching

- Demonstrate a broad knowledge of the discipline and an in-depth knowledge in one or more parts of the field.
- Demonstrate expertise in course and/ or program development and teaching.
- Demonstrate the ability, experience and expertise to teach both undergraduate and graduate courses.
- Continue progress in teaching proficiency by being involved in experimental and/ or innovative teaching.
- Serve as a mentor for student desiring advanced degrees.

4. Scholarship

- Demonstrate competence and productivity in scholarly or creative activities related to the discipline.
- Provide evidence of ability to facilitate scholarship activities.
- Disseminate practice knowledge through publications and/or presentations.
- Research addressing a community problem or concern.
- Research required for preparation of grant proposals.
- Demonstrate evidence of two of the following criteria:
 - Research outcomes of scholarship in a focused clinical area.
 - Research addressing a University issue.
 - Research related to promoting the role of a professional organization.
 - Research involved in preparation of presentations at professional meetings.

5. Service

- Serve as an advisor, mentor, or consultant to other faculty members, departments, colleges or the University.
- Serve as a leader in the CONHS and its committees.
- Serve as a contributing member or chair of a University committee.
- Initiate projects to promote the CONHS and the University.

Community

- Maintain involvement in community health related activities.

Profession

- Demonstrate sustained efforts to influence or change practice.
- Provide leadership to professional organizations at the local, state, regional and/ or national level.

C. Professor

This is the summit of academic rank, representing a position of leadership in the University. In addition to requirements of Associate Professor, the following qualifications must be met for consideration of appointment to this tenure track rank.

1. Academic Preparation

The minimum appropriate degree for appointment to the rank of Professor is that the faculty holds an earned doctorate in a related field and an MSN degree if nursing faculty.

2. Experience

The faculty must have a minimum of ten (10) years of full-time university faculty employment including at least five (5) years in the rank of Associate Professor. In addition, the faculty member must have a minimum of three (3) years full-time faculty employment at TAMIU and meet the following requirements.

3. Teaching

- Demonstrate mastery and skill in teaching with a proven record of teaching excellence and improving pedagogical skills.
- Recognized as a leader in curriculum development and teaching.
- Provide consultation to faculty and the University in regard to curricular/ programmatic issues/content in area of expertise.
- Serve as resource to advanced students in area of expertise.

4. Scholarship

- Demonstrate leadership in development, implementation and dissemination of research.
- Establish a record of scholarship that reflects a high level of consistent productivity in regard to funding of grants, publications and/ or presentations.
- Provide leadership in development of interdisciplinary research and other related projects.
- Provide leadership in area of expertise through invited presentations/ publications/ consultations at local, regional and national levels.
- Mentor and/ or advise faculty and students in achievements in scholarly or creative activities.
- Demonstrate use of research outcomes related to: (1) community problem, (2) a University issue and (3) a professional organization issue or patient problem.

5. Service

Texas A&M International University and CONHS

- Serve as an advisor, mentor or consultant to other faculty members, departments, colleges or the University when invited or assigned.
- Serve as a contributing member of the CONHS and its committees when invited or assigned.

- Serve as representative of the CONHS and the University by providing information about the programs and/ or recruiting.
- Participate in projects to assist the CONHS and the University.
- Project a positive image to the community.
- Demonstrate a willingness and ability to work effectively with colleagues to support the mission and the common goals of the University and the CONHS.

Community

- Provide leadership in defining and implementing community initiatives related to area of expertise.
- Contribute to the profession through involvement in community and professional activities.
- Serve as consultant for clinical and community agencies or groups.
- Serve as member and/ or officer of public service groups (e.g. American Heart Association, Cancer Society, etc.).
- Participate in activities which promote public health (e.g. blood pressure screening, health fairs, etc.).

Profession

- Provide leadership to professional organizations at the local, state, or national levels.
- Demonstrate sustained efforts to influence or change practice.
- Hold membership in professional organizations.
- Participate in organizations at the local and state level.
- Participate in professional organizations (e.g. regular attendance at meetings, presentations, holding office or committee chair).

CONHS Tenure

POLICY:

Tenure

Tenure means the entitlement of a faculty member to continue in an appointed academic position unless dismissed for good cause. A faculty member with tenure will not be dismissed until he or she has received reasonable notice of the cause for dismissal and has an opportunity for a hearing that meets the requisites of established procedures of due process at this hearing. The institution will bear the burden of proving that the cause of dismissal is adequate.

Beginning with appointment to the rank of full-time Assistant Professor or above, the probationary period for a faculty member will not exceed seven years of full-time service at Texas A&M International University. Up to three (3) years of appropriate full-time service at other institutions may be included as a portion of the probationary period if agreed on in writing at the time of initial appointment. Tenure is granted only by the affirmative action of the Board of Regents upon recommendation of the President of the University. At the conclusion of the probationary period and the tenure application procedure, the faculty member will be notified in writing by the President of the decision of the Board of Regents.

All tenure track faculty members must come under tenure consideration no later than the sixth year of their service at Texas A&M International University. A faculty member who believes his/her teaching, scholarship and service record merits early tenure may apply during the fifth year of service.

To be considered for tenure, a faculty member must send a letter to the College Dean by August 1st of the academic year in which the faculty member desires consideration. The College Dean must certify that the length of service requirement has been met and must respond to the faculty member in writing within two weeks. Should the Dean fail to certify the request, the faculty member has the right to appeal the case to the Provost, who shall respond to the faculty member in writing within two (2) weeks.

In addition to meeting the length of service requirements for tenure as specified in the University Promotion and Tenure guidelines, faculty members approved for tenure in the CONHS shall meet the following requirements.

1. Faculty shall have demonstrated a commitment to professional development by having met the minimal criteria in the categories of teaching, scholarship/creative activities, and leadership/service.
2. Faculty shall perform an essential role in carrying out the mission of the University and CONHS.

Criteria: CONHS Policy for Tenure

The TAMIU Faculty Handbook states that evaluation of a faculty member for tenure shall be based primarily on criteria related to the individual's appointment responsibilities and activities in the following five areas:

1. Academic Preparation
2. Experience
3. Teaching
4. Scholarship
5. Service

PROCEDURE:

1. In the CONHS tenure candidates will be reviewed at the following levels:
 - A. CONHS Promotion and Tenure Committee (which is a panel of the Faculty Affairs Committee)
 - B. Dean of the College of Nursing and Health Sciences
 - C. University Promotion and Tenure Committee
 - D. Provost/ Vice President for Academic Affairs
 - E. President of the University
2. At level 1 and 2, if there is a negative vote, the candidate will be informed in writing of the decision and be afforded an opportunity to withdraw from the tenure process. In addition, the candidate will have an opportunity to review tenure recommendations and make written comments at each level of review. At each stage of this process all previous reviews, recommendations and comments will be forwarded to the next level of review.
3. The candidate is primarily responsible for preparing the core of the dossier with assistance from a mentor(s) chosen by the candidate if he/she desires. Once the dossier has been submitted for consideration, it becomes the primary document for evaluation. No further information shall be added beyond that generated by the official review process, unless requested by the committee.
4. The Dean of the CONHS is responsible for making available to the University Promotion and Tenure Committee the candidate's dossier which will serve as the basis for tenure decisions.

CONHS Post-Tenure Review

POLICY:

Post-tenure review is a positive process for promoting the mission of the CONHS within the CONHS. It is based upon the presumption that tenured faculty members will engage in competent, professional activity and that such activity will be subject to yearly review for the purpose of identifying strength and weaknesses. Should weaknesses be noted, the faculty member and Dean will jointly develop a plan for corrective action.

PROCEDURE:

1. Based on the yearly Professional Performance Profile (PPP) the Dean conducts an in-depth evaluation in the Spring of each academic year. The review will be completed and it will include all phases of the PPP. The timelines for submission of the PPP is determine by the Provost.
2. If the Dean determines that the faculty member's performance meets basic expectations after the evaluation, the report will reflect such findings. However, if in the evaluation, the Dean identifies weaknesses or areas of concern in the faculty member's professional performance, then the faculty member will formulate a detailed strategic plan designed to remedy performance problems. In the event that the faculty member disagrees with the Dean's evaluation, he or she may appeal the evaluation to the Provost.
3. A faculty member who fails to achieve the improvement identified in the strategic plan after the second review (performed no later than during the third year of review) the faculty will be subject to a non-renewal of contract.
4. Tenured faculty members found to be operating at high levels of professional standards are to be commended, recognized as role models for junior faculty and rewarded to the extent possible.

CONHS Non-Tenure Track

POLICY:

Full-time non-tenure track faculty may be employed and promoted in the CONHS to achieve the program outcomes of its programs. All full-time non-tenure track faculty will carry the title of Clinical Assistant Professor, Clinical Associate Professor, or Clinical Professor.

PROCEDURE:

All appointment criteria will adhere to general regulations specified by the TAMUS and by TAMIU.

Definition

1. Non-tenure clinical assistant professor, clinical associate professor, or clinical professor are hired to perform professional service whose primary responsibilities are classroom teaching and providing clinical education and supervision for student instruction in a clinical setting. Non-tenure track faculty members are expected to provide appropriate institutional service to the program development and other faculty responsibilities associated with the faculty teaching role in the CONHS and to the mission of TAMIU.
2. Non-tenure clinical assistant professor, clinical associate professor, or clinical professor may vote in all CONHS matters based on the faculty Bylaws with the exception of matters related to tenure, and promotion of tenured faculty members.

Appointment:

1. Initial and subsequent appointments will be determined by the Dean of the CONHS in collaboration with the TAMIU Provost and President.
2. Appointments may be made at the ranks of Clinical Assistant Professor, Clinical Associate Professor and Clinical Professor.
3. All clinical non-tenure appointments shall be for a period of time not to exceed three (3) academic years and will be non-tenure earning. Such appointments shall terminate upon expiration of the stated period of appointment without notification of non-renewal. Clinical appointments may be renewed upon expiration of the stated period of time of the contract. Contract renewals and promotions will be based on the quality of the clinical assistant associate or professor contributions within their primary responsibilities.
4. Non-tenure clinical assistant professor, clinical associate professor, or clinical professor may request to move to the tenure track. The decision to move to the tenure track will be made by the Dean of the CONHS with approval from the Provost. Time spent in a

clinical rank shall not apply to the tenure probationary period. Clinical faculty who move to tenure track may subsequently request to return to the clinical track. Once a Clinical Faculty member who has spent time on the tenure track returns to clinical faculty, they shall be precluded from requesting to return to the tenured track.

5. If the request to move from clinical track to the tenure track is approved, the clinical rank shall not be determinative of the tenure track rank.
6. CONHS faculty hired in a tenure-track position may request a move to a clinical faculty rank upon approval of the Dean.

Ranks

Three non-tenure ranks are defined to accommodate the diverse contributions of the CONHS faculty. Clinical faculty are expected to aid in the communication of new knowledge in an effective and scholarly way to students, colleagues and other professional groups and to facilitate or assist in generation of new knowledge by their collegial relationship with other TAMU faculty.

1. **Clinical Assistant Professor:** This rank is for those individuals who have completed a master's degree in their professional field. Individuals holding these ranks are qualified as an independent teaching and supervising students in the clinical setting; recognition by students, colleagues and/or peers for teaching abilities. Individuals also carry significant institutional service responsibilities on behalf of the CONHS.
2. **Clinical Associate Professor:** This rank is for those individuals who have a master's degree, earned doctorate or other appropriate terminal degree. In nursing the individual must hold an unencumbered RN license in Texas. Promotion in this rank requires excellence and creativity as an independent educator and teaching and supervising students in the clinical setting as demonstrated by local and/or regional reputation. Faculty holding this rank carry significant expectations related to the scholarship of effective teaching strategies.
3. **Clinical Professor:** This rank is for those individuals who have completed a master's degree, an earned doctorate in their profession. Promotion to Professor as a clinical faculty requires a regional reputation for clinical excellence and innovation. Individuals also carry significant institutional service responsibilities on behalf of the CONHS. Significant scholarship of application is an expectation of this rank.

Annual Review and Promotion:

1. Review of clinical faculty for promotion will be independent from the process used for tenure and/or promotion of tenured faculty.

2. The CONHS shall maintain written standards which detail expectations for promotion to each rank. The standards must be approved by the Dean and the voting members of the CONHS. A copy of these standards shall be made available to all clinical faculty.
3. All clinical faculty shall be reviewed annually following the policy established by the CONHS. In reviewing clinical faculty, the review shall use the CONHS standards for evaluation. A written evaluation shall be placed in the faculty member's personnel file after presentation to the faculty.
4. Clinical faculty may request promotion to the next highest rank by submitting a written letter to the Dean of the College. A copy of the letter will go to the CONHS Faculty Affairs Committee. There is no minimum time requirement in rank in order to request promotion to the next rank. Faculty members who are denied promotion remain in their current rank and may request promotion in the subsequent year(s).
5. Candidates for promotion will meet with the Dean of the College to discuss requests for promotion for both tenure and non-tenure track options.

Promotion Review Process:

1. Each candidate for promotion will submit a dossier to the Dean by October 15th. The dossier for change in clinical rank must include the following:
 - a. The candidate statement presenting evidence that the criteria for the rank sought by the candidate have been met.
 - b. A copy of the letter to the Dean of the CONHS requesting promotion in rank.
 - c. Current curriculum vitae.
 - d. Copies of Professional Performance Profile (PPP).
 - e. Copies of the Dean of the CONHS, student and peer teaching and clinical evaluations.
 - f. Copies of Nursing Continuing Education Units (CEUs).
 - g. Letters of documentation from three individuals speaking to the quality of contributions and accomplishments of the faculty member. Letters may address one or more areas. Candidates are responsible for assuring that the areas of teaching, clinical teaching and supervision of students in the clinical area, scholarship and service to the CONHS and University are documented as outlined by the criteria for promotion. At least one of the letters shall be from outside the CONHS.
 - h. A faculty performance summary form summarizing the faculty member's accomplishments in the areas of teaching, clinical teaching, scholarship and supervision of students in the clinical area and service to the CONHS and University. This form shall not exceed twenty (20) pages.
 - i. The dossier will be forwarded to the CONHS Faculty Affairs Committee for review. The CONHS Faculty Affairs Committee will make a recommendation to the Dean of the CONHS regarding approval or denial of the specific promotion with appropriate justification.

CSON Faculty Workload

POLICY:

The primary responsibility of TAMIU is the provision of undergraduate and graduate education of the highest quality to students. The standard teaching load in the CSON follows University policy which is usually fifteen (15) semester hours for non-tenure track faculty. The purpose of a workload policy is to ensure equality among the workloads of faculty. Please see [TAMIU Academic Workload](#) However, there may be situations where the faculty member negotiates with the Dean for a reduced workload based upon institution and/or the CSON program needs.

PROCEDURE:

The CSON guidelines are as follows:

1. The general non-tenure track faculty workload per semester is fifteen (15) semester hours credit.
2. Lecture is counted on a one hour of credit to one (1) hour of lecture formula for graduate and undergraduate.
3. Undergraduate clinical experiences are counted using a .667 formula. For every one (1) hour of clinical the faculty receives .667 for a five (5) semester hour course where three (3) hours is lecture and two (2) hours is clinical. The calculation would be as follows:

3 hours of lecture = 3 semester hours of credit

2 hours of clinical is multiplied by 3 (normal ratio for nursing courses)

2 hours of clinical X 3 X .667= 4 semester hour credit

Total semester hours credits = 7 semester hours credit

**CNHS Faculty: Department of Communication Science Disorders (CSDO) Workload
POLICY:**

The primary responsibility of TAMIU is the provision of undergraduate and graduate education of the highest quality to students. The standard teaching load in the CNHS-Department of Communication Science Disorders (CSDO) follows University policy, which is usually fifteen (15) semester hours for non-tenured and non-tenure track faculty [TAMIU Academic Workload](#). The purpose of a workload policy is to ensure equality among the workloads of faculty. However, there may be situations where the faculty member negotiates with the Dean for a reduced workload based upon institution and/or the CHNS program needs.

PROCEDURE:

The CNHS for CSDO program workload guidelines are as follows:

1. Lecture is counted on a one hour of credit to one (1) hour of lecture formula for graduate and undergraduate.
2. Undergraduate clinical experiences in the CSDO are calculated using a 0.2 formula. For every one (1) student in lab the faculty receives 0.20 of workload credit.

See the example below:

3 hours of lecture = 3 semester hours of credit

Eight (8) students in the clinical section 0.2×8 (eight) Students = 1.6 semester workload credit.

CONHS Summer Teaching

POLICY:

Summer teaching loads are used to meet the needs of students for required courses.

PROCEDURE:

1. Summer teaching will be on a voluntary basis.
2. Faculty shall notify the Dean of the CONHS if summer employment is desired.
3. The Dean will then make teaching assignments based on the following:
 - a. Faculty member's area of expertise.
 - b. Seniority. If two or more faculty members are equally qualified to teach a course that is offered in the summer, the faculty member with seniority will receive the assignment.
 - c. Course needs of students must match faculty expertise.

CONHS Syllabi Template

POLICY:

In order to provide consistency in the development of CONHS course syllabi, a standardized template will be used to provide essential components of the course.

PROCEDURE:

1. Faculty will use the guidelines as the required outline for all courses in the CONHS.
2. Faculty must ensure that the course description is an exact match with the course description in the TAMIU Catalog.
3. Faculty must match the course objectives with the ones approved by the CONHS and the University Curriculum Committee.
4. No changes can be made in course description and objectives without approval by the CONHS and University Committees.
5. At the beginning of each semester, the courses syllabi will be submitted to the appropriate coordinator, director and the secretary for the Dean.
6. Any syllabus that does not comply with the template will be returned to the faculty for correction.
7. If the syllabus complies with the required format, it will be placed on the University website as required by state law.

CONHS Faculty Assessment of Physical and Financial Resources

POLICY:

Faculty have the responsibility for using a variety of teaching/learning strategies to ensure that course and program learning outcomes are met. College and University administrators have the responsibility to ensure that faculty have adequate resources to meet these objectives and outcomes. Therefore, it is the collaborative responsibility of faculty and administrators to constantly assess the resources of the CONHS to obtain feedback regarding areas that need improvement.

PROCEDURE:

1. Annually full-time faculty members will complete the CONHS Physical and Financial Resource Assessment.
2. The chair of the Assessment and Evaluation Committee will notify faculty of the timeline for completion of the survey.
3. The survey may be conducted in an online format.
4. The data will be analyzed by the Assessment and Evaluation Committee and the results shared with the faculty and the Dean of the CONHS.
5. The Dean of the CONHS will share the information with the Provost.

CONHS Nursing Simulation Lab

Mission Statement of the Simulation Lab

Encourage learning and development of clinical judgment and reasoning with the goal of delivering high quality and safe clinical care.

Objectives of the Simulation Lab

1. Improve clinical and health outcomes for client safety.
2. Enhance clinical learning and performance for nursing students and healthcare professionals at their knowledge level.
3. Provide guidance and leadership to facilitate ongoing use and development of simulation technologies and simulation research
4. Incorporate Evidence-Based Practice into simulation scenario development, implementation, and debriefing through the use of appropriate participant objectives.

Goals of Simulation Lab

1. Demonstrate professional integrity and ethical behaviors at every clinical simulation scenario.
2. Provide a safe learning environment to encourage clinical learning and reduce risk to the client.
3. Create clinical scenarios and simulation objectives achievable within the designated time-frame.
4. Encourage interdisciplinary collaboration for use of simulation in multiple healthcare environments.
5. Establish remediation practices to promote improvement in skill performances and retention of students.

Procedure for Simulation Lab

1. Simulation Laboratory facilities may only be used by the TAMU students in the presence of CONHS faculty or staff personnel in the laboratory.
2. If the users are non-CONHS students, a Simulation Laboratory Use Agreement must be completed by the entity seeking to use the lab and approved by the Dean prior to use of the lab.
3. Simulation Lab personnel or designee will supervise use of the lab equipment and manikins at all times.
4. Only those trained in the use of simulation lab may operate simulation equipment. Training of faculty on manikin's software and hardware is provided by the Simulation Lab personnel.
5. Request for simulation dates should be submitted on the first day of the final exam week.
6. Simulation request forms with complete documentation of simulation lab should be submitted at least 2 weeks in advance to the Nursing Lab Supervisor. No verbal request will

be taken. Confirmation email will be sent out to verify that the request can be accommodated.

7. Simulation lab set up walk through will be performed one day previous to the scheduled simulation lab. Exact time for the walk through will be determined by the Nursing Lab Supervisor and Course Faculty.
8. High fidelity simulation labs need to be evaluated by the students at the end of the simulation lab.
9. Instructors are responsible for the direct supervision of their students who are assigned to any learning experience within the lab facilities and settings.
10. Computer lab reservations must be submitted via EMAIL to the Nursing Lab Supervisor at least 48 hours in advance. No verbal request will be taken. Confirmation email will be sent out to verify that the request has been accommodated.
11. Cancellation of any simulation laboratory or computer lab reservation should be made to the Nursing Lab staff as soon as possible in order to make available the time and the space previously reserved.
12. Faculty and students may borrow some educational equipment or media product via the Equipment Check-Out Form. Once this form is submitted and processed, a hold will be placed on the account of the faculty and/or student until the item(s) is returned. All items should be returned within 24 hours unless stated otherwise on the form.
13. All new students admitted with the CSON must sign the Nursing Simulation Confidentiality Agreement. This Agreement is scanned in the student file and the original copy is destroyed.
14. All new students will be asked to sign the TAMIU Model Release. This document will be in placed in the student's file. Any student not signing will be instructed to notify course faculty, at the beginning of each course that they have opted out of any TAMIU photos or electronic pictures.

CONHS Affiliation Agreements

POLICY:

There are two types of Affiliation Agreements used to achieve academic goals. Faculty must negotiate with various health care agencies to provide clinical practice experiences for students. Signed legal affiliations must be reached between the University and these agencies before students are assigned to practice in these clinical agencies. In precepted courses, if no affiliation agreement exists and the agency is providing a preceptor, then the Preceptor/Affiliation Agreement is generally used.

PROCEDURE:

1. Faculty members determine the agency needed for their course.
2. Faculty will ensure the prospective agency meets the following criteria:
 - a. The agency has a philosophy that facilitates achievement of student learning outcomes for the course.
 - b. The agency has adequate professional staff to meet the needs of the patients they serve.
 - c. The agency has adequate professional staff to act as role models for the students.
 - d. The agency has adequate professional staff to collaborate with faculty and students in order to meet course objectives.
 - e. The agency staff expresses an attitude conducive to CONHS students meeting course outcomes.
 - f. The services provided by the agency meet the needs of the CONHS programs.
 - g. The agency is accredited by JCAH or another appropriate accrediting agency.
 - h. The agency is accessible to faculty and students.
 - i. There is adequate and available space for teaching.
 - j. There is adequate and consistent patient census to meet student learning outcomes.
 - k. There are sufficient precautions to provide for the physical safety of the students while at the agency.
3. Once faculty determines criteria are met, they will submit a written request to the Executive Secretary to begin the process of legal agreements. This request should include the following:
 - a. Legal name of agency;
 - b. Street address;
 - c. Chief administrator with telephone number;
 - d. Agency contact person with telephone number;
 - e. Description of the agency services;
 - f. Description of student expectations at the agency.

4. The Dean will have available a list of all agencies with whom the CONHS has contracts.
5. Faculty members are to verify that a (Affiliation Agreement or Preceptor/ Affiliation) has been signed by the appropriate parties before commencing the clinical experience.
6. If a contract with an agency is terminated by the facility, CONHS or TAMIU, written notification and explanation should be submitted to and tracked by the Executive Secretary.

CONHS Record Retention

POLICY:

All student records are to be kept on file by the CONHS for five (5) years following graduation. These records will include the following:

1. All immunizations, background checks, and drug screens.
2. Clinical evaluation by faculty and preceptor
3. Counseling forms;
4. All major correspondence, including degree plan and admission and acceptance letters;

Test grades are kept in each faculty's grade book. Faculty members are encouraged to keep representative samples of student work for review by accrediting bodies.

PROCEDURE:

1. A central file for all CONHS students will be maintained by the CONHS in an electronic format.
2. At the end of each semester, each instructor will provide the Staff Assistant all appropriate information for placement in the students' files.

VI. CONHS STUDENT POLICIES AND PROCEDURES

CONHS Standardized Tests

POLICY:

The CONHS strives for excellence in all educational endeavors. In order to ensure continual assessment and obtainment of essential course information, courses will use national standardized measurement of teaching effectiveness when available. This aggregate data will be used to identify areas of strengths and weaknesses in specific courses.

PROCEDURE:

1. Faculty will identify the appropriate national standardized end of course assessment to be used to assess obtainment of course objectives.
2. Faculty will administer the identified end of course test to all students enrolled in the course.
3. Faculty will analyze the aggregate course data to identify strengths and weaknesses of the course.
4. If the aggregate course score is below 850, then faculty will submit an Evaluation Action Form. Nursing Faculty must address the sub-scores listed below, if they are less than the 850 level of achievement (LOA).
 - a. Dimensions of patient care
 - b. Member of a team
 - c. Research and evidenced based practice
 - d. Basic safety design
 - e. Effective communication
5. The completed Evaluation Action form will be forwarded to the CONHS Assessment and Evaluation Committee and the CONHS Dean.

Requirements for Distance Proctoring of Exam Given by Faculty of the CONHS.

POLICY:

1. All major exams for the CNHS must be proctored; either with the faculty present or at the testing center. If given in the online format, Respondus lockdown browser must be used.
2. In the case of distance (off campus) testing, the Respondus Lockdown Browser and Monitor or similar product used by the university must be used.
 - a. The Respondus lockdown browser is free and instructions for download can be found at <https://www.tamtu.edu/distance/technology/respondus-ldb-and-monitor.shtml>
3. Standardized testing
 - a. In the case of standardized exams, such as HESI or ATI, the CNHS will follow the guidelines and requirements of the standardized testing organization.
 - b. When using the standardized testing via remote proctoring, the student is responsible for all costs associated with the proctoring process such as Examity or the Respondus monitor.
4. Students who have a computer that does not have a webcam or microphone can contact OIT for assistance.

Procedure for Testing using Respondus Lockdown Browser with Monitor:

1. Prior to giving any exams, the faculty must submit a sample exam with Respondus Lockdown Browser and Monitor. It is suggested that a sample exam/quiz folder be set up in the Content area of the course for this practice exam/quiz.
2. The test date and time must be specified; this includes the date and time the test begins and ends. It is suggested all exams be given during a limited period such as less than a 6-hour window.
3. All final exams, except in online courses, must be given at the date and time specified by the university (i.e. started at exactly 9:00AM and ending exactly 11:50AM. The test must be set up in such a way that at the end of the allotted time the exam will automatically close)
4. The student's tabletop or desk, and under the computer must be covered with a dark solid background. (suggestion is black plastic type table cloth that can be reused)
5. Prior to the exam
 - A. The student must show their face and TAMU ID on camera.
 - B. The webcam must be used to show a 360-degree view of the entire room as well as under the table and chair where the student will be sitting. (The door to the room must be kept closed at all times and any interruption to the exam by opening of the door or someone entering the room will result in an automatic zero on the exam.)
 - C. Student must use a mirror to show that the monitor screen, laptop, and keyboard are free of any stickers, post it notes, etc.

- D. After the student uses their cell phone to sign in it must be powered-off and set it face down on the table where it can be seen by the video camera.
- E. No wristwatches or pendants may be worn. No long sleeve shirts or sweaters may be worn. Arms up to elbows must be visible.
- F. No caps or hoodies, earphones or ear buds may be worn.
- G. Absolutely no talking during the exam either to yourself or to someone else. No music can be played during the exam.
- H. Students must not leave the exam or view of camera until the exam is submitted.
- I. All tests will require a password that will not be provided until just prior to the exam.
- J. All tests will begin and end exactly at the time specified (it will automatically shut down at the end of the testing period).
- K. Student failure to follow these guidelines will result in an automatic zero on the exam.

CONHS Faculty and Course Evaluation

POLICY:

All students shall be given the opportunity to evaluate faculty and courses at the completion of each course.

Background

Student evaluation of course and instructor effectiveness is invaluable to instructors as they strive for excellence in teaching performance. Student input serves to enhance the teaching-learning process by providing faculty with appraisals of areas of strengths and areas of needed change and/ or improvement.

A student should regard the evaluation of course faculty as both a privilege and a right, with inherent responsibility for objectivity. This concept necessitates the evaluation be done in a positive manner which focuses on course content, instructor's knowledge and expertise, and content presentation rather than on teacher personality.

The instructor's responsibility in the teaching-learning process is to give serious thought to student input and to implement changes, when appropriate and feasible, within curricular design constraints.

PROCEDURE:

1. For each course the student will be given the opportunity to complete a student evaluation of a face-to-face course or an online course during the time frame for evaluations provided by the University. Each student evaluation of the course and instructor with comments will be anonymous and confidential.
2. Results from the evaluations of both courses and instructors will be reviewed by the Assessment and Evaluation Committee, the Dean of the CONHS, and the faculty.
 - a. Evaluation and Action Plan forms will be filed in a centralized area.
 - b. Evaluation results that fail to obtain a mean score of three on questions 1, 2, 3, and 4 will result in faculty completing the Action Plan form.
3. The Action Plan form will be submitted to the Assessment and Evaluation Committee and the Dean of the CONHS.

CSON MSN Pre/Post-Assessment of Program Objectives

POLICY:

Ongoing assessment of obtainment of student learning objectives is essential. This on-going assessment provides data to measure the effectiveness of the program.

PROCEDURE:

1. At the beginning of the MSN Program, all MSN students will complete a pre-assessment of student's perception of functioning level related to the MSN competencies for FNP and NADM tracks.
2. Students will complete the survey either in a written format or electronically through Typhon.
3. The survey will be administered again at the completion of the program.
4. The pre-post survey will be analyzed for differences and the results reported to the faculty.

CSOEN Evaluation of Curriculum by Nursing Graduates

POLICY:

To ensure excellence of the programs of the CONHS and to assist with ongoing curricula revision at the time of graduation, nursing graduates will be asked to participate in a summative evaluation of the program in the form of a survey. Information obtained from the surveys will be used to enhance and revise the curricula as needed.

BSN PROCEDURE:

1. A Survey of Employment of BSN Nursing Graduates at Time of Graduation and at twelve (12) months will be distributed to all new Traditional (Basic) nursing graduates and Transition (RN/BSN) upon graduation and at twelve (12) months.
2. A Survey of Program Outcomes for Traditional BSN and Transition (RN/BSN) Graduates at time of graduation and one (1) year will be sent via mail or email to all graduates at time of graduation and one (1) year after graduation. The completed graduate survey will be returned via mail or email to the designated CONHS address.
3. The results of the surveys will be compiled by the Assessment and Evaluation Committee and reported to the Dean of the CONHS and faculty.

MSN PROCEDURE:

1. At time of graduation, the following surveys will be conducted among NADM and FNP graduates:
 - a. NFNP – Survey of Obtainment of Student Learning Outcomes
 - b. NADM – Survey of Obtainment of Student Learning Outcomes
 - c. FNP- Survey of Student Employment at Time Graduation
 - d. NADM- Survey of Student Employment at Time of Graduation
2. After 1 year from graduation, the following will surveys will be conducted:
 - a. FNP – Survey of Obtainment of Student Learning Outcomes one (1) year after graduation
 - b. NADM – Survey of Obtainment of Student Learning Outcomes one (1) year after graduation
 - c. FNP Employer Survey
 - d. NADM Employer Survey
 - e. FNP- Survey of Student Employment one (1) year after Graduation
 - f. NADM- Survey of Student Employment one (1) year after Graduation

CONHS Clinical Incident

POLICY:

Each faculty member is responsible for accurate documentation of incidents in the performance of clinical activities. Examples of clinical incidents include: patient safety incidents, and student safety incidents.

PROCEDURE:

1. The student is required to notify faculty at the time of the event and complete the clinical agency's incident report form, if appropriate.
2. The faculty member is responsible for notifying appropriate agency personnel at the time of the event. The agency specific protocol will be followed as defined by the clinical agency policy.
3. The faculty member will counsel the student verbally and in writing regarding the incident. Documentation of the incident on a Clinical Incident form will be forwarded to the Dean's office. The form will then be placed in the student's permanent file.
4. Any incurred expense is the student's responsibility,

CONHS Blood or Body Fluid Exposure

POLICY:

The CONHS is committed to providing a safe and healthful environment for faculty and students. In pursuit of this goal, the following policy is provided to eliminate or minimize exposure to blood borne pathogens. The CONHS recognizes the health care student perform tasks and procedures in which occupational exposure to blood and/or body fluids may occur.

Purpose:

Implement a systematic approach for blood or body fluid exposure which includes all elements required by the Occupational Safety Health Administration (OSHA) blood borne pathogens standard (29 CFR 1910.1030).

PROCEDURE:

1. Immediate treatment is provided to the individual at the clinical site where the injury occurs. The student/ faculty will follow the clinical site Blood borne Pathogen Protocol.
2. Completion of CONHS Incident Report Form is required within twenty-four (24) hours of incident.
3. The faculty member will accompany the student when completing the clinical facility protocol and is responsible for ensuring that all medical actions required by the facility are performed.
4. In the event the student/faculty is unable to follow the clinical site Blood borne Pathogen Protocol for any reason, the student may:
 - a. Consult a private healthcare provider and follow the providers protocol, or
 - b. Report to Student Health Services and follow their protocol.
5. In either event, notification of blood testing results will follow facility medical protocol
6. Any incurred expense is the student's responsibility.
7. The completed Clinical Incident form is forwarded to the Dean of the CONHS and a copy is placed in the student's file.

CSON Clinical Supervision by Preceptor

POLICY:

In some situations, where the CSON students are performing nursing interventions or delegated activities, they will be under the supervision of registered nurse preceptors or other licensed health care professionals.

Registered nurses selected to serve as preceptors shall have a valid Texas RN license and hold a baccalaureate or master's degree in nursing or be an experienced RN, recognized by the nurse manager and/or faculty as a role model in patient care management and the profession of nursing.

Other licensed health care professionals selected to serve as preceptors shall hold a minimum of a bachelor's degree in a specialty field. An example of a licensed health care professional is a medical doctor (MD).

Students are permitted to perform any function that falls within the scope of nursing practice for which they have received educational preparation and training.

PROCEDURE:

1. Clinical preceptors must be affiliated with agencies that have an Affiliation Agreement or Preceptor/Affiliation Agreement with the CONHS.
2. Clinical preceptors will be selected by faculty according to specific course requirements and must demonstrate competence in designated practice areas.
3. Clinical preceptors will be requested to sign a letter of agreement annually using the Clinical Preceptor/ Affiliation Agreement.
4. Lead faculty will provide the preceptor with a Preceptor Evaluation of Student form. Lead faculty will use this evaluation to assess whether the student met the clinical objectives. Faculty have the final responsibility for assessment of a student's obtainment of clinical objectives.

CSON Evaluation of Preceptor and Clinical Agency by Student

POLICY:

To facilitate effective evaluation of clinical educational experiences, students will be provided with the opportunity to assess their preceptor and clinical sites for achievement of course objectives. The purpose of the preceptor/clinical agency evaluation is to facilitate identification of strengths and weaknesses in the educational programs within the CONHS.

BSN PROCEDURE:

1. At the completion of each clinical nursing course, students will be asked to evaluate the preceptor/clinical agency in which they practiced.
2. The Assessment and Evaluation Committee will compute and analyze the results and report the results to faculty and the Dean of the CONHS.

MSN PROCEDURE:

1. At the completion of each clinical MSN course, students will be asked to evaluate the preceptor/clinical agency in which they practiced.
2. The Assessment & Evaluation Committee will analyze the data and report the results to the faculty and Dean of the CONHS.

CSON Preceptor Evaluation of Nursing Student

POLICY:

The CSON may use preceptors to facilitate the learning experience of students in community based agencies. To ensure appropriate assessment of the student in precepted experiences, faculty will maintain on-going communication with the preceptor regarding the obtainment of course objectives. At the completion of the precepted experience, the preceptor will complete the appropriate student evaluation and submit it to the lead faculty of the course.

PROCEDURE:

1. Lead faculty for the course will provide an orientation for the preceptor according to policy.
2. Lead faculty will provide the preceptor the appropriate student evaluation by preceptor form.
3. Lead faculty will use this assessment to evaluate the student's obtainment of clinical objectives. Faculty have the final responsibility for assessment of a student's obtainment of clinical objectives.
4. The preceptor's evaluation of the student will be placed in the student's file.

BSN PROCEDURE:

1. Lead faculty will provide the preceptor the Preceptor Evaluation of Student form. Lead faculty will use this assessment to evaluate the student's obtainment of clinical objectives. Faculty have the final responsibility for assessment of a student's obtainment of clinical objectives.
2. At the completion of every semester, preceptor will evaluate every student they precepted in the clinical area using the Preceptor Evaluation of Student form.
3. Each semester, students will complete a Student Evaluation of Preceptor form, for each of their clinical preceptors.
4. The Assessment & Evaluation Committee will report the results to the faculty.

MSN PROCEDURE:

1. At the completion of every semester, preceptor will evaluate every student they precepted in the clinical area using either a hardcopy or electronic form.
2. Student will provide the preceptor the Preceptor Handbook which contains the correct forms to use.
3. The assessment will be reviewed by the course faculty and the aggregate data will be forwarded to the Assessment & Evaluation Committee, the director and the Dean.
4. The Assessment & Evaluation Committee will report the results to the faculty.

CONHS Independent Studies (Learning Contract)

POLICY:

Independent courses in the CONHS are used to provide students and faculty with the flexibility within the curriculum to explore current issues, expand their knowledge in a specialty area and provide remediation for areas of weakness. A student may register for an independent study, if the following conditions have been met:

1. The student has contacted an instructor of the CONHS regarding an appropriate topic and the instructor agrees to be the student's faculty for the Independent Study.
2. The student, with the guidance of the instructor, has written a contract which outlines the independent study, the objectives of the student, the methods used to meet the objectives, the evaluation criteria, a tentative timeline and the amount of course hours granted at the successful completion of the study.

PROCEDURE:

1. The student wishing to register as an independent student shall first contact an instructor within the CONHS. After the instructor has agreed to act as a faculty preceptor, an Internal Independent Study Contract form will be complete by the student and given to the faculty working with the student. Once the faculty member agrees to the contract, it is signed and forwarded to appropriate coordinator/director and Dean of the CONHS.
2. Students will be registered for the course by the CONHS admissions counselor.

CONHS Student Attrition

POLICY:

The CONHS shall insure a systematic method for the collection and analysis of data regarding student attrition. Students withdrawing from the program or failing to graduate will be asked to provide data regarding failure to successfully complete the program.

PROCEDURE:

1. When a student drops, withdraws, or fails a CONHS course, the faculty member will complete the Student Attrition Survey.
2. The form will be forwarded to the CONHS Assessment and Evaluation Committee, the appropriate director and the Dean of the CONHS.
3. A copy of the form will be placed in the student's file and in the student attrition folder in the Dean's office.

CONHS Student Counseling/Conference

POLICY:

It is the responsibility of faculty to provide students with constructive feedback to facilitate successful completion of course requirements.

PROCEDURE:

1. When faculty member identifies an academic or behavioral issue that could negatively impact successful completion of a course, the faculty will arrange a conference meeting with the student.
2. The faculty will identify the problem(s), develop with student input a recommended plan of action to correct the problem.
3. This form may be used to provide recognition for a student who demonstrates excellence in class or clinical.
4. The signed form will be place in the student's file.

CONHS Student Transportation Policy

POLICY:

The purpose of this policy is to promote the safety of the CONHS student learning experiences when located beyond the confines of TAMIU. It is the responsibility of the CONHS to ensure compliance with TAMIU Rule 13.04.99.L1 Student Travel. Students must use sound judgment and follow all state, federal, and/or international laws when traveling. Students are expected to comply with the State of Texas laws on maintaining minimum liability automobile insurance coverage.

PROCEDURE:

1. Students traveling are required to abide by the TAMIU Student Handbook at all times. The Student Handbook can be found online at <http://www.tamtu.edu/scce/studenthandbook.shtml>.
2. CONHS students are responsible for arranging their own form of reliable transportation, including to and from campus, clinical rotation sites and other community activities.
3. Lack of transportation will not be accepted as an excused absence for non-attendance or tardiness at an experiential or clinical learning assignment.
4. Students are responsible for covering all gas and parking fees incurred by their mode of travel.
5. Carpooling and cost sharing with fellow students is recommended whenever feasible.
6. Students who travel 25 miles or more from the student's campus location for an experiential or clinical learning assignment, an appropriate student travel form is required to be completed by the Office of Student Orientation, Leadership, and Engagement prior to the trip. These forms may be accessed on CollegiateLink at <http://tamtu.collegiatelink.net>.

CONHS Emergency Preparedness for Domestic Events

POLICY:

To develop a plan of preparedness, the CONHS will comply with TAMIU's comprehensive emergency management plan which describes how it will mitigate against, prepare for, respond to, and recover from the impact of hazards to public health and safety, including natural disasters, technological accidents, homeland security threats, and other emergency situations. The Emergency Management Plan for TAMIU addresses the steps necessary to ensure continuity of University services in the event of a major disaster as well as the continuity of operations to provide protection and essential services to the University community.

PROCEDURE:

1. In the event of an imminent or actual emergent event, the Dean of the CONHS will be the initial contact for the CONHS, to enact the communication process within the CONHS.
2. The Dean of the CONHS will utilize the existing CONHS organizational structure as the mechanism to disseminate information within the College. The lines of succession are: 1) the Director of Undergraduate Programs, 2) Director of Graduate Programs and 3) Coordinator of Programs.
3. Should the assistance of nursing students be required, senior nursing students would be called out first, followed by junior nursing students.

APPENDIX: CONHS AND CSON FORMS

CONHS Administrative Evaluation Form

Course Name & No.: _____

Term: _____

Evaluator: _____

Check (✓) areas and place comments on separate page if necessary

Team Membership	Strength	Areas of Improvement	Comments
Collaborate with peers.			
Support peers.			
Respect peers as individuals.			
Contribute productively as a course member.			
Facilitate achievement of course goals.			
Support course team decision.			
Provide mentorship to new team members.			
Classroom Teaching			
Relate learning content to course objectives and student outcomes.			
Articulate in-depth knowledge of didactic content.			
Facilitates students' critical thinking in discussion and application of didactic content.			
Promote cooperative student learning according to student level.			
Utilize effective teaching strategies to meet course objectives.			

Clinical Teaching	Strength	Areas of Improvement	Comments
Reinforce desired clinical behaviors according to student levels.			
Provide constructive feedback of student behavior to promote professional functioning.			
Guide student to actively use critical thinking for problem solving and decision making.			
Facilitate student participation in group learning activities.			
Relate theoretical concepts to clinical practicum.			
Provide positive role modeling to students, staff and agency.			
Demonstrate collaborative practice functions with other health care professionals.			
Cultivate contacts within a community to identify potential clinical sites.			
Demonstrate professionalism through adherence to legal and ethical practice standards.			

Administrative Evaluation Form Page 2 of 2

Name of Person completing the evaluation

CONHS Annual Faculty Evaluation Form

Faculty Member: _____

College of Nursing and Health Science: _____

Date: _____

Research (Performance Standards) (Circle One) 0 1 2 3 4 5*

Teaching (Performance Standards) (Circle One) 0 1 2 3 4 5

Service (Performance Standards) (Circle One) 0 1 2 3 4 5

Areas of Strength (Summary) _____

**Areas of Weakness (Summary) _____

Faculty Member Response _____

Faculty Member _____ Date _____

Chair _____ Date _____

Dean _____ Date _____

Provost _____ Date _____

*Scale goes from lowest to highest (0=egregiously deficient to 5=exemplary)

** If faculty member manifests 0 or 1 deficiency (See Professional Development Plan, Policy #6)

Employee Orientation: Self-Paced Faculty Orientation Check-off List

Name: _____ Date: _____

Administrators and CONHS Faculty welcome you to Texas A&M International University. We are very proud of the quality of our programs. Much of this is due to the caliber of faculty who teach and administer these curricula. It is our attempt with this Self-Paced Orientation Check-off List, to inform you of activities, policies, practices and traditions so that you may experience a satisfying “belonging-ness”, resulting in a long, distinguished career here!

- I. Source: Program Coordinators and Directors
 - 1. Orientation to the University and TAMIU System _____
 - 2. Review Faculty/ Staff Handbook _____
 - 3. Review of TAMIU Policy and Procedures _____
 - 4. Policies: University/ College/ School _____
 - a. Travel Regulations/ Forms
 - b. Promotion/ Tenure/ Annual Performance Evaluation
 - c. Roles, rights and responsibilities of faculty
 - d. Tenure track, non-tenure track, part-time and/ or adjunct)
 - e. Workload expectations and assignments
 - f. Office hours
 - g. Role of faculty in teaching, scholarship and service
 - h. Class rules, grade sheets, drop/ add forms
 - 5. Introduction to administrators, managers, staff and faculty _____
 - 6. Parking regulation/ permits/ keys _____
 - 7. School bylaws and committee functions _____
 - 8. Review of philosophy and goals _____
 - 9. Program objectives _____
 - 10. Overview of Curricula and Organizational Principles _____
 - 11. Orientation to evaluation plan _____
 - a. Forms to be utilized
 - b. Personal/ group responses and responsibilities
 - c. Reporting and preserving evaluation data
- II. Source: Lead Course Faculty
 - 1. Focus and purpose of each course _____
 - 2. Frequency of faculty meetings _____
 - 3. Orientation to courses assigned _____
 - 4. Specifics about: _____
 - a. Agencies utilized
 - b. Book orders and desk copies
 - c. Library requests
 - d. Maintenance of “syllabi, exams and statistics of each course”
 - 5. Campus tour of key areas _____
(bookstore, lounge, food services, Nursing Lab)
 - 6. Tour of clinical facilities _____
 - 7. Meetings for coordination _____

- III. Source: Human Resources Office
 - 1. Insurance _____
 - 2. Benefits menu TAMUS _____
 - 3. Payroll and distribution method _____
- IV. Source: Chief Librarian (University New Faculty Orientation)
 - 1. Orientation to Library's physical plan _____
 - 2. Orientation to library resources _____
 - 3. Orientation to online access _____
- V. Source: Director of OIT (University New Faculty Orientation)
 - 1. Orientation to facilities _____
 - 2. Introduction to key resource persons _____
 - 3. Review of services available: _____
 - a. Computer centers network
 - b. Audio-visuals
 - c. Graphics/ resources
 - d. Learning Management System
 - 4. Scheduling of services _____
- VI. Source: Secretary/ Staff Assistant
 - 1. Forms _____
 - 2. Requisitioning work _____
 - 3. Phone system _____
 - 4. Mail set-up _____
 - 5. Copy room _____
 - 6. Duplication services _____
 - 7. Keys _____
 - 8. Office supplies _____
 - 9. Room and event scheduling _____
 - 10. Other _____

CSON Evaluation Action Plan

Semester: _____ Course Number/ Name: _____

Submitted by: _____

Performance Concern	Unmet Learning Outcome/Unit Assessment	Action/Support Provided	Date/Action Timeline	Responsibility	Outcome/Evaluation
<i>List problem identified and/ or findings</i>	<i>List number only</i>	<i>List training or education provided or mentoring activity, etc.; used to develop improve performance</i>	<i>Reassessment date</i>	<i>Faculty position responsible for data</i>	<i>Results/Recommendations/ Completion or Resolved Date</i>
HESI Aggregate Score:					

HESI Scores QSEN Category Scores

1. Dimensions of Patient Care Score:					
2. Member of a team Score:					
3. Research and EBP Score:					
4. Basic Safety Design Principles Score:					
5. Effective Communication Score:					
Course Specific Concepts:					

CONHS Evaluation Action Plan

Semester: _____ Course Number/ Name: _____

Submitted by: _____

Performance Concern	Unmet Learning Outcome/Unit Assessment	Action/ Support Provided	Date/Action Timeline	Responsibility	Outcome/ Evaluation
<i>List problem identified and/ or findings</i>	<i>List number only</i>	<i>List training or education provided or mentoring activity, etc.; used to develop improve performance</i>	<i>Reassessment date</i>	<i>Faculty position responsible for data</i>	<i>Results/Recommendations/ Completion or Resolved Date</i>
Student Evaluation of Course:					

Category Scores

1. Item 1					
2. Item 2					
3. Item 3					
4. Item 4					
Student Comments:					

CONHS Faculty Physical and Financial Resource Assessment

1. Physical Resources

Question	Strongly Agree	Agree	Strongly Disagree	Disagree	Don't Know
The classrooms are adequate and meet the teaching and learning needs of the students.					
The student computer lab is adequate and meets the students' needs to work on assignments, practice test questions, printing, etc.					
The lab has sufficient mannequins to meet the teaching and learning needs of the students.					
There are sufficient supplies to meet the teaching and learning needs of the students.					
Staff in the lab provides adequate support to run the patient scenarios in skills labs for my course.					
The faculty offices have adequate resources; i.e. computer and printer capabilities, to meet the teaching needs.					
The faculty workroom has adequate equipment; i.e. printer, FAX machine and etc. to meet teaching needs.					
The physical environment meets ADA requirements for access for the teaching/ learning needs of the students.					

Comments:

2. Financial Resources

Question	Strongly Agree	Agree	Strongly Disagree	Disagree	Don't Know
The CONHS has adequate funds to facilitate my faculty development needs.					
The CONHS has adequate faculty FTEs to meet the curricular needs for the CONHS programs.					
The CONHS has adequate secretarial staff to help me accomplish my teaching responsibilities.					
The CONHS has adequate administrative resources for the effective functioning of the CONHS.					
The CONHS has adequate work study support to help me accomplish my teaching responsibilities.					
Staff in the lab provides adequate support to run the patient scenarios in skills labs for my course.					
The CONHS has adequate OIT support to meet the needs for the instructional delivery of courses.					
The assigned OIT staff facilitates faculty to meet course needs.					

Comments:

Library Resources:

Question	Strongly Agree	Agree	Strongly Disagree	Disagree	Don't Know
The library has adequate resources to meet the learning needs for my course.					
The library has adequate electronic databases for students to use to meet the objective of my course.					
The library has adequate online journals to meet the learning needs of the students in my course.					
The library actively seeks input from faculty regarding needed resources.					
The library has adequate staff to meet the objectives of my course.					
The library has adequate staff to meet faculty research needs.					

Comments:

3. Counseling Service Resources

Question	Strongly Agree	Agree	Strongly Disagree	Disagree	Don't know
The Counseling Service combines a therapeutic and community focus which offers a full continuum of counseling care for students.					
The Office of Student Affairs has adequate staff and resources to meet the needs of students in a crisis situation.					

Comments:

4. Disability Service Resources

Question	Strongly Agree	Agree	Strongly Disagree	Disagree	Don't Know
Disability Services provides students with necessary tools and resources to be successful.					
Disability Services provides students resources and an environment for students to take exams.					

Comments:

CONHS Faculty Peer Evaluation Form

Peer Administrative

Course Name & No.: _____

Term: _____

Name: _____

Evaluator: _____

Check (✓) areas and place comments on separate page if necessary.

Team Membership	Strength	Areas of Improvement	Comments
Collaborate with peers.			
Support peers.			
Respect peers as individuals.			
Contribute productively as a course member.			
Facilitate achievement of course goals.			
Support course team decision			
Provide mentorship to new team members			
Classroom Teaching	Strength	Areas of Improvement	Comments
Relate learning content to course objectives and student outcomes.			
Articulate in-depth knowledge of didactic content.			
Facilitates students' critical thinking in discussion and application of didactic content.			
Promote cooperative student learning according to student level.			
Utilize effective teaching strategies to meet course objectives.			

Clinical Teaching	Strength	Areas of Improvement	Comments
Reinforce desired clinical behaviors according to student levels.			
Provide constructive criticism of student behavior to promote professional functioning.			
Guide student to actively use critical thinking for problem solving and decision making.			
Facilitate student participation in group learning activities.			
Relate theoretical concepts to clinical practicum.			
Provide positive role modeling to students, staff and agency.			
Demonstrate collaborative practice functions with other health care professionals.			
Cultivate contacts within a community to identify potential clinical sites.			
Demonstrate professionalism through adherence to legal and ethical practice standards.			

CONHS Faculty Peer Evaluation Form page 2 of 2

CONHS Merit Funding (Non-Tenure Track Faculty) Worksheet

Teaching (50%)						
Student Evaluations						
Peer Evaluations						
Director Evaluation						
Self/Course Evaluation						
Scholarship (10%)						
Publications						
Presentations						
Grants						
Research						
Service (40%)						
School of Nursing						
CONHS						
University						
Community						
Profession						
Total (Merit Points)						

P.S. This is going to change after Faculty Senate votes on the new proposed CONHS PPE rubric in spring 2022.

CONHS Merit Funding (Tenure Track Faculty) Worksheet

Teaching (50%)						
Student Evaluations						
Peer Evaluations						
Director Evaluation						
Self/Course Evaluation						
Scholarship (40%)						
Publications						
Presentations						
Grants						
Research						
Service (10%)						
School of Nursing						
CONHS						
University						
Community						
Profession						
Total (Merit Points)						

P.S. This is going to change after Faculty Senate votes on the new proposed CONHS PPE rubric in spring 2022.

CSON Nursing Peer Review Report Form A

Nurse Reported: _____

Incident (describe briefly) (the patient/ client shall be identified by initials or number to the extent possible to protect confidentiality BUT the nurse shall provide the name of the patient/ client)

Do you suspect the nurse's behavior is related to chemical dependency or mental illness?

Dependency _____ Mental Illness _____ Neither _____

Witnesses (if any)

Name	Phone	Email
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Committee Member Receiving Report

Name Date

CSON Nursing Peer Review Notice of Complaint Form B

Date: _____

To: _____

From: Faculty Affairs Committee (Peer Review Committee), Dr. F. M. Canseco School of Nursing,
Texas A&M International University, Laredo, Texas

You are hereby notified that your professional nursing practice is being evaluated by the peer review committee of Texas A&M International University CSON. The result of this evaluation MAY OR MAY NOT be reportable to the Texas Board of Nursing.

A hearing, not sooner than 21 calendar days and not more than 45 calendar days from date of this notice, will be held:

Time: _____

Date: _____

Place: _____

You have the right to participate in this process if you choose. You have the right to be accompanied to the hearing by a nurse peer or attorney.

If you retain an attorney, you must notify the Faculty Affairs Committee at least fifteen (15) calendar days before the hearing, which is

_____.

(Last Date for Notification)

The Faculty Affairs Committee _____ does or _____ does not plan to be represented by an attorney.

This notice is accompanied by:

1. A written copy of the professional review plan, policies and procedures of the Faculty Affairs Committee (Peer Review Committee) of the CSON, Texas A&M International University.
2. A copy of Rule 217.19 of the Texas Board of Nursing.
3. A description of the event(s), to be evaluated, including date(s), time(s), location(s) and individual(s) involved.

Discovery

_____ Copies of documents and other material concerning this peer review action accompany this notice or,

_____ You may review, in person or by attorney, the documents or other material concerning this peer review notice on a date at least 15 calendar days prior to appearing before the committee as follows:

Time: _____

Date: _____

Place: _____

The committee will provide you with a witness list, written testimony or evidence, at least 48 hours in advance of the hearing.

You may submit a written statement regarding the event under review below (the patient/ client shall be identified by initials or number to the extent possible to protect confidentiality, pages may be added if necessary):

You may respond or communicate with the committee through the chairman:

Name: _____

Telephone: _____

Email: _____

Address: _____

CSON Nursing Peer Review Report Form C

Date: _____

To: _____

The Faculty Affairs Committee (Peer Review Committee) of the Dr. F. M. Canseco School of Nursing of Texas A&M International University met on _____ to consider a complaint made against _____.

_____ It is the opinion of the committee that there was no deficiency in care attributable to the nurse.

_____ It is the opinion of the committee that there was a deficiency in care attributable to the nurse based on the nurse's judgment, knowledge, training or skill.

_____ The committee recommends no corrective action against the nurse.

_____ The committee recommends the following corrective action against the nurse:

_____ The committee recommends no formal disciplinary action be taken against the nurse.

_____ The committee finds the nurse has engaged in conduct reportable to the Texas Board of Nursing and will report such conduct in accordance with the law.

You may file a written rebuttal, if you wish and return it to the committee chair within ten (10) calendar days:

Committee Chair: _____

CSON Nursing Peer Review Report Form D

Date: _____

To: The Texas Board of Nursing

From: The Peer Review Committee at the Dr. F. M. Canseco School of Nursing, Texas A&M International University

1. Nurse being reported: _____

2. License No.: _____

3. Complaint:

4. Description of corrective action against the nurse:

The Peer Review Committee:

_____ Recommends that the TBON take no formal disciplinary action against the nurse.

_____ Recommends that the TBON take formal disciplinary action against the nurse.

Additional information:

Chair of Peer Review Committee

CSON Nursing Peer Review Report Form E - Confidentiality Agreement

A nursing peer review committee proceeding is confidential and any communication made to a nursing peer review committee is privileged. It is:

- Not subject to subpoena or discovery in any civil matter
- Is not admissible as evidence in a judicial or administrative proceeding
- May not be introduced into evidence in a nursing liability suit arising out of the provision of or a failure to provide nursing services

If a peer review committee determines that a nurse has NOT engaged in conduct required to be reported to the Texas Board of Nursing, an individual whose knowledge of the nurse’s conduct was acquired only through peer review may not report that nurse to the TBON for that conduct. An individual is not prohibited from reporting the nurse if the individual:

- Has independent knowledge about the nurse’s conduct or
- Believes the committee made its determination in bad faith

A member, agent or employee of a nursing peer review committee or a participant in a proceeding before the committee may not disclose or be required to disclose a communication made to the committee or a record or proceeding of the committee.

A person who attends a nursing peer review committee proceeding in any capacity may not disclose or be required to disclose:

- Information acquired in connection with the proceeding
- An opinion formed
- An opinion, recommendation or evaluation of the committee or committee member

I have read the above guidelines, understand them and agree to abide by them.

Signature

Date

Name

CSON Simulation Evaluation

Course Name & No.: _____

Semester/Year: _____

Name or Focus of Simulation: _____

Total Completing Survey: _____

Criteria: What is my perception of the simulations?	Disagree	No Opinion	Agree
1. I understand the purpose and objectives of the simulations			
2. The scenarios resembled a real-life situation			
3. The simulations provided a variety of ways to learn the material.			
4. I had a chance to work with my peers during the simulations.			
5. The simulations helped me learn to prioritize.			
6. The debriefing sessions were helpful as a learning activity.			
7. I was able to participate in the debriefing sessions.			
8. The feedback was constructive.			
9. The simulations will help me better care for healthcare clients.			
10. The simulations made me feel more confident in caring for healthcare clients.			
Comments: 			

CSON Confidentiality Agreement and Nursing Simulation Contract

The CSON has incorporated simulated experiences throughout my curriculum to best represent actual client situations. During these simulated experiences, the roles of clients, family and members of the interprofessional team are fulfilled by students, volunteers, faculty and/or mannequins and I am expected to engage with these actors and/or simulators in a professional and realistic manner.

The simulation mannequins are to be used with respect and be treated as if they were live clients. Situations simulated in the lab are to be used as learning experiences; thus, I will respect the roles of my faculty and peers as well as volunteers and follow the Nursing Simulation Laboratory's Code of Conduct/Behavior during all simulated experiences.

Confidentiality Agreement

As a user of the nursing simulation laboratory, I understand the significance of confidentiality with respect to information concerning simulated clients and fellow students. I will uphold all requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal or state laws regarding confidentiality.

I agree to report any violation(s) of confidentiality that I become aware of to my instructor or facilitator and agree to adhere to the guidelines as outlined below:

- All patient information, actual or simulated, is considered confidential and any inappropriate viewing, discussion or disclosure of this information is a violation whether intentional or unintentional and may lead to disciplinary action as outlined in the CSON policy.
- The nursing simulation laboratory is a learning environment. All scenarios, regardless of their outcome, should be treated in a professional manner. Situations simulated in the lab are to be used as a learning tool and not to be used for humiliation of fellow students.
- I am not to remove, release or make publicly available any documented (written or electronic), observed or recorded client or student information that may be accessible to me as part of a simulated learning experience.
- Simulation and debriefing sessions may be audio-taped and/or videotaped. This recorded information is privileged and confidentiality must be maintained at all times.
- No betadine and no ink pens will be used near the mannequins. In addition, 22G IV catheters will be used for IV starts.

I understand that I must uphold the stipulations outlined in the Nursing Simulation Laboratory manual and the Nursing Simulation Contract and the Confidentiality Agreement as a component of successful progression in the Dr. F. M. Canseco School of nursing program. I have read and understand the Nursing Simulation Lab Policy, and have been provided a copy.

Signature: _____

Printed Name: _____

Date: _____

Nursing

Organization: Dr. F.M. Canseco School of

Simulation Lab Request Form



Dr. F. M. Canseco School of Nursing

Simulation Lab Request Form

Today's Date:

Requested SIM Date:

Walk-through Date & Time:

Alternate Date:



CONTACT INFORMATION:

Faculty Name:

Extension:



Required Fields

Service Type:

Room Requested:

- CNS 118
- Breakout Rooms
- CNS 203
- CNS 204

Description of Event:



THANK YOU: Your request will be processed in the order it was received.

NOTE: For assistance please contact the nursing lab @ 956-326-3107.

CONHS Student Counseling/Conference

Date of Conference: _____ Course Number: _____

Name of Student: _____

Select one: Academic Counseling Counseling for "W" Day
 Clinical Counseling Clinical F Day Counseling Other

Reason for Conference:

Recommended Action:

Comments:

Signature of Student

Date

Signature of Faculty Member

Date

Requesting Administrative Signature

BSN Program Coordinator

Date

BSN Program Director

Date

Dean, CONHS

Date

CONHS Syllabi Template
(Use sections that apply to your course)

Course Name and No: _____

Faculty:

Office Hours: Please include (*Also available by appointment...*)

Course Credits:

Co-requisite:

Prerequisite:

Placement:

Course Description:

Course Objectives: Upon completion of this course the student is expected to:

Content Outline:

Teaching Strategies:

Required Texts:

Recommended Textbooks:

Minimum Technology Requirements:

It is recommended that students meet the technical requirements listed on the Instructional Technology and Distance Education Services' webpage when using the Blackboard, the learning management system (LMS) of the University. Below is information regarding orientation to Bb. Additionally, students can find assistance in Bb under the "Student Support" tab of Bb, information on technology support services, academic support services, student support services, and accessibility support services may be found there. Additionally, Atomic Learning training videos may be beneficial if any students lacking technology skills.

Students should have knowledge of basic computer and Internet skills, as mentioned on the TAMIU Instructional Technology and Distance Education Services' webpage.

Additional Software. You will need the following additional software: Microsoft PowerPoint for viewing lesson presentations and Microsoft Word for viewing course files and submitting assignments. TAMIU Students may access online versions of this software through their Dusty Office 365 account at <https://dusty.tamiu.edu/>. This site also provides students access to download the Microsoft suite for educational use. See instructions for downloading the Microsoft Office suite. Additional skills required for this course may include knowing how to use Turnitin. You may find the accessibility and privacy policies of these technologies on the following pages: Accessibility Statements and Privacy Statements.

Method of Evaluation and Course Requirements:

CLASSROOM	Percent
<i>SAMPLE TABLE</i>	

COURSE POLICIES:

Clinical Objectives: (found on clinical evaluation form)

Clinical Hour Breakdown: This course has a total of XX hours of clinical.

Clinical Experience	Hours
Total	

New Skills introduced in this course:

1. Medication administration (topical, oral, vaginal, rectal, intradermal, intramuscular, subcutaneous)
2. Bathing/Bedmaking
3. Etc.

Clinical Activities: Required clinical paperwork will be graded as pass/fail. A student must pass the clinical component of a course in order to pass the course.

Care plans: Students will complete a care plan for each patient.

Case studies: description here, etc.

College of Nursing and Health Sciences Policies:

I. CSON Grading and Grade Rounding:

1. The CSON has adopted a grading scale in line with other Texas schools of nursing:
A = 90 - 100 B = 80 - 89 C = 75 – 79 F- 74 and below
2. Nursing students must achieve a grade of C or higher in both theory and clinical components of a course in order to pass that course and progress in the program. A grade of F in either theory or clinical components will constitute a course failure.

3. To pass a nursing course and progress in the program, a nursing student must attain an exam average (includes tests and the final) of 75% or higher.
4. To pass a nursing course and progress in the program, a nursing student must attain an overall course average of 75% or higher.
5. Read the CSON Grading and Grade Rounding Policy found in the student handbook for additional information on examinations.

II. CSON Examination Policy and Guidelines:

1. Examinations may be offered in hard copy or on computer and will be proctored.
2. All test items will assess the student's ability to apply and analyze knowledge learned in the course. Test items will challenge the student to apply abilities at assessing, planning, implementing or evaluating nursing care. Testing format for the course is identified in each nursing course syllabus.
3. **Read the CSON Examination Policy and Guidelines** found in the student handbook for additional information on examinations.

III. Nametag/Dress/Appearance: All students must follow the dress code policies.

IV. Student Health Requirements: Students must meet the clinical health and CPR requirements prior to going to the clinical setting for their major. Failure to meet these requirements will result in the inability to attend clinical and a Clinical F day will be given.

V. Clinical Absences: Clinical hours are required to provide students the opportunities to obtain knowledge and skills to function safely as a professional nurse. Punctuality is expected in the professional workplace. Important information affecting client care is communicated to the students at the start of the clinical experience. Therefore, tardiness for clinical/lab/simulation experience jeopardizes the student ability to give safe nursing care. Lab and simulation experiences are considered clinical experiences.

VI. Clinical "F" Day: Unacceptable nursing practice in the clinical setting or unexcused clinical absence is grounds for receiving a clinical fail day, also known as an "F" Day. A clinical setting is any activity for which the student receives clinical hours. A student who receives three (3) clinical "F" days in any clinical course will receive a grade of F for that course.

VII. Criminal background checks or drug screens: As part of this clinical rotation, the CSON adheres to the policies of all clinical facilities with which the SON is affiliated for student clinical learning experiences. As part of this clinical rotation, clinical facility policies may require criminal background checks and/or random drug screen to be conducted on persons interacting with their clients. This documentation will be submitted to the requesting agencies as per their policy.

VIII. Unsafe Clinical Performance/Patient Safety: Any act, omission or commission that may result in harm to the patient is considered unsafe clinical practice. Any student who jeopardizes patient safety will be sent home from clinical and receive a clinical F for that day.

- IX. Confidentiality:** Nurses and other health providers are entrusted with a great deal of personal information about their community, populations and individuals to plan comprehensive care. The student role requires that some of this information be shared with faculty and other students in a clinical conference setting. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulations provides federal protections for personal health information held by covered entities and gives patients an array of rights with respect to that information. Students and faculty share the burden of carefully protecting the privacy of all persons concerned.
- X. Electronic devices/Social Networking:** Strict HIPPA guidelines will be enforced. Cell phones or other electronic devices are not permitted in the clinical setting. Cell phones are not allowed on your person during the clinical experience. The CSON has memorandum of understanding agreement with every clinical institution to adhere to their policies.

Course Schedule:

Date	Required Reading	Activities
<i>SAMPLE TABLE</i>		

TAMIU Policies:

- I. Academic Conduct:** As members in an academic community, students at TAMIU are expected to act with honesty and integrity in their pursuit of higher education, be mature, be self-directed and be able to manage their own affairs. Students who are unwilling to abide by these basic expectations may find themselves facing academic and disciplinary sanctions. Students are expected to share in the responsibility and authority with faculty and staff to challenge and make known acts that violate the TAMIU Honor Code. For more information on the Honor Code, please visit the Office of Student Conduct and Community Engagement website at <https://www.tamtu.edu/scce/>.

TAMIU Faculty has the authority to implement academic policies or impose grade penalties as appropriate. For more information, please visit the TAMIU Faculty Handbook available at <http://www.tamtu.edu/senate/handbook.shtml>.

II. Section 7.01 Violations of Academic Conduct

Academic dishonesty is any act, or attempt, which gives an unfair advantage to the student. Academic dishonesty includes, but is not limited to:

1. Plagiarism – The act of passing off some other person’s ideas, words, or works as one’s own. It includes, but is not limited to, the appropriating, buying, receiving as a “gift”,

or obtaining, by any other means, another's work for submission as one's own academic work.

2. Cheating – An act of deception in which a student misrepresents that he/she has mastered information related to an academic exercise.
3. Lying – Deliberate falsification with the intent to deceive in written or verbal form as it applies to an academic submission.
4. Bribery – Providing, offering or taking rewards in exchange for a grade, an assignment or the aid of academic dishonesty.
5. Collusion – The unauthorized collaboration with another person in preparing academic assignments offered for credit and/or grade, collaborating with others on projects where such collaboration is expressly forbidden, or where the syllabus states the default as being one's own work.
6. Flagrant academic misconduct – Repeated or severe violation(s) of the academic rule.

III. Section 8.01 Right to File Grievance Against Students

Any member of the University community has the right to file a grievance against a student that is in violation of the Student Code of Conduct. Grievances should be filed in writing within 15 University business days of the discovery of the alleged infraction to the Office of Student Conduct and Community Engagement via reporting system (<http://www.tamtu.edu/reportit>). The timelines for the grievance process may be extended for good cause shown or at the discretion of the Office of Student Conduct and Community Engagement.

IV. Anti-discrimination/Title IX

TAMTU does not discriminate or permit harassment against any individual on the basis of race, color, sex, religion, national origin, age, disability, genetic information, veteran status, sexual orientation or gender identity in admissions, educational programs, or employment. If you would like to file a complaint relative to Title IX or any civil rights violation, please contact the TAMTU Director of Title IX & Civil Rights Compliance at 5201 University Boulevard, Killam Library 159B, Laredo, TX 78041, TitleIX@tamtu.edu, 956.326.2857, via the anonymous electronic reporting website, ReportIt, at www.tamtu.edu/reportit, and/or the Office of Civil Rights (Dallas Office), U.S. Department of Education, 1999 Bryan Street, Suite 1620, Dallas, TX 75201-6810, 214.661.9600. You can also report it on TAMTU's anonymous electronic reporting site: www.tamtu.edu/reportit.

V. Pregnant and Parenting Students

Under Title IX of the Education Amendments of 1972, harassment based on sex, including harassment because of pregnancy or related conditions, is prohibited. A pregnant/parenting student must be granted an absence for as long as the student's physician deems the absence medically necessary. It is a violation of Title IX to ask for documentation relative to the pregnant/parenting student's status beyond what would be required for other medical conditions. If a student would like to file a complaint for discrimination due to his or her pregnant or parenting status, please contact the TAMTU

Title IX Coordinator (Lauren A. Jones, J.D., 5201 University Boulevard, KLM 159B, Laredo, TX 78045, TitleIX@tamiu.edu, 956.326.2857) and/or the Office of Civil Rights (Dallas Office, U.S. Department of Education, 1999 Bryan Street, Suite 1620, Dallas, TX 75201-6810, 214.661.9600). You can also report it on TAMIU's anonymous electronic reporting site: www.tamiu.edu/reportit.

The University advises a pregnant or parenting student to notify his or her professor once he or she is aware that accommodations for such will be necessary. It is first recommended that the student and professor attempt to work out the reasonable accommodations with each other. The Office of Student Conduct and Community Engagement can assist the student and professor in working out the reasonable accommodations. In the event that a student will need a leave of absence for a substantial period of time from the University, the University urges the student to consider a Leave of Absence as outlined in the Student Handbook. As part of our efforts to assist and encourage all students towards graduation, TAMIU provides LOA's for students, including pregnant/parenting students, in accordance with the Attendance Rule and the Student LOA Rule.

VI. Early Alert Program

This program is designed to help faculty refer students, at all levels, who may be experiencing personal or academic difficulties for a variety of reasons: work conflicts, hardships, or interpersonal relationships, for example. Once a referral is submitted, an Academic Advisor will reach out to the student via phone or through the student's Dusty email to discuss the referral. Early Alert Referral Form: https://cm.maxient.com/reportingform.php?TexasAMIntlUniv&layout_id=1.

VII. Students with Disabilities

Texas A&M International University seeks to provide reasonable accommodations for all qualified person with disabilities. This University will adhere to all applicable federal, state and local laws. Regulations and guideline with respect to providing reasonable accommodations as required to for equal education opportunity.

TAMIU Canseco School of Nursing has adopted the Core performance standards for Admission and Progression in compliance with the 1990 American with Disabilities Act (ADA).

VIII. Student Attendance and Leave of Absence (LOA) Policy

As part of our efforts to assist and encourage all students towards graduation, TAMIU provides LOA's for students, including pregnant/parenting students, in accordance with the Attendance Rule (Section 3.24) and the Student LOA Rule (Section 3.25) which includes the "Leave of Absence Request" form.

CONHS Confidentiality Agreement

Students enrolled in the CONHS recognize the importance of protection of confidential information about patients and their families and of the operations of agencies where students are placed for clinical experiences. It is the obligation of every student to protect and maintain this confidentiality. All patient information stored via paper or computer system is considered confidential. It is the ethical and legal responsibility of all students to maintain and comply with all confidentiality requirements of the agencies used for clinical experiences.

As a student at the Texas A&M International University-CONHS, I agree to the following:

1. I will protect the confidentiality of all patients, family, and clinical agency information.
2. I will not release unauthorized information to any source.
3. I will not access or attempt to access information other than that information which I have authorized access to and need to know in order to complete my assignment as a student.
4. I will report breaches of this confidentiality agreement by others to my clinical instructor and/or the course coordinator. I understand that failure to report breaches is an ethical violation and subjects me to disciplinary action.
5. I will not put patient/family/clinical agency identifying information on any stored information (disk or hard drive) on my own personal computer or on any other public or private computer.

Signature

Date

Print Name

This form will be placed in my academic file. I was given a copy of this agreement for my records.

CONHS Student Clinical Learning Experiences FERPA Guidelines

Information in student records will be released only to faculty and professional staff for authorized legitimate educational interest. The student's consent is required to release information other than public information to any non-CONHS or non-university system person unless required by law or upon subpoena duces tecum.

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. These rights include the right to provide written consent before CONHS or **XXX** discloses personally identifiable information from the student's education records, except to the extent that FERPA authorizes disclosure without consent.

Student information may be disclosed in certain circumstances:

- to comply with a judicial order or a lawfully issued subpoena;
- to appropriate parties in a health or safety emergency;
- to officials of another school, upon request, in which a student seeks or in tends to enroll;
- in connection with a student's request for or receipt of financial aid, as necessary to determine the eligibility, amount, or conditions of the financial aid, or to enforce the terms and conditions of the aid;
- to certain officials of the U.S. Department of Education, the Comptroller General, to state and local educational authorities, in connection with certain state or federally supported education programs;
- to accrediting organizations to carry out their functions;
- to organizations conducting certain studies for or on behalf of the CONHS; the results of an institutional disciplinary proceeding against the alleged of a crime of violence may be released to the alleged victim of that crime with respect to that crime.

CONHS Clinical Incident Form

1. Name of the Faculty or Student: _____
2. Location of Incident: _____
3. Date of Incident: _____ Day: _____ Time: _____
4. Name of Supervisor: _____
5. If the incident involved physical injury:
 - a. Description of injury (give only factual information): _____

 - b. Description of situation resulting in incident: _____

 - c. Name(s) of any witness to medical care provided at time of injury: _____

6. Description of action taken at time of incident, including name of person who provided initial health care: _____

7. Name(s) of any witnesses to incident: _____

8. Person receiving report of non-injury: _____

Signature of Supervisor and/or Faculty Member

Date

CONHS Nursing Student Attrition/Persistence Documentation

Name of Student: _____ (name must be legible)

Course No. _____ Semester: _____ Academic standing in class: _____
(Semester/Year)

Please check one: _____ **Attrition Form** _____ **Persistence Form**
(Attrition: Student is out of program; Persistence: Student is continuing in program)

Original Entry Class: _____ **Original Graduating Class:** _____

Please check one:

(1) _____ Student dropped or withdrew from the course and/or program

Reason: _____

(2) _____ Student failed the course for the _____ semester
(Semester/Year)

Student's current plans:

Please check one:

(1) _____ Student will repeat _____ in _____ if petition to Admission and
Progression Committee is submitted and approved.

(2) _____ Unknown

Other (Please write current plans here if not #1 or #2 above): _____

*Did the student identify any resources or help that would have prevented his/her dropping or
withdrawing from the course? _____ No _____ Yes (If yes, please comment)

*Did the student identify anything that would have prevented his/her failing the course?
_____ No _____ Yes (If yes, please comment)

Faculty Signature

Date

CSON BSN Program Preceptor Agreement

Name of Preceptor as on Texas RN license: _____

Contact Information: _____

Agency: _____

Texas Nursing License Number: _____ [] Verified On-Line: See Attached

Please choose your highest level of education:

[] ADN [] BSN [] MSN [] NP [] DNP [] PhD/DNSc [] Other: _____

Clinical Qualifications: [] Years of practice: _____ [] Areas of practice: _____

[] Certifications (e.g., BLS, ACLS, etc.): _____

[] Other: _____

Course Title and Number: _____ **Academic Year:** _____

Faculty Responsibilities:

1. Ensure that preceptors meet qualifications in Rule 215.10 or Rule 219.10, as appropriate.
2. Ensure that there are written agreements which delineate the functions and responsibilities of the affiliating agency, clinical preceptor, and nursing program.
3. Ensure that clinical experiences using preceptors occur only after the student has received applicable theory and clinical experiences necessary to safely provide care to client within course or curriculum, as appropriate.
4. Orient the student and preceptor to the clinical experience.
5. Provide the preceptor with the mission, core values, organizational framework, and Differentiated Essential Competencies (DECs) of Graduates of Texas Nursing Programs Evidenced by Knowledge for the School of Nursing; and discuss student expectations, skills performance, student guidelines for performance procedures and methods of evaluation.
6. Assure student compliance with standards on immunization, screening OSHA standards, AHA-Healthcare Provider BLS and current liability insurance coverage as appropriate.
7. Communicate assignments and other essential information to the agency and preceptor.
8. Meet regularly with the clinical preceptor and the student in order to monitor and evaluate the learning experience.
9. Be readily available, e.g., telephone or email for consultation when the students are in the clinical area.
10. Receive feedback from the preceptor regarding student performance.
11. Provide feedback to preceptor regarding performance as preceptor and the clinical learning experience.
12. Provide recognition to the preceptor for participation as a preceptor, e.g. Adjunct faculty plaque or certificate.

Preceptor Responsibilities:

1. Participate in a preceptor orientation.
2. Function as a role model in the clinical setting.
3. Facilitate learning activities for no more than two students.
4. Orient the student(s) to the clinical agency.
5. Guide, facilitate, supervise and monitor the student in achieving the clinical objectives and

- student's performance of skills and other nursing activities to assure safe practice.
6. Collaborate with faculty to review the progress of the student toward meeting clinical learning objectives.
 7. Provide feedback to the student regarding clinical performance.
 8. Contact the faculty if any problem with student performance occurs.
 9. Discuss with faculty/ student arrangements for appropriate coverage for supervision of the student should the preceptor be absent.
 10. Give feedback to the faculty regarding clinical experience for student and suggestions for course development.

Agency Responsibilities:

1. Retain ultimate responsibility for the care of clients.
2. Retain responsibility for preceptor's salary, benefits and liability.
3. Arrange preceptors' work schedules so they are available on student clinical days.
4. Interpret the preceptor program and expectation of students to other personnel who are not directly involved with preceptorship.

Student Responsibilities:

1. Maintain open communications with the preceptor and faculty.
2. Maintain accountability for own learning activities.
3. Prepare for each clinical experience as required.
4. Be accountable for own nursing action while in the clinical setting.
5. Arrange for preceptor's supervision when performing procedures, as appropriate.
6. Contact faculty by telephone or email if faculty assistance is necessary.
7. Adhere to maintaining the confidential nature of all information obtained during clinical experience.

Is the preceptor's philosophy congruent with the CSON? _____

Is the preceptor's agency's client population congruent with the course objectives? _____

Student Agreement Signature/ Date	Signature/ Date
	Preceptor Agreement:
	Faculty Agreement:
	BSN Program Coordinator or BSN Program Director:
	Dean, CONHS:

**CSON Survey of Employment of BSN Nursing Graduates at Time of Graduation & at Twelve
(12) Months**

Traditional (Basic) nursing graduates and Transition (RN/BSN) Track Graduates

Student Name: _____ Date: _____

1. Nursing Program attended:

Traditional/ Basic BSN graduate RN/BSN (already had licensure at time of entry)

2. Do you plan to work as a nurse after graduation? Yes No

If you answered no to the above question, please state the reason: _____

3. In what area of nursing would you like to work after graduation? (i.e., labor and delivery, medical surgical, etc.) _____

4. Have you had an offer of employment? Yes No

If you answered yes to the above question, please indicate the name and location of the facility that extended the offer of employment: _____

5. In what area do you hope to be working in a year from now? _____

6. Do you have plans to continue for a graduate degree in the future? Yes No

a. If you answer yes to the above question, in what type of graduate degree do you plan to seek? Nursing Other _____

b. If you plan to seek a graduate degree in an area other than nursing, please specify the field of interest. _____

7. Have you been hired as a Registered Nurse? Yes No

If so, where? _____

8. If employed as a Registered Nurse, was returning to school a requirement? Yes No
After degree attainment, what are your plans? _____

CSON Survey of Program Outcomes for Nursing Graduates at Time of Graduation and One (1) Year after Graduation

YEAR OF GRADUATION: _____ <input type="checkbox"/> Time of Graduation <input type="checkbox"/> BSN <input type="checkbox"/> One Year after Graduation <input type="checkbox"/> RN/BSN Instructions: Consider the statements below and in the space provided after each one; rank the number that best reflects your opinion.	Never	Seldom	Sometimes	Often	Almost Always	Always
	0	1	2	3	4	5
The CSON prepared me to synthesize knowledge from the arts, humanities, sciences and other disciplines in development of a framework for nursing knowledge and practice.						
The CSON prepared me to explore the effect of variations in health status, developmental processes, values, beliefs and attitudes, history and environment on nursing care needs.						
The CSON prepared me to use critical thinking, clinical judgment/decision making, problem-solving and the research process in the development of nursing and practice.						
The CSON prepared me to assess, diagnose, plan implement and evaluate evidence-based and culturally appropriate safe nursing care with patients, families, populations and communities.						
The CSON prepared me to evaluate utilization of health promotion and strategies in the development of nursing practice.						
The CSON prepared me to develop professional nursing practice frameworks and roles, including the provider of patient-centered care, health care team member/ collaborator, leader/manager, educator, scholar, patient-safety advocate, activist, mentor and entrepreneur.						
The CSON prepared me to evaluate the impact of evolving technological, socioeconomic, political and demographic changes on nursing practice and health care systems.						
The CSON prepared me to adhere to legal and ethical principles in the development of professional nursing practice.						
The CSON prepared me to articulate a commitment to life-long learning.						

The CSON prepared me to participate in nursing and health related service opportunities.

The CSON prepared me to participate in nursing and health related service opportunities.						
------------------------------------------------------------------------------------------	--	--	--	--	--	--

CSON Evaluation of Curriculum by Employer of BSN & RN/BSN Graduate One (1) Year after Graduation

Name of TAMIU, Dr. F. M. Canseco School of Nursing Graduate:

1. Graduation from BSN Program: Month/ Year: _____

2. Employment: How long have you known this employee who graduated from TAMIU, Dr. F. M. Canseco School of Nursing?
 - a. Within three (3) months
 - b. Four (4) – six (6) months
 - c. After six (6) months
 - d. Other: _____

3. If this employee has received a BSN through the RN to BSN program at TAMIU, Dr. F.M. Canseco School of Nursing, how has your unit/agency benefited?

CSON Program Preceptor Agreement

Name of Preceptor as on Texas RN license: _____

Contact Information: _____

Agency: _____

Texas Nursing License Number: _____ [] Verified On-Line: See Attached

Please choose your highest level of education:

[] ADN [] BSN [] MSN [] NP [] DNP [] PhD/DNSc [] Other: _____

Clinical Qualifications: [] Years of practice: _____ [] Areas of practice: _____

[] Certifications (e.g., BLS, ACLS, etc.): _____

[] Other: _____

Course Title and Number: _____ **Academic Year:** _____

Faculty Responsibilities:

1. Ensure that preceptors meet qualifications in Rule 215.10 or Rule 219.10, as appropriate.
2. Ensure that there are written agreements which delineate the functions and responsibilities of the affiliating agency, clinical preceptor, and nursing program.
3. Ensure that clinical experiences using preceptors occur only after the student has received applicable theory and clinical experiences necessary to safely provide care to client within course or curriculum, as appropriate.
4. Orient the student and preceptor to the clinical experience.
5. Provide the preceptor with the mission, core values, organizational framework, and Differentiated Essential Competencies (DECs) of Graduates of Texas Nursing Programs Evidenced by Knowledge for the School of Nursing; and discuss student expectations, skills performance, student guidelines for performance procedures and methods of evaluation.
6. Assure student compliance with standards on immunization, screening OSHA standards, AHA-Healthcare Provider BLS and current liability insurance coverage as appropriate.
7. Communicate assignments and other essential information to the agency and preceptor.
8. Meet regularly with the clinical preceptor and the student in order to monitor and evaluate the learning experience.
9. Be readily available, e.g., telephone or email for consultation when the students are in the clinical area.
10. Receive feedback from the preceptor regarding student performance.
11. Provide feedback to preceptor regarding performance as preceptor and the clinical learning experience.
12. Provide recognition to the preceptor for participation as a preceptor, e.g., Adjunct faculty plaque or certificate.

Preceptor Responsibilities:

1. Participate in a preceptor orientation.
2. Function as a role model in the clinical setting.

3. Facilitate learning activities for no more than two students.
4. Orient the student(s) to the clinical agency.
5. Guide, facilitate, supervise and monitor the student in achieving the clinical objectives and student's performance of skills and other nursing activities to assure safe practice.
6. Collaborate with faculty to review the progress of the student toward meeting clinical learning objectives.
7. Provide feedback to the student regarding clinical performance.
8. Contact the faculty if any problem with student performance occurs.
9. Discuss with faculty/student arrangements for appropriate coverage for supervision of the student should the preceptor be absent.
10. Give feedback to the faculty regarding clinical experience for student and suggestions for course development.

Agency Responsibilities:

1. Retain ultimate responsibility for the care of clients.
2. Retain responsibility for preceptor's salary, benefits and liability.
3. Arrange preceptors' work schedules so they are available on student clinical days.
4. Interpret the preceptor program and expectation of students to other personnel who are not directly involved with preceptorship.

Student Responsibilities:

1. Maintain open communications with the preceptor and faculty.
2. Maintain accountability for own learning activities.
3. Prepare for each clinical experience as required.
4. Be accountable for own nursing action while in the clinical setting.
5. Arrange for preceptor's supervision when performing procedures, as appropriate.
6. Contact faculty by telephone or email if faculty assistance is necessary.
7. Adhere to maintaining the confidential nature of all information obtained during clinical experience.

Is the preceptor's philosophy congruent with the CSON? _____

Is the preceptor's agency's client population congruent with the course objectives? _____

Student Agreement Signature/ Date	Signature/ Date
	Preceptor Agreement:
	Faculty Agreement:
	BSN Program Coordinator or BSN Program Director:
	Dean, CONHS:

**CSON Evaluation of Preceptor and Clinical Agency by Student:
Student Evaluation of Preceptor**

Preceptor Name: _____

Name of Institution: _____

Instructions: Please rate your clinical preceptor by using the Likert Scale to answer the following questions.	Not Applicable	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	0	1	2	3	4	5
1. My preceptor facilitated achievement of the course objectives						
2. My preceptor provided learning experiences for me.						
3. My preceptor was available to help with client care/clinical.						
4. My preceptor fostered a positive learning experience.						
5. My preceptor role modeled professional behaviors.						
6. My preceptor facilitated my understanding of nursing concepts.						

**CSON Evaluation of Preceptor and Clinical Agency by Student:
Student Evaluation of Clinical Agency at End of Semester**

Course Number: _____

Clinical Agency: _____

Unit (If Applicable): _____

Instructions: Please rate your clinical agency by using the following Likert Scale to answer the questions below. If you had clinical rotations in more than one agency please rate each agency separately.	Not Applicable	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	0	1	2	3	4	5
1. The staff related to me in a supportive manner.						
2. The staff acted as a role model for professional nursing.						
3. The agency and/or experience allowed for attention to my personal needs.						
4. The agency was supportive of meeting objectives for a meaningful learning experience.						
5. Comments on clinical agency						

CSON Preceptor Evaluation of Student: BSN

Student Name: _____

Preceptor Name: _____

Dates of clinical: _____

Instructions: Please evaluate the student performance for each item listed below using the following scale: During the preceptor experience, the student:	Not Applicable	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	0	1	2	3	4	5
provided safe, quality nursing care using the nursing process						
communicated therapeutically with patients						
demonstrated a caring attitude						
demonstrated principles of critical decision making.						
actively participated in patient education activities						
managed material and human resources related to patient care effectively						
utilized appropriate resources to address ethical/legal issues						
communicates in an effective, professional manner						
demonstrates responsibility and accountability for personal learning needs						
collaborates with other members of the health care team						

Comments: _____

 Evaluation reviewed by faculty: Faculty signature _____

- Faculty is in agreement with preceptor evaluation.
- Faculty does not agree with preceptor evaluation. Please explain: _____

CONHS Clinical Learning Experiences Agreement (BSN)

This agreement is by and between **TEXAS A&M INTERNATIONAL UNIVERSITY (TAMIU)**, a part of The Texas A&M University System (TAMUS) and an agency of the State of Texas, on behalf of the **COLLEGE OF NURSING & HEALTH SCIENCES (CONHS)**, and **XXX** (TAMIU and CONHS, each a “party” or “Party” and collectively, the “parties” or “Parties”).

CONHS, through its nursing education program, Dr. F.M. Canseco School of Nursing (“Program”) offers a course of study for nursing. A critical component of the Program is providing nursing students (“Students”) with an opportunity to directly apply knowledge and skills gained in the classroom in a clinical setting.

CONHS and **XXX** share a mutual interest in providing students in the Program with experience in clinical care and agree to cooperate in the conduct of educational activities through observation and supervised training of Students.

It is mutually agreed by CONHS and **XXX** as follows:

I. PURPOSE OF AGREEMENT

This agreement sets forth the terms under which **XXX** will provide CONHS faculty, staff and students access to all its facilities consistent with the purpose of this agreement. This agreement also establishes the manner in which CONHS will access **XXX** facilities so that the wellbeing of the clinical site, staff and patients will not be jeopardized.

II. TERM OF AGREEMENT

This agreement shall become effective on _____ and shall remain in effect through _____ unless sooner terminated as provided in this agreement. Either party may terminate this agreement without cause by giving thirty (30) days written notice to the other. CONHS’s students scheduled to participate in the clinical learning experience at the time of any such termination shall be allowed to complete their assigned rotations.

III. SCOPE OF THE CLINICAL LEARNING EXPERIENCE

XXX hereby agrees to provide its facilities to CONHS and CONHS agrees to the usage of such facility according to the terms and conditions described herein. The faculty and students in the Program may utilize **XXX** facilities for educational activities associated with the clinical learning experience through observation and supervised training. TAMIU, CONHS or **XXX** will not incur financial obligation to each other as a result of this agreement. The parties acknowledge ultimate responsibility for all patient care remains with **XXX** and students will not provide services apart from its educational value.

IV. CONHS RESPONSIBILITIES

CONHS agrees to:

1. Select students for the participation in the clinical learning experience, selecting only those students with a satisfactory record in the Program and who have met CONHS requirements including clearance of a federal background check (conducted by the Texas Board of Nursing), immunizations, and drug screens.
2. The decision to exclude or remove students from the clinical learning experience will be the sole decision of CONHS and will be adhered to by **XXX**.
3. Provide **XXX** with copies of the course outline and course objectives, evaluation criteria as requested and a tentative list of course instructors and their qualifications before the beginning of each clinical learning experience rotation.
4. Maintain full responsibility and control for planning and execution of the Program, including curriculum, evaluation of students, administration, instructor appointments, and other matters which are normally reserved CONHS functions, such as granting degrees and advising students.
5. Make representatives of CONHS available to **XXX** for assistance and consultation as the need arises and when possible.
6. Appoint in writing one or more representatives of CONHS to communicate with the clinical learning experience representative during the course of planning for student placement at **XXX**.
7. Provide clinical learning experience instructors and/or preceptors in person or by mobile phone during times that students are at **XXX**.
8. Advise students of their responsibilities regarding participation in the clinical learning experience, including the responsibility to exhibit professional conduct and to follow all rules and standards set by CONHS and **XXX**.
9. Ensure students attend clinical learning experience orientation, if required by **XXX**.
10. Provide **XXX** with written clinical learning experience objectives for each level of student assigned to **XXX**.
11. Prepare clinical learning experience rotation schedules; ensure that **XXX** receives the student schedule before their assignment.
12. CONHS shall ensure that all Students and faculty members shall be familiar with and comply with the Facility's applicable rules, regulations, and policies. CONHS will specifically cover with each Student his or her responsibility to:
 - a. Observe and respect all patient's rights, confidences, and dignity:
 - b. Dress in appropriate attire for the clinical experience as established by the Facility, including name tags, if required: and
 - c. Acknowledge that Facility will not be responsible for providing Students with health care, worker's compensation, or other benefits. Further, Students are required to

obtain personal Health Insurance benefits for the duration of their participation in the Program at their own cost. In the event of an emergency, Facility agrees to provide Students with first aid emergency care, which expense shall be that of Students, not Facility.

13. Provide to **XXX**, when requested, the following information regarding students:
 - a. Proof of liability insurance coverage to be carried by each student in an amount no less than \$1,000,000.00 per incident with a maximum total coverage of \$3,000,000.00;
 - b. Proof of each student's current immunizations as required;
 - c. Proof of current basic life support training for health care providers; and
 - d. Confidentiality statements executed by each student in a form the same or similar to **Exhibit A** attached to this agreement.
14. Educate students on **XXX** communicable disease reporting guidelines.

V. XXX RESPONSIBILITIES

1. Provide an on-site clinical learning experience which is pertinent and meaningful for students.
2. Designate and inform CONHS of a liaison to schedule hours for students participating in the clinical learning experience.
3. Accept from CONHS a number of students appropriate to staff, space and operations of **XXX**.
4. Allow authorized representatives of CONHS to participate in the clinical learning experience planning.
5. Make representatives of **XXX** available to CONHS for assistance and consultation as the need arises and when possible.
6. Encourage and allow students to gain properly supervised clinical learning experiences appropriate to each student's level of knowledge and training.
7. Based on the availability of facilities, allow student access to departments appropriate to each student's level of knowledge and training.
8. Immediately provide medical care in the event of acute injury or illness experienced by a student while participating in the clinical learning experience; the cost of such health care to be the sole responsibility of the student.
9. Initiate the documentation process for student exposures as well as notifying CONHS for further follow up; draw and process baseline blood samples where appropriate for communicable disease exposures.
10. Make necessary determinations to exclude students from individual patient care. CONHS and students will adhere to this decision.

11. Upon making necessary decision to deny a student access to the health care facility, send written notice to CONHS. CONHS and students will adhere to this decision upon receipt of said notice.
12. Provide adequate space for student-faculty conferences.
13. Provide training to Students regarding **XXX**'s rules, regulations, policies, and procedures.
14. Upon request, **XXX** will provide proof that it maintains liability insurance in an amount that is commercially reasonable.
15. **XXX** will provide written notification to CONHS promptly if a claim arises involving a student. **XXX** and CONHS agree to share such information in a manner that protects such disclosures from discovery to the extent possible under applicable federal and state peer review and joint defense laws.
16. **XXX** will resolve any situation in favor of its patients' welfare and restrict a Student to the role of observer when a problem may exist until the incident can be resolved by the staff in charge of the Student or the Student is removed. **XXX** will notify CONHS if such an action is required.

VI. CONHS AND XXX MUTUAL RESPONSIBILITIES

CONHS and **XXX** agree to:

1. The Parties will not discriminate, sexually harass, or retaliate against any employee, applicant or student enrolled in their respective programs because of race, color, sex, religion, national origin, age, disability, genetic information, veteran status, sexual orientation, gender identity, or any other basis protected by law. Should either Party be given actual or constructive notice of discrimination, harassment, or retaliation on the basis of any of these protected classes, the Parties will cooperate in an investigation to ascertain the facts; stop the discriminatory, harassing, or retaliatory conduct; remedy the effects of such conduct; and prevent the recurrence of such conduct. CONHS takes responsibility for training its students on its nondiscrimination policies and grievance procedures, and **XXX** takes responsibility for training its employees on its nondiscrimination policies and grievance procedures. Failure to meet the terms of this section may result in CONHS or **XXX** terminating this agreement immediately effective upon receipt of written notice, notwithstanding the provisions of Section II of this agreement.
2. Determination of the number of students to be assigned to the clinical learning experience shall be a joint decision based on staff and space available at **XXX** and eligible students enrolled in the Program who desire to be educated at **XXX**.

3. This agreement does not prevent **XXX** from participation in any other program. Nor does this agreement prevent CONHS from placing students with other licensed health care facilities.
4. There will be on-going, open communication between CONHS and **XXX** to promote understanding of the expectations and roles of both institutions in providing the clinical learning experience for students. CONHS and **XXX** representatives will meet as needed at the convenience of both parties to coordinate and improve the clinical learning experience.
5. Either CONHS or **XXX** may remove a student participating in the clinical learning experience if, in the opinion of either party, the student is not making satisfactory progress. Any student who does not satisfactorily complete the clinical learning experience or any portion of thereof may repeat the clinical learning experience with **XXX** only with the written approval of both CONHS and **XXX**.
6. At no time shall CONHS students be considered representatives, employees or agents of CONHS or **XXX**. CONHS students are not eligible to receive payment for services rendered, replace or substitute for a CONHS or **XXX** employee, or possess authority to enter into any form of agreement, binding or otherwise, on behalf of CONHS or **XXX**.
7. TAMIU and **XXX** each acknowledge that neither party assumes liability for actions taken by students during the time that they participate in the clinical learning experience with **XXX**.
8. TAMIU is not responsible for providing personal liability or medical insurance covering students.
9. As an agency of the State of Texas, TAMIU may not agree to indemnify or hold any party harmless from any liability or expenses. Neither party to this agreement shall be required to indemnify or hold the other harmless unless ordered to do so by a court of competent jurisdiction.
10. CONHS and **XXX** agree to assist each other in obtaining and maintaining approvals of regulatory agencies needed to conduct the clinical learning experiences under this agreement.

VII. FERPA

To the extent **XXX** generates or maintains educational records related to the participating Student, **XXX** agrees to comply with the Family Educational Rights and Privacy Act of 1974 (FERPA). **XXX** agrees to maintain the confidentiality of the education records in accordance with the provisions of FERPA to the same extent as such law and regulations apply to TAMIU (attached as Exhibit B) and shall limit access only to those employees or agents with a need to know. For purposes of this Agreement, pursuant to FERPA, TAMIU hereby designates **XXX** as a school official with a legitimate education interest in the educational

records of the participating Student(s) to the extent that such access to TAMIU's records is required by **XXX** to carry out the Program.

VIII. HIPAA

TAMIU and **XXX** agree that:

1. **XXX** is a covered entity for purposes of the Health Insurance Portability and Accountability Act (HIPAA) and subject to 45 CFR Parts 160 and 164 (“the HIPAA Privacy Regulation”).
2. To the extent that CONHS students are participating in the Program [and CONHS faculty are providing supervision at **XXX** as part of the Program], such students [and faculty members] shall:
 - a. be considered part of **XXX** workforce for HIPAA compliance purposes in accordance with 45 CFR §160.103, but shall not be construed to be employees of **XXX**;
 - b. receive training by **XXX** facility on, and subject to compliance with, all of **XXX** privacy policies adopted pursuant to the HIPAA Privacy Regulations; and
 - c. not disclose any Protected Health Information, as that term is defined by 45 CFR §160.103, to CONHS which a student accessed through Program participation [or a faculty member accessed through the provision of supervision at **XXX** facility] that has not first been de-identified as provided in 45 CFR §164.514(a);
3. CONHS will not access or request to access any Protected Health Information held or collected by or on behalf of **XXX**, from a student [or faculty member] who is acting as a part of **XXX** workforce as set forth above, or any other source, that has not first been de-identified as provided in 45 CFR §164.514(a); and
4. No services are being provided to **XXX** by CONHS pursuant to this agreement and therefore this agreement does not create a “business associate” relationship as that term is defined in 45 CFR §160.103.

IX. DISPUTE RESOLUTION

To the extent applicable, the dispute resolution process provided in Chapter 2260, Texas Government Code, and the related rules adopted by the Texas Attorney General pursuant to Chapter 2260, shall be used by TAMIU and **XXX** to attempt to resolve any claim for breach of contract made by **XXX** that cannot be resolved in the ordinary course of business. **XXX** shall submit written notice of a claim of breach of contract under this Chapter to the Vice President for Finance and Administration of TAMIU, who shall examine **XXX**'s claim and any counterclaim and negotiate with **XXX** in an effort to resolve the claim.

X. PUBLIC INFORMATION

- (a) **XXX** acknowledges that TAMIU is obligated to strictly comply with the Public Information Act, Chapter 552, Texas Government Code, in responding to any request for public

information pertaining to this Agreement, as well as any other disclosure of information required by applicable Texas law.

- (b) Upon TAMIU's written request, Facility will provide specified public information exchanged or created under this Agreement that is not otherwise excepted from disclosure under chapter 552, Texas Government Code, to TAMIU in a non-proprietary format acceptable to TAMIU. As used in this provision, "public information" has the meaning assigned Section 552.002, Texas Government Code, but only includes information to which TAMIU has a right of access.
- (c) **XXX** acknowledges that TAMIU is required to post a copy of the fully executed Agreement on its internet website in compliance with Section 2261.253(a)(1), Texas Government Code

XI. MISCELLANEOUS PROVISIONS

1. Execution and modification. This agreement is binding only when signed by both parties. Any modifications or amendments must be in writing and signed by both parties.
2. Assignment. This agreement, with the rights and privileges it creates, is assignable only with the written consent of both parties.
3. Force Majeure. Each party shall be excused from any breach of this agreement which is proximately caused by government regulation, war, strike, act of God, or other similar circumstance normally deemed outside the control of well-managed businesses.
4. Entire Agreement. This agreement contains the entire understanding of the parties with respect to clinical learning experiences and supersedes all other written and oral agreements between the parties with respect to the clinical learning experiences. It is acknowledged that other contracts may be executed. Such other agreements are not intended to change or alter this agreement unless expressly stated in writing.
5. Governing Law and Venue. The validity of this agreement and all matters pertaining thereto, including but not limited to, matters of performance, non-performance, breach, remedies, procedures, rights, duties, and interpretation or construction, shall be governed by the Constitution and laws of the State of Texas. Pursuant to Section 85.18, Texas Education Code, venue for any suit filed against TAMIU shall be in the county in which the primary office of the chief executive officer of TAMIU is located, namely, Webb County, Texas.
6. Independent Contractor Status. This agreement will not be construed creating an employer/employee relationship between TAMIU or CONHS and **XXX** or the clinical learning experience students.

7. Headings. Headings appear solely for convenience of reference. Such headings are not part of this agreement and shall not be used to construe it.
8. Provisions. If any provision or provisions of this agreement shall be held to be invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions shall not in any way be affected or impaired thereby.
9. Notice. Any notice required or permitted under this agreement must be in writing, and shall be deemed to be delivered (whether actually received or not) when deposited with the United States Postal Service, postage prepaid, certified mail, return receipt requested, and addressed to the intended recipient at the address set out below. Notice may also be given by regular mail, personal delivery, courier delivery, facsimile transmission, email or other commercially reasonable means and will be effective when actually received. CONHS and **XXX** can change their respective notice address by sending to the other party a notice of the new address. Notices should be addressed as follows:

CONHS:

Texas A&M International
 College of Nursing & Health
 Office of the Dean

XXX:

XXX
 Name:
 Title:

5101 University Blvd.
 Laredo, Texas 78041
 Phone: 956-326-2450
 Fax: 956-326-2449
 Email: glenda.walker@tamiu.edu

Address:
 City, State, zip code:
 Phone:
 Fax:
 Email:

The parties are signing this agreement on the date stated opposite that party's signature.

RECOMMENDED FOR APPROVAL:

Glenda C. Walker, Ph. D.
 Dean

Date

**APPROVED AND ACCEPTED FOR:
TEXAS A&M INTERNATIONAL UNIVERSITY
on behalf of the COLLEGE OF NURSING
AND HEALTH SCIENCES**

Thomas R. Mitchell, Ph.D.
Provost and Vice President for Academic Affairs

**APPROVED AND ACCEPTED FOR:
XXX**

Agency Representative Officer
Title – **XXX**

Date

APPROVED AND ACCEPTED FOR:

Name
Title – **XXX**

Date

EXHIBIT A

CSON Student Clinical Learning Experiences Confidentiality Agreement

Students enrolled in the College of Nursing recognize the importance of protection of confidential information about patients and their families and of the operations of agencies where students are placed for clinical experiences. It is the obligation of every student to protect and maintain this confidentiality. All patient information stored via paper or computer system is considered confidential. It is the ethical and legal responsibility of all students to maintain and comply with all confidentiality requirements of the agencies used for clinical experiences.

As a student at the Texas A&M International University-College of Nursing, I agree to the following:

1. I will protect the confidentiality of all patients, family, and clinical agency information.
2. I will not release unauthorized information to any source.
3. I will not access or attempt to access information other than that information which I have authorized access to and need to know in order to complete my assignment as a student.
4. I will report breaches of this confidentiality agreement by others to my clinical instructor and/or the course coordinator. I understand that failure to report breaches is an ethical violation and subjects me to disciplinary action.
5. I will not put patient/family/clinical agency identifying information on any stored information (disk or hard drive) on my own personal computer or on any other public or private computer.

Signature

Date

Print Name

This form will be placed in my academic file. I was given a copy of this agreement for my records.

EXHIBIT B

CSON Student Clinical Learning Experiences FERPA Guidelines

Information in student records will be released only to faculty and professional staff for authorized legitimate educational interest. The student's consent is required to release information other than public information to any non-CONHS or non-university system person unless required by law or upon subpoena duces tecum.

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. These rights include the right to provide written consent before CONHS or **XXX** discloses personally identifiable information from the student's education records, except to the extent that FERPA authorizes disclosure without consent.

Student information may be disclosed in certain circumstances:

- to comply with a judicial order or a lawfully issued subpoena;
- to appropriate parties in a health or safety emergency;
- to officials of another school, upon request, in which a student seeks or intends to enroll;
- in connection with a student's request for or receipt of financial aid, as necessary to determine the eligibility, amount, or conditions of the financial aid, or to enforce the terms and conditions of the aid;
- to certain officials of the U.S. Department of Education, the Comptroller General, to state and local educational authorities, in connection with certain state or federally supported education programs;
- to accrediting organizations to carry out their functions;
- to organizations conducting certain studies for or on behalf of the CONHS; the results of an institutional disciplinary proceeding against the allegation of a crime of violence may be released to the alleged victim of that crime with respect to that crime.

CSON Agency Preceptor Agreement (MSN)

Approved 05/2016

The preceptor agreement permits Texas A&M International University, Canseco School of Nursing students to participate in a student preceptorship in your organization, _____ . Conditions of this agreement are as follows:

- a. The affiliation period will be from the following Semester/Year: _____ .
- b. The student, _____ , will be under the supervision of _____ , acting as the preceptor.
- c. The CSON faculty member, _____ , serves as the liaison with your organization.

I. Preceptor Responsibilities:

1. Participate in the written agreements between the program, affiliating agency, and preceptor to specify the responsibility of the program to the agency and the responsibility of the preceptor and agency to the programs.
2. Orient the student(s) to the clinical agency.
3. Facilitate the learning needs of the student based on course learning outcomes.
4. Collaborate with faculty to review the progress of the student toward meeting course learning outcomes.
5. Provide timely and appropriate feedback to the student regarding practicum performance.
6. Contact the faculty if assistance is needed or if any problem with student performance occurs.
7. Discuss with faculty/student arrangements for appropriate coverage for supervision of the student should the preceptor be absent.
8. Give feedback to the nursing faculty regarding the practicum experience with the student and suggestions for program development.

II. Course Faculty Responsibilities:

1. Responsible and accountable for coordinating the practicum learning experiences of assigned students.
2. Supervise no more than two (2) students in any one clinical agency setting and six (6) in any one section of the course.
3. Develop criteria for the selection of affiliate agencies or practicum practice settings that address the need for students to observe and practice safe, effective, efficient and responsibly based on the MSN track and course learning outcomes. Select and evaluate affiliate agencies or practicum settings that provide students with opportunities to achieve the learning outcomes of the MSN program.
4. Provide written agreements between the program and the affiliating agencies and

specify the responsibility of the program to the agency and the responsibility of the agency to the program.

5. Develop written agreements jointly with the affiliating agency, review them periodically according to the policies of the program and the affiliating agency, and include provisions for adequate notice of termination.
6. Assume overall responsibility for teaching and evaluation of the student.
7. Meet regularly with practicum preceptor and the student in order to monitor and evaluate the learning experience.
8. Receive evaluation from the preceptor regarding student performance.
9. Receive evaluation from student regarding whether the preceptor and agency met their learning needs/clinical objectives.
10. Provide recognition to the preceptor for participation as a preceptor, for example, with a plaque or certificate.
11. Place all clinical evaluations in the student's record at the end of each semester.

III. Student Responsibilities:

1. Maintain accountability for own learning activities.
2. Prepare measurable objectives for each practicum experience as directed.
3. Be accountable for own nursing actions while in the practicum setting.
4. Arrange for preceptor's supervision when performing all actions in the precepted environment; determine with the preceptor and faculty competencies that can be done independently and reported following action taken. NOTE: Primary patient care can NOT be done in the precepted situation by Nursing Administration students. This needs reworking
5. Notify faculty in the event of unplanned absences of the student or preceptor and any incidents.
6. Follow the MSN policy on confidentiality while in the practicum setting.
7. Adhere to the MSN dress policy for practicum at all times.

IV. CONHS and Preceptor/Agency Mutual Responsibilities:

1. In compliance with federal law, including provisions of Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990, TAMIU and Preceptor/Agency will not discriminate on the basis of race, sex, religion, color, national or ethnic origin, age, disability, sexual orientation, veteran status, gender identity, and genetic information; admission policies; other programs or employment, unless and except if a person's status directly and adversely interferes with his or her ability to perform assigned

duties and cannot be reasonably accommodated.

Determination of the number of students to be assigned to the clinical learning experience shall be a joint decision based on staff and space available at AGENCY and eligible students enrolled in the program who desire to be educated at CONHS.

2. This agreement does not prevent CONHS from participation in any other programs. Nor does this agreement prevent CONHS from placing students with other licensed health care facilities.
3. There will be on-going, open communication between CONHS and Preceptor/Agency to promote understanding of the expectations and roles of both institutions in providing the clinical learning experience for students. CONHS and Preceptor/Agency representative will meet as needed at the convenience of both parties to coordinate and improve the clinical learning experience.
4. Either CONHS or Preceptor/Agency may remove a student participating in the clinical learning experiences if, in the opinion of either party, the student is not making satisfactory progress. Any student who does not satisfactorily complete the clinical learning experience or any portion of thereof may repeat the clinical learning experience with Preceptor/Agency only with the written approval of both CONHS and Preceptor/Agency.

At no time shall CONHS students be considered representatives, employee or agents of CONHS or Preceptor/Agency. CONHS students are not eligible to receive payment for services rendered, replaced or substituted for a CONHS or Preceptor/Agency employee, or possess authority to enter into any form of agreement, binding or otherwise, on behalf of CONHS or Preceptor/Agency.

5. TAMIU and Preceptor/Agency each acknowledge that neither party assumes liability for actions taken by students during the time that they participate in the clinical learning experience with Preceptor/Agency.
6. TAMIU is not responsible for providing personal liability or medical insurance covering students. However, the medical malpractice nursing is provided for all contract clinical hours.
7. As an agency of the State of Texas, TAMIU may not agree to indemnify or hold any party harmless from any liability or expenses. Neither party to this assignment shall be required to indemnify or hold the other harmless unless ordered to do so by a court of competent jurisdiction.
8. CONHS and Preceptor/Agency agree to assist each other in obtaining and maintaining approvals of regulatory agencies needed to conduct the clinical learning experiences under this agreement.

V. FERPA

For purposes of this agreement, pursuant to the Family Educational Rights and Privacy Act of 1974 (FERPA), Preceptor/Agency agrees to maintain the confidentiality of the education records in accordance with the provisions of FERPA attached as Exhibit B.

VI. HIPAA

TAMIU and Preceptor/Agency agree that:

1. Preceptor/Agency is a covered entity for purposes of the Health Insurance Portability and Accountability Act (HIPAA) and subject to 45 CFR Parts 160 and 164 (“the HIPAA Privacy Regulation”).
2. To the extent that CONHS students are participating in the program [and CONHS faculty are providing supervision at Preceptor/Agency as part of the program], such students [and faculty members] shall:
 - a. Be considered part of Preceptor/Agency workforce for HIPAA compliance purposes in accordance with 45 CFR §160.103, but shall not be construed to be employees of Preceptor/Agency.
 - b. Receive training by Preceptor/Agency facility on, and subject to compliance with, all of Preceptor/Agency privacy policies adopted pursuant to the HIPAA Privacy Regulations.
 - c. Not disclose any Protected Health Information, as that term is defined by 45 CFR §160.103, to CONHS which a student accessed through program participation [or a faculty member accessed through the provision of supervision at Preceptor/Agency that has not first been de-identified as provided in 45 CFR §164.514 (a).
3. CONHS will not access or request to access any Protected Health Information held or collected by or on behalf of Preceptor/Agency, from a student [or faculty member] who is acting as a part of Preceptor/Agency workforce as set forth above, or any other source, that has not first been de-identified as provided in 45 CFR §164.514(a) and no services are being provided to Preceptor/Agency by CONHS pursuant to this agreement and therefore this agreement does not create a “business associate” relationship as that term is defined in 45 CFR §160.103.

Signatures below confirm that the above conditions reflect correctly your understanding of an agreement to this affiliation.

Facility/Preceptor:

Preceptor Name/Title: _____

Date of Approval: _____

Agency Name/Title: _____

Date of Approval: _____

TAMIU-Canseco School of Nursing Signatures:

Student: _____ Date: _____

Faculty Member: _____ Date: _____

Director of MSN Program: _____ Date: _____

Dean CONHS: _____ Date of Approval: _____

Preceptor Contact Information

Please Print Clearly:

Preceptor Name:	
Preceptor E-mail:	
Preceptor Mailing Address:	
City/St/ Zip:	
Telephone Numbers:	
Fax office number:	
License Number:	

Brief Preceptor Curriculum Vitae **

The preceptor may choose to complete this brief Curriculum Vitae (CV), to submit an entire CV or submit a current résumé.

Please write clearly:

Professional Education (post-secondary schools attended) and dates attended:

Institution	Degree Earned	Date

Certifications: _____

Academic & Professional Honors:

Professional Experience:

Position	Dates in Position	Institution

Preceptor Experience (specify educational program for preceptored student):

Type of Student Preceptored	Role of Student in Preceptor Relationship	Date of Experience

***If you have not submitted a completed Vitae in the last 12 months, please attach one to this form. Thank you.*

Preceptor's Name: _____ Date: _____

Student's Name: _____ Date: _____

CSON MSN Student's Evaluation of Preceptor/Clinical Agency: FNP

Semester/Course Number/Name: _____

Preceptor Name: _____ Site: _____

Key: Please mark an X in the most appropriate space after each statement below to provide a summative feedback to the preceptor named above.

Frequently	Often	Sometimes	Seldom	Not Observed
4	3	2	1	0

PRECEPTOR	4	3	2	1	0
1. The preceptor's professional experience was appropriate.					
2. The preceptor was available to the student for clinical assistance.					
3. The preceptor allowed the student to formulate a plan of care for clients based on the science of nursing and related disciplines.					
4. The preceptor allowed the student to use cognitive, affective, perceptual, and psychomotor skills to promote health with clients of diverse cultural backgrounds.					
5. The preceptor allowed the student to practice collaborative skills in conjunction with other members of the health care team in order to provide comprehensive care to clients.					
6. The preceptor encouraged the student to assume increasing clinical responsibility during the semester.					
7. The preceptor communicated clear expectations for student learning.					
8. The preceptor provided immediate and adequate feedback with questions and client presentations.					
9. The preceptor was supportive and accessible for consultation.					
10. The preceptor led student through decision making rather than giving own impressions.					
11. The preceptor allowed student to assess client, make diagnoses, and suggest interventions and plan care.					

PRECEPTOR	4	3	2	1	0
12. The preceptor offered constructive comments to student regarding assessment, diagnosing, planned interventions and care.					
13. The preceptor provided an environment for critical thinking and decision making for the student.					
AGENCY/CLINICAL SETTING	4	3	2	1	0
1. The clinical setting provided opportunities for the student to meet the clinical objectives.					
2. The host personnel fostered and encouraged student participation on the health team.					
3. The agency/facility meeting areas (A/V equipment, facilities, etc.) were adequate and accessible.					
4. The agency/facility had supplies, materials, and equipment that met student needs.					
5. The agency/facility was well-equipped to handle the client visits.					
6. The agency/facility provided the student with good learning experiences to meet clinical objectives.					
7. The agency/facility provided the student with an environment that stimulated ideas for research.					
8. The agency/facility personnel demonstrated an understanding of professional responsibility through adherence to legal and ethical standards of practice.					

COMMENTS:

1. STRENGTHS OF PRECEPTOR:

2. WEAKNESSES OF PRECEPTOR:

3. STRENGTHS OF AGENCY:

4. WEAKNESSES OF AGENCY:

Student: _____ Date: _____

Reviewed by: _____ Date: _____

Faculty of Record: _____ Date: _____

CSON MSN Student's Evaluation of Preceptor and Agency: NADM

Semester/Course Number/Name: _____

Preceptor Name: _____ Site: _____

Key: Please mark an X in the most appropriate space after each statement below to provide a summative feedback to the preceptor named above.

Frequently	Often	Sometimes	Seldom	Not Observed
4	3	2	1	0

Preceptor Characteristic	4	3	2	1	0
Participate in planning for management experience orientation with me.					
Willingly completed written agreements between the program, affiliating agency, and preceptor to specify the responsibility of the program to the agency and the responsibility of the preceptor and agency to the program.					
Oriented me to the clinical agency.					
Participated with me in meeting competencies.					
Identified activities that helped me meet the competencies for successful experience completion					
Provided me with continuous feedback regarding my performance during the preceptor experience.					
Advised me when a meeting between my clinical faculty and my preceptor (or other agency personnel) would be of benefit for discussing competency achievement or planning for activities that might fall outside of the competencies but augment my management learning experience.					
Provided work space for me to review documents, meet with appropriate members of the management team or health care team, meet with clinical faculty, and complete activities related to the preceptor experience.					
Willingly spent time with me to answer competency related questions.					
Demonstrated management characteristics that I could compare with AONE competencies and ANA Standards and Scope of Practice.					
Provided me with at least formative (approximately mid-term) and summative (end of experience) evaluations using the Competency Evaluation form.					
Communicated with me using respect and formulated a					

Preceptor Characteristic	4	3	2	1	0
relationship where succession planning characteristics* were evident.					
Guided me in the application of didactic information to practice.					
Facilitated beginning autonomy in a specific role for nurses with advanced preparation.					
Promoted my self-confidence that lead to administrative competency.					
Agency Characteristics	4	3	2	1	0
The agency where I worked (through the preceptor) retained the ultimate responsibility for all administrative duties.					
The preceptor's work schedule was flexible and my preceptor was available a sufficient amount of time to meet my learning needs.					

COMMENTS:

1. STRENGTHS OF PRECEPTOR:

2. WEAKNESSES OF PRECEPTOR:

3. STRENGTHS OF AGENCY:

4. WEAKNESSES OF AGENCY:

Student: _____ Date: _____

Reviewed by: _____ Date: _____

Faculty of Record: _____ Date: _____

CSON Preceptor Evaluation of Student: FNP

FNP CLINICAL EVALUATION FORM
Preceptor Evaluation/Faculty Evaluation/FNP Self-Evaluation Form

Instructions: This form is to be used to evaluate student performance and for FNP student's self-evaluation. Satisfactory clinical performance requires a score of "3 or 4" on the questions items.

Midterm _____ **Final** _____

Student name: _____ Preceptor name: _____
 Evaluation by: Self _____ Preceptor _____ Faculty _____ Course #: _____
 Course Title: _____ Clinical hours completed _____

KEY: Fail 1& 2

- 1 Does not meet standard
- 2 Inconsistently meets standard

Pass 3 & 4

- 3 Meets standard
- 4 Exceeds standards

N/A Not applicable (Advanced Health Assessment Practicum)

COMPETENCIES & CRITICAL ELEMENTS

COMPETENCY 1: Practice Health Promotion, Health Protection, Disease Prevention & treatment		1	2	3	4	N/A	Comments
1.1	Performs comprehensive organized history and physical examinations.						
1.2	Perform periodic focused history and physical examinations.						
1.3	Differentiate between normal and abnormal findings.						
1.4	Develop differential diagnoses by priority.						
1.5	Plan appropriate diagnostic strategies & testing.						
1.6	Performs appropriate diagnostic strategies and technical skills.						
1.7	Diagnoses complex acute, critical, and chronic physical and mental illness.						
1.8	Formulate plan of care to address client's needs.						
1.9	Prescribes appropriate pharmacologic therapy.						
1.10	Prescribes appropriate non-pharmacologic therapies.						
1.11	Promote safety and risk reduction.						
1.12	Initiates appropriate referral and consultations with specialist & support services.						
1.13	Performs therapeutic interventions & procedures to stabilize acute & critical health problems.						
1.14	Accurately documents comprehensive evaluation, assessment and plan of care.						

COMPETENCY 2: Nurse Practitioner-Patient Relationship		1	2	3	4	N/A	Comments
2.1	Maintains confidentiality and privacy.						
2.2	Builds therapeutic relationship with clients & families.						
2.3	Develops mutually acceptable plan of care.						
2.4	Facilitates client and family decision-making regarding complex and critical treatment decisions.						

COMPETENCY 3: Teaching-Coaching and Professional Role		1	2	3	4	N/A	Comments
3.1	Educates clients, families and caregivers regarding current health problems, treatment, complications, health promotion, and disease prevention as appropriate.						
3.2	Utilize an evidence-based approach to care using current standards.						
3.3	Collaborate effectively with members of the health care team.						
3.4	Provides care recognizing professional limitations.						
3.5	Accepts feedback and constructive criticism.						
3.6	Demonstrates self-direction and seeks opportunities to assist other health care team members.						
3.7	Utilizes time effectively and efficiently.						
3.8	Demonstrates professional approach to clients, families and colleagues.						

COMPETENCY 4: Managing & Negotiating Health Delivery Systems & Quality Practice		1	2	3	4	N/A	Comments
4.1	Works collaboratively to manage transitions across the healthcare delivery system.						
4.2	Promote efficient, cost effective use of resources.						
4.3	Identifies how situations related to access, cost, efficacy and quality influence care decisions.						
4.4	Demonstrate responsibility in monitoring practice for quality of care.						
4.5	Functions with credentialing and scope of practice.						

COMPETENCY 5: Demonstrate Cultural Competence		1	2	3	4	N/A	Comments
5.1	Show respect for the inherent dignity of every human being regardless of age, gender, religion, socioeconomic class, sexual orientation and ethnicity.						

5.2	Recognize cultural issues and interact with clients in culturally sensitive ways.						
5.3	Provide appropriate educational materials that address the language and cultural beliefs of the clients.						
5.4	Incorporate cultural preferences, health beliefs, behaviors and practices into management plan.						

COMPETENCY 6: Ensure the quality of health care practice		1	2	3	4	N/A	Comments
6.1	Assume accountability for practice.						
6.2	Engage in self-evaluation concerning practice and use evaluation information to improve.						
6.3	Collaborate and/or consult with members of the health care team about variations in health outcomes.						

Provide additional Comments as needed:

Faculty: Provide a summary of the clients evaluated with the student.

FACULTY/PRECEPTOR SIGNATURE

DATE

STUDENT SIGNATURE

DATE

CSON Evaluation of NADM Student by Faculty & Preceptor

Student name: _____ Preceptor name: _____
 Evaluation by: Self _____ Preceptor _____ Faculty _____ Course #: _____
 Course Title: _____ Clinical hours completed prior to evaluation: _____
 Midterm _____ Final _____

KEY: Fail 1 & 2

Pass 3 & 4

- | | | | |
|---|-------------------------------|---|-------------------|
| 1 | Does not meet standard | 3 | Meets standard |
| 2 | Inconsistently meets standard | 4 | Exceeds standards |
- N/A Not applicable

COMPETENCIES & CRITICAL ELEMENTS

COMPETENCY 1: Communication and Relationship Building		1	2	3	4	N/A	Comments
1.1	Makes oral presentations to diverse audiences on nursing, health care and organizational issues.						
1.2	Identifies how preceptor incorporates caring about people as individuals and demonstrating empathy and concern, while insuring organizational goals and objectives are met.						
1.3	Identifies how the preceptor rewards appropriate behaviors and confronts and manages inappropriate behaviors.						
1.4	Defines multicultural in terms of gender, race, religion, ethnic, sexual orientation, age, etc.						
1.5	Engages staff and others in decision-making.						
1.6	Identifies how the preceptor represents the organization to non-health care constituents within the community.						
1.7	Collaborates with physicians to determine patient care equipment and facility needs.						
1.8	Determines current and future supply and demand for nursing care.						

COMPETENCY 2: KNOWLEDGE OF THE HEALTH CARE ENVIRONMENT		1	2	3	4	N/A	Comments
2.1	Maintains knowledge of current nursing practice and the roles and functions of patient care team members.						

2.2	Articulates various delivery systems and patient care models and the advantages/disadvantages of each.						
2.3	Articulates federal and state payment systems and regulations, as well as private insurance issues, which affect the organization's finances.						
2.4	Interprets impact of legislation at the state or federal level on nursing and health care organizations.						
2.5	Articulates the role of the governing body of the organization in the following areas: Fiduciary responsibilities; Credentialing; and Performance management.						
2.6	Disseminates research findings to patient care team members.						
2.7	Monitors clinical activities to identify both expected and unexpected risks using informatics and healthcare technology.						
2.8	Articulates the organization's decision-making for the utilization/case management model adopted by the organization.						
2.9	Defines metrics as related to process improvement.						
2.10	Identifies areas of risk/liability.						

COMPETENCY 3: Leadership		1	2	3	4	N/A	Comments
3.1	Recognizes one's own method of decision-making and the role of beliefs, values and inferences.						
3.2	Assesses one's personal, professional and career goals and do career planning.						
3.3	Synthesizes and integrate divergent viewpoints for the good of the organization						
3.4	Develops a succession plan for one's own position.						

COMPETENCY 3: Leadership		1	2	3	4	N/A	Comments
3.5	Utilizes change theory to plan for the implementation of organizational changes.						

COMPETENCY 4: Professionalism		1	2	3	4	N/A	Comments
4.1	Answers for the results of own behaviors and actions.						
4.2	Develops own career plan and measure progress according to that plan.						
4.3	Articulates the application of ethical principles to operations.						
4.4	Advocates use of documented best practice.						
4.5	Role models the perspective that patient care is the core of the organization's work.						
4.6	Participates in at least one professional organization.						

COMPETENCY 5: Business Skills		1	2	3	4	N/A	Comments
5.1	Educates patient care team members on financial implications of patient care decisions.						
5.2	Identifies clinical and leadership skills necessary for performing job related tasks.						
5.3	Understands what organizations should measure in order to balance the financial perspective.						
5.4	Analyzes marketing opportunities.						
5.5	Recognizes the utility of nursing involvement in the planning, design, choice and implementation of information systems in the practice environment.						

Provide additional Comments as needed:

Faculty: Provide a summary of the clients evaluated with the student:

FACULTY/PRECEPTOR SIGNATURE

DATE

STUDENT SIGNATURE

DATE

Do you recommend this preceptor for continued use?

Yes: _____ Strengths: _____

Weaknesses (if any): _____

No: _____ Rationale: _____

CSON MSN Evaluation of Curriculum by Graduates: FNP

Using the following scale: 0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent, please rate yourself on the following question items.

1. Access, analyze and interpret nursing and other resources and apply them to advanced nursing practice as appropriate. [PLO#1]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
2. Translate research findings into the advanced nursing role/practice. [PLO#1]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
3. Deliver advanced nursing care that is sensitive to others peoples culture, values, rights, and needs. [PLO#2]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
2. Contribute to the advancement of nursing profession through evidenced-based research and practice. [PLO#3]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
3. Demonstrate leadership, negotiation, teaching, coaching skills to adapt evolving changes in healthcare. [PLO #4]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
4. Work collaboratively with other health professionals in the systematic implementation and evaluation of health care delivery and patient health outcomes. [PLO #4]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
5. Apply ethical principles and professional standards into the advanced nursing role. [PLO #5]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
6. Practice within the legal parameters in the practice of the advanced nursing practice role across the life span. [PLO #5]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
7. Demonstrate enhanced commitment to the improve the advanced nursing profession. [PLO #6]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
8. Demonstrate commitment to life-long learning through scholarship and service.	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent

1. Do you have a position that will allow you to function as a Family Nurse Practitioner?
_____Yes _____No

If yes, did you obtain this position as a result of obtaining your MSN as a Family Nurse Practitioner?

_____Yes _____No

If no, do you plan to seek a position as a Family Nurse Practitioner?

_____Yes _____No

2. Are you currently using the competencies and knowledge you developed in the MSN Family Nurse Practitioner program in your current position?

_____Yes _____No

If yes, please explain. _____

If no, please explain. _____

3. Are you currently working in the South Texas Region?

_____Yes _____No

4. Where are you currently working?

5. Would you recommend the MSN Family Nurse Practitioner program to your friends or colleagues?

_____Yes _____No

If yes, please explain. _____

If no, please explain. _____

6. Did attending the program at TAMIU instill a desire to seek further knowledge in the profession?

_____Yes _____No

Please explain. _____

CSON Evaluation of Curriculum by Graduates: NADM

Instructions: Please rate yourself on the following items using a 5-point scale.

	1	2	3	4	5
	Poor	Fair	Neutral	Good	Excellent
a. Critically analyze, interpret and utilize appropriate knowledge, research and theories to meet the health care needs of diverse client populations across the lifespan. [PLO #1]					
b. Collaboratively plan the delivery of culturally sensitive health care with organizations and the community. [PLO #2]					
c. Contribute to the advancement of nursing profession through evidenced-based research and practice. [PLO #3]					
d. Synthesize leadership management, negotiating, teaching/coaching and consulting roles to foster continual improvement in order to meet changing societal and environmental needs. [PLO #4]					
e. Demonstrate ethical, legal, political, and economic principles in application to management of healthcare delivery across the lifespan. [PLO#5]					
f. Advocate for advanced nursing practice through a commitment to lifelong learning through research and community service. [PLO #6]					

1. Do you have a position that will allow you to function as a nurse administrator?
 Yes No
If yes, did you obtain this position as a result of obtaining your MSN in Nursing Administration?
 Yes No
If no, do you plan to seek a position as a nurse administrator?
 Yes No

2. Are you currently using the competencies and knowledge you developed in the MSN Nursing Administration program in your current administrative position?
 Yes No
If yes, please explain. _____

If no, please explain. _____

3. Are you currently working in the South Texas Region?
 Yes No

4. Where are you currently working?

5. Would you recommend the MSN Nursing Administration program to your friends or colleagues?
 Yes No
If yes, please explain. _____

If no, please explain. _____

6. Did attending the program instill a desire to seek further knowledge in the profession?
 Yes No
Please explain. _____

CSON Employers Evaluation of FNP Graduates

Using the following scale: 0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent, please rate yourself on the following question items.

1. Access, analyze and interpret nursing and other resources and apply them to advanced nursing practice as appropriate. [PLO#1]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
2. Translate research findings into the advanced nursing role/practice. [PLO#1]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
3. Deliver advanced nursing care that is sensitive to others peoples culture, values, rights, and needs. [PLO#2]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
4. Contribute to the advancement of nursing profession through evidenced-based research and practice. [PLO#3]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
5. Demonstrate leadership, negotiation, teaching, coaching skills to adapt evolving changes in healthcare. [PLO #4]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
6. Work collaboratively with other health professionals in the systematic implementation and evaluation of health care delivery and patient health outcomes. [PLO #4]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
7. Apply ethical principles and professional standards into the advanced nursing role. [PLO #5]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
8. Practice within the legal parameters in the practice of the advanced nursing practice role across the life span. [PLO #5]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
9. Demonstrate enhanced commitment to the improve the advanced nursing profession. [PLO #6]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
10. Demonstrate commitment to life-long learning through scholarship and service.	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent

CSON Employers Evaluation of NADM Graduates

Instructions: Please rate yourself on the following items using a 5-point scale.

	1	2	3	4	5
	Poor	Fair	Neutral	Good	Excellent
a. Critically analyze, interpret and utilize appropriate knowledge, research and theories to meet the health care needs of diverse client populations across the lifespan. [PLO #1]					
b. Collaboratively plan the delivery of culturally sensitive health care with organizations and the community. [PLO #2]					
c. Contribute to the advancement of nursing profession through evidenced-based research and practice. [PLO #3]					
d. Synthesize leadership management, negotiating, teaching/coaching and consulting roles to foster continual improvement in order to meet changing societal and environmental needs. [PLO #4]					
e. Demonstrate ethical, legal, political, and economic principles in application to management of healthcare delivery across the lifespan. [PLO#5]					
f. Advocate for advanced nursing practice through a commitment to lifelong learning through research and community service. [PLO #6]					

CSON MSN Pre/Post-Assessment of Program Objectives: FNP

Using the following scale: 0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent, please rate yourself on the following question items.

1. Access, analyze and interpret nursing and other resources and apply them to advanced nursing practice as appropriate. [PLO#1]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
2. Translate research findings into the advanced nursing role/practice. [PLO#1]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
3. Deliver advanced nursing care that is sensitive to others peoples culture, values, rights, and needs. [PLO#2]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
4. Contribute to the advancement of nursing profession through evidenced-based research and practice. [PLO#3]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
5. Demonstrate leadership, negotiation, teaching, coaching skills to adapt evolving changes in healthcare. [PLO #4]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
6. Work collaboratively with other health professionals in the systematic implementation and evaluation of health care delivery and patient health outcomes. [PLO #4]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
7. Apply ethical principles and professional standards into the advanced nursing role. [PLO #5]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
8. Practice within the legal parameters in the practice of the advanced nursing practice role across the life span. [PLO #5]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
9. Demonstrate enhanced commitment to improve the advanced nursing profession. [PLO #6]	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent
10. Demonstrate commitment to life-long learning through scholarship and service.	0=very poor, 1=poor, 2=adequate, 3= neutral, 4=good, 5=excellent

CSON MSN Pre/Post Assessment Program of Objectives: NADM

Instructions: Please rate yourself on the following items using a 5-point scale.

	1	2	3	4	5
	Poor	Fair	Neutral	Good	Excellent
a. Critically analyze, interpret and utilize appropriate knowledge, research and theories to meet the health care needs of diverse client populations across the lifespan. [PLO #1]					
b. Collaboratively plan the delivery of culturally sensitive health care with organizations and the community. [PLO #2]					
c. Contribute to the advancement of nursing profession through evidenced-based research and practice. [PLO #3]					
d. Synthesize leadership management, negotiating, teaching/coaching and consulting roles to foster continual improvement in order to meet changing societal and environmental needs. [PLO #4]					
e. Demonstrate ethical, legal, political, and economic principles in application to management of healthcare delivery across the lifespan. [PLO#5]					
f. Advocate for advanced nursing practice through a commitment to lifelong learning through research and community service. [PLO #6]					

CSON Clinical Learning Experiences Agreement (MSN)

This agreement is by and between **TEXAS A&M INTERNATIONAL UNIVERSITY (TAMIU)**, a part of The Texas A&M University System (TAMUS) and an agency of the State of Texas, on behalf of the **COLLEGE OF NURSING & HEALTH SCIENCES (CONHS)**, and **XXX** (TAMIU and CONHS, each a “party” or “Party” and collectively, the “parties” or “Parties”).

CONHS, through its nursing education program, Dr. F.M. Canseco School of Nursing (“Program”) offers a course of study for nursing. A critical component of the Program is providing graduate nursing students (“Students”) with an opportunity to directly apply knowledge and skills gained in the classroom in a clinical setting.

CONHS and **XXX** share a mutual interest in providing Students in the Program with experience in clinical care and agree to cooperate in the conduct of educational activities through observation and supervised training of Students.

It is mutually agreed by CONHS and **XXX** as follows:

I. PURPOSE OF AGREEMENT

This agreement sets forth the terms under which **XXX** will provide CONHS faculty, staff and Students access to all its facilities consistent with the purpose of this agreement. This agreement also establishes the manner in which CONHS will access **XXX** facilities so that the wellbeing of the clinical site, staff and patients will not be jeopardized.

II. TERM OF AGREEMENT

This agreement shall become effective on _____ and shall remain in effect through _____ unless sooner terminated as provided in this agreement. Either party may terminate this agreement without cause by giving thirty (30) days written notice to the other. CONHS’s Students scheduled to participate in the clinical learning experience at the time of any such termination shall be allowed to complete their assigned rotations.

III. SCOPE OF THE CLINICAL LEARNING EXPERIENCE

XXX hereby agrees to provide its facilities to CONHS and CONHS agrees to the usage of such facility according to the terms and conditions described herein. CONHS faculty and Students in the Program may utilize **XXX** facilities for educational activities associated with the clinical learning experience through observation and supervised training. The scope of supervision may include Student performance in performing minor procedures such as suturing uncomplicated wounds, removal of foreign body, splint and cast application, X ray and EKG interpretation and

similar activities. The parties will not incur financial obligation to the other as a result of this agreement. The parties acknowledge ultimate responsibility for all patient care remains with XXX and Student will not provide services apart from its educational value.

IV. CONHS RESPONSIBILITIES

CONHS agrees to:

1. Select Student for the participation in the clinical learning experience, selecting only those Student with a satisfactory record in the Program and who have met CONHS requirements.
2. The decision to exclude or remove Student from the clinical learning experience will be the sole decision of CONHS and will be adhered to by **XXX**.
3. Provide **XXX** with copies of the course outline and course objectives, evaluation criteria as requested and a tentative list of course instructors and their qualifications before the beginning of each clinical learning experience rotation.
4. Maintain full responsibility and control for planning and execution of the Program, including curriculum, evaluation of Student, administration, instructor appointments, and other matters which are normally reserved CONHS functions, such as granting degrees and advising Student.
5. Make representatives of CONHS available to **XXX** for assistance and consultation as the need arises and when possible.
6. Appoint in writing one or more representatives of CONHS to communicate with the clinical learning experience representative during the course of planning for Student placement at **XXX**.
7. Provide clinical learning experience instructors and/or preceptors in person or by mobile phone during times that Student are at **XXX**.
8. Advise Student of their responsibilities regarding participation in the clinical learning experience, including the responsibility to exhibit professional conduct and to follow all rules and standards set by CONHS and **XXX**.
9. Ensure Student attend clinical learning experience orientation, if required by **XXX**.
10. Provide **XXX** with written clinical learning experience objectives for each level of Student assigned to **XXX**.
11. Prepare clinical learning experience rotation schedules; ensure that **XXX** receives the Student schedule before their assignment.
12. CONHS shall ensure that all Students and faculty members shall be familiar with and comply with the Facility's applicable rules, regulations, and policies. CONHS will specifically cover with each Student his or her responsibility to:
 - a. Observe and respect all patient's rights, confidences, and dignity:

- b. Dress in appropriate attire for the clinical experience as established by the Facility, including name tags, if required: and
 - c. Acknowledge that Facility will not be responsible for providing Students with health care, worker's compensation, or other benefits. Further, Students are required to obtain personal Health Insurance benefits for the duration of their participation in the Program at their own cost. In the event of an emergency, Facility agrees to provide Students with first aid emergency care, which expense shall be that of Students, not Facility.
13. Provide to **XXX**, when requested, the following information regarding Student:
- a. Proof of liability insurance coverage to be carried by each Student in an amount no less than \$1,000,000.00 per incident with a maximum total coverage of \$3,000,000.00;
 - b. Proof of each Student's current immunizations as required;
 - c. Proof of current basic life support training for health care providers; and
 - d. Confidentiality statements executed by each Student in a form the same or similar to Exhibit A attached to this agreement.
14. Educate Students on **XXX** communicable disease reporting guidelines.

V. XXX RESPONSIBILITIES

- 1. Provide an on-site clinical learning experience which is pertinent and meaningful for Students.
- 2. Designate and inform CONHS of a liaison to schedule hours for Students participating in the clinical learning experience.
- 3. Accept from CONHS a number of Students appropriate to staff, space and operations of **XXX**.
- 4. Allow authorized representatives of CONHS to participate in the clinical learning experience planning.
- 5. Make representatives of **XXX** available to CONHS for assistance and consultation as the need arises and when possible.
- 6. Encourage and allow Students to gain properly supervised clinical learning experiences appropriate to each Student's level of knowledge and training;
- 7. Based on the availability of facilities, allow Student access to departments appropriate to each Student's level of knowledge and training;
- 8. Immediately provide medical care in the event of acute injury or illness experienced by a Student while participating in the clinical learning experience; the cost of such health care to be the sole responsibility of the Student;

9. Initiate the documentation process for Student exposures as well as notifying CONHS for further follow up; draw and process baseline blood samples where appropriate for communicable disease exposures;
10. Make necessary determinations to exclude Students from individual patient care. CONHS and Students will adhere to this decision.
11. Upon making necessary decision to deny a Student access to the health care facility, send written notice to CONHS. CONHS and Students will adhere to this decision upon receipt of said notice.
12. Provide adequate space for Student-faculty conferences.
13. Provide training to Students regarding **XXX**'s rules, regulations, policies, and procedures.
14. Upon request, **XXX** will provide proof that it maintains liability insurance in an amount that is commercially reasonable.
15. **XXX** will provide written notification to CONHS promptly if a claim arises involving a student. **XXX** and CONHS agree to share such information in a manner that protects such disclosures from discovery to the extent possible under applicable federal and state peer review and joint defense laws.
16. **XXX** will resolve any situation in favor of its patients' welfare and restrict a Student to the role of observer when a problem may exist until the incident can be resolved by the staff in charge of the Student or the Student is removed. **XXX** will notify CONHS if such an action is required.

VI. CONHS AND XXX MUTUAL RESPONSIBILITIES

1. The Parties will not discriminate, sexually harass, or retaliate against any employee, applicant or student enrolled in their respective programs because of race, color, sex, religion, national origin, age, disability, genetic information, veteran status, sexual orientation, gender identity, or any other basis protected by law. Should either Party be given actual or constructive notice of discrimination, harassment, or retaliation on the basis of any of these protected classes, the Parties will cooperate in an investigation to ascertain the facts; stop the discriminatory, harassing, or retaliatory conduct; remedy the effects of such conduct; and prevent the recurrence of such conduct. CONHS takes responsibility for training its students on its nondiscrimination policies and grievance procedures, and **XXX** takes responsibility for training its employees on its nondiscrimination policies and grievance procedures. Failure to meet the terms of this section may result in CONHS or **XXX** terminating this agreement immediately effective upon receipt of written notice, notwithstanding the provisions of Section II of this agreement.

2. Determination of the number of Students to be assigned to the clinical learning experience shall be a joint decision based on staff and space available at **XXX** and eligible Students enrolled in the Program who desire to be educated at **XXX**.
3. This agreement does not prevent **XXX** from participation in any other program. Nor does this agreement prevent CONHS from placing Students with other licensed health care facilities.
4. There will be on-going, open communication between CONHS and **XXX** to promote understanding of the expectations and roles of both institutions in providing the clinical learning experience for Students. CONHS and **XXX** representatives will meet as needed at the convenience of both parties to coordinate and improve the clinical learning experience.
5. Either CONHS or **XXX** may remove a Student participating in the clinical learning experience if, in the opinion of either party, the Student is not making satisfactory progress. Any Student who does not satisfactorily complete the clinical learning experience or any portion of thereof may repeat the clinical learning experience with **XXX** only with the written approval of both CONHS and **XXX**.
6. At no time shall CONHS Students be considered representatives, employees or agents of CONHS or **XXX**. CONHS Students are not eligible to receive payment for services rendered, replace or substitute for a CONHS or **XXX** employee, or possess authority to enter into any form of agreement, binding or otherwise, on behalf of CONHS or **XXX**.
7. The parties each acknowledge that neither party assumes liability for actions taken by Students during the time that they participate in the clinical learning experience with **XXX**.
8. As an agency of the State of Texas, TAMIU may not agree to indemnify or hold any party harmless from any liability or expenses. Neither party to this agreement shall be required to indemnify or hold the other harmless unless ordered to do so by a court of competent jurisdiction.
9. The parties agree to assist each other in obtaining and maintaining approvals of regulatory agencies needed to conduct the clinical learning experiences under this agreement.

VII. FERPA

To the extent **XXX** generates or maintains educational records related to the participating Student, **XXX** agrees to comply with the Family Educational Rights and Privacy Act of 1974 (FERPA). **XXX** agrees to maintain the confidentiality of the education records in accordance with the provisions of FERPA to the same extent as such law and regulations apply to TAMIU (attached as Exhibit B) and shall limit access only to those employees or agents with a need to know. For purposes of this Agreement, pursuant to FERPA, TAMIU hereby designates **XXX** as a

school official with a legitimate education interest in the educational records of the participating Student(s) to the extent that such access to TAMIU's records is required by **XXX** to carry out the Program.

VIII. HIPAA

TAMIU and **XXX** agree that:

1. **XXX** is a covered entity for purposes of the Health Insurance Portability and Accountability Act (HIPAA) and subject to 45 CFR Parts 160 and 164 ("the HIPAA Privacy Regulation").
2. To the extent that CONHS Students are participating in the Program [and CONHS faculty are providing supervision at **XXX** as part of the Program], such Students [and faculty members] shall:
 - a. be considered part of **XXX** workforce for HIPAA compliance purposes in accordance with 45 CFR §160.103, but shall not be construed to be employees of **XXX**;
 - b. receive training by **XXX** facility on, and subject to compliance with, all of **XXX** privacy policies adopted pursuant to the HIPAA Privacy Regulations; and
 - c. not disclose any Protected Health Information, as that term is defined by 45 CFR §160.103, to CONHS which a Student accessed through Program participation [or a faculty member accessed through the provision of supervision at **XXX** facility] that has not first been de-identified as provided in 45 CFR §164.514(a);
3. CONHS will not access or request to access any Protected Health Information held or collected by or on behalf of **XXX**, from a Student [or faculty member] who is acting as a part of **XXX** workforce as set forth above, or any other source, that has not first been de-identified as provided in 45 CFR §164.514(a); and
4. No services are being provided to **XXX** by CONHS pursuant to this agreement and therefore this agreement does not create a "business associate" relationship as that term is defined in 45 CFR §160.103.

IX. DISPUTE RESOLUTION

To the extent applicable, the dispute resolution process provided in Chapter 2260, *Texas Government Code*, and the related rules adopted by the Texas Attorney General pursuant to Chapter 2260, shall be used by TAMIU and **XXX** to attempt to resolve any claim for breach of contract made by **XXX** that cannot be resolved in the ordinary course of business. **XXX** shall submit written notice of a claim of breach of contract under this Chapter to the Vice President for Finance and Administration of TAMIU, who shall examine **XXX**'s claim and any counterclaim and negotiate with **XXX** in an effort to resolve the claim.

X. PUBLIC INFORMATION

- (a) **XXX** acknowledges that TAMIU is obligated to strictly comply with the Public Information Act, Chapter 552, Texas Government Code, in responding to any request for public information pertaining to this Agreement, as well as any other disclosure of information required by applicable Texas law.
- (b) Upon TAMIU's written request, Facility will provide specified public information exchanged or created under this Agreement that is not otherwise excepted from disclosure under chapter 552, Texas Government Code, to TAMIU in a non-proprietary format acceptable to TAMIU. As used in this provision, "public information" has the meaning assigned Section 552.002, Texas Government Code, but only includes information to which TAMIU has a right of access.
- (c) **XXX** acknowledges that TAMIU is required to post a copy of the fully executed Agreement on its internet website in compliance with Section 2261.253(a)(1), Texas Government Code

XI. MISCELLANEOUS PROVISIONS

1. Execution and modification. This agreement is binding only when signed by both parties. Any modifications or amendments must be in writing and signed by both parties.
2. Assignment. This agreement, with the rights and privileges it creates, is assignable only with the written consent of both parties.
3. Force Majeure. Each party shall be excused from any breach of this agreement which is proximately caused by government regulation, war, strike, act of God, or other similar circumstance normally deemed outside the control of well-managed businesses.
4. Entire Agreement. This agreement contains the entire understanding of the parties with respect to clinical learning experiences and supersedes all other written and oral agreements between the parties with respect to the clinical learning experiences. It is acknowledged that other contracts may be executed. Such other agreements are not intended to change or alter this agreement unless expressly stated in writing.
5. Governing Law and Venue. The validity of this agreement and all matters pertaining thereto, including but not limited to, matters of performance, non-performance, breach, remedies, procedures, rights, duties, and interpretation or construction, shall be governed by the Constitution and laws of the State of Texas. Pursuant to Section 85.18, *Texas Education Code*, venue for any suit filed against TAMIU shall be in the county in which the primary office of the chief executive officer of TAMIU is located, namely, Webb County, Texas.

6. Independent Contractor Status. This agreement will not be construed creating an employer/employee relationship between TAMIU or CONHS and **XXX** or the clinical learning experience Students.
7. Headings. Headings appear solely for convenience of reference. Such headings are not part of this agreement and shall not be used to construe it.
8. Provisions. If any provision or provisions of this agreement shall be held to be invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions shall not in any way be affected or impaired thereby.
9. Notice. Any notice required or permitted under this agreement must be in writing, and shall be deemed to be delivered (whether actually received or not) when deposited with the United States Postal Service, postage prepaid, certified mail, return receipt requested, and addressed to the intended recipient at the address set out below. Notice may also be given by regular mail, personal delivery, courier delivery, facsimile transmission, email or other commercially reasonable means and will be effective when actually received. CONHS and **XXX** can change their respective notice address by sending to the other party a notice of the new address.

Notices should be addressed as follows:

CONHS:

Texas A&M International
 College of Nursing & Health
 Office of the Dean
 5101 University Blvd.
 Laredo, Texas 78041
 Phone: 956-326-2450
 Fax: 956-326-2449
 Email: glenda.walker@tamiu.edu

XXX:

XXX
 Name:
 Title:
 Address:
 City, State, zip code:
 Phone:
 Fax:
 Email:

The parties are signing this agreement on the date stated opposite that party's signature.

RECOMMENDED FOR APPROVAL:

 Glenda C. Walker, Ph.D.
 Dean

 Date

**APPROVED AND ACCEPTED FOR:
TEXAS A&M INTERNATIONAL UNIVERSITY
on behalf of the COLLEGE OF NURSING
AND HEALTH SCIENCES**

Thomas R. Mitchell, Ph.D.
Provost and Vice President for Academic Affairs

Date

**APPROVED AND ACCEPTED FOR:
XXX**

Agency Representative Officer
Title – **XXX**

Date

APPROVED AND ACCEPTED FOR:

Name
Title – **XXX**

Date

EXHIBIT A

Student Clinical Learning Experiences Confidentiality Agreement

Students enrolled in the College of Nursing recognize the importance of protection of confidential information about patients and their families and of the operations of agencies where Students are placed for clinical experiences. It is the obligation of every Student to protect and maintain this confidentiality. All patient information stored via paper or computer system is considered confidential. It is the ethical and legal responsibility of all Students to maintain and comply with all confidentiality requirements of the agencies used for clinical experiences.

As a Student at the Texas A&M International University-College of Nursing, I agree to the following:

1. I will protect the confidentiality of all patients, family, and clinical agency information.
2. I will not release unauthorized information to any source.
3. I will not access or attempt to access information other than that information which I have authorized access to and need to know in order to complete my assignment as a Student.
4. I will report breaches of this confidentiality agreement by others to my clinical instructor and/or the course coordinator. I understand that failure to report breaches is an ethical violation and subjects me to disciplinary action.
5. I will not put patient/family/clinical agency identifying information on any stored information (disk or hard drive) on my own personal computer or on any other public or private computer.

Signature

Date

Print Name

This form will be placed in my academic file. I was given a copy of this agreement for my records.

EXHIBIT B

Student Clinical Learning Experiences FERPA Guidelines

Information in student records will be released only to faculty and professional staff for authorized legitimate educational interest. The student's consent is required to release information other than public information to any non-CONHS or non-university system person unless required by law or upon subpoena duces tecum.

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. These rights include the right to provide written consent before CONHS or XXX discloses personally identifiable information from the student's education records, except to the extent that FERPA authorizes disclosure without consent.

Student information may be disclosed in certain circumstances:

- to comply with a judicial order or a lawfully issued subpoena;
- to appropriate parties in a health or safety emergency;
- to officials of another school, upon request, in which a student seeks or intends to enroll;
- in connection with a student's request for or receipt of financial aid, as necessary to determine the eligibility, amount, or conditions of the financial aid, or to enforce the terms and conditions of the aid;
- to certain officials of the U.S. Department of Education, the Comptroller General, to state and local educational authorities, in connection with certain state or federally supported education programs;
- to accrediting organizations to carry out their functions;
- to organizations conducting certain studies for or on behalf of the CONHS; the results of an institutional disciplinary proceeding against the allegation of a crime of violence may be released to the alleged victim of that crime with respect to that crime.

CONHS Clinical Learning Experiences Agreement (CSDO)

This agreement is by and between **TEXAS A&M INTERNATIONAL UNIVERSITY** (“TAMIU”), a part of The Texas A&M University System (“TAMUS”) and an agency of the State of Texas, on behalf of the **COLLEGE OF NURSING & HEALTH SCIENCES** (“CONHS”), and **XXXXXX** (TAMIU and CONHS, each a “party” or “Party” and collectively, the “parties” or “Parties”).

CONHS, through its **Communication Science Disorders** program, (“Program”) offers a course of study for **Communication Science Disorders**. A critical component of the Program is providing **Communication Science Disorders** students (“Students”) with an opportunity to directly apply knowledge and skills gained in the classroom in a clinical setting.

CONHS and **XXXXXX** share a mutual interest in providing students in the Program with experience in clinical care and agree to cooperate in the conduct of educational activities through observation and supervised training of Students.

It is mutually agreed by CONHS and **XXXXXX** as follows:

I. PURPOSE OF AGREEMENT

This agreement sets forth the terms under which **XXXXXX** will provide CONHS faculty, staff and students access to all its facilities consistent with the purpose of this agreement. This agreement also establishes the manner in which CONHS will access **XXXXXX** facilities so that the wellbeing of the clinical site, staff and patients will not be jeopardized.

II. TERM OF AGREEMENT

This agreement shall become effective on _____ and shall remain in effect through _____ unless sooner terminated as provided in this agreement. Either party may terminate this agreement without cause by giving thirty (30) days written notice to the other. CONHS’s students scheduled to participate in the clinical learning experience at the time of any such termination shall be allowed to complete their assigned rotations.

III. SCOPE OF THE CLINICAL LEARNING EXPERIENCE

XXXXXX hereby agrees to provide its facilities to CONHS and CONHS agrees to the usage of such facility according to the terms and conditions described herein. The faculty and students in the Program may utilize **XXX** facilities for educational activities associated with the clinical learning experience through observation and supervised training. TAMIU, CONHS or **XXX** will not incur financial obligation to each other as a result of this agreement. The parties acknowledge ultimate responsibility for all patient care remains with **XXX** and students will not provide services apart from its educational value.

IV. CONHS RESPONSIBILITIES

CONHS agrees to:

1. Select students for the participation in the clinical learning experience, selecting only those students with a satisfactory record in the Program and who have met CONHS requirements including background check (including sexual offender), and immunizations.
2. The decision to exclude or remove students from the clinical learning experience will be the sole decision of CONHS and will be adhered to by **XXX**.
3. Provide **XXX** with copies of the course outline and course objectives, evaluation criteria as requested and a tentative list of course instructors and their qualifications before the beginning of each clinical learning experience rotation.
4. Maintain full responsibility and control for planning and execution of the Program, including curriculum, evaluation of students, administration, instructor appointments, and other matters which are normally reserved CONHS functions, such as granting degrees and advising students.
5. Make representatives of the **Communication Science Disorders** program available to **XXX** for assistance and consultation as the need arises and when possible.
6. Appoint in writing one or more representatives of the **Communication Science Disorders** program to communicate with the clinical learning experience representative during the course of planning for student placement at **XXX**.
7. Provide clinical learning experience instructors and/or preceptors in person or by mobile phone during times that students are at **XXX**.
8. Advise students of their responsibilities regarding participation in the clinical learning experience, including the responsibility to exhibit professional conduct and to follow all rules and standards set by CONHS and **XXX**.
9. Ensure students attend clinical learning experience orientation, if required by **XXX**.
10. Provide **XXX** with written clinical learning experience objectives for each level of student assigned to **XXX**.
11. Prepare clinical learning experience rotation schedules; ensure that **XXX** receives the student schedule before their assignment.
12. CONHS shall ensure that all Students and faculty members shall be familiar with and comply with the Facility's applicable rules, regulations, and policies. CNSH will specifically cover with each Student his or her responsibility to:
 - a. Observe and respect all patient's rights, confidences, and dignity:
 - b. Dress in appropriate attire for the clinical experience as established by the Facility, including name tags, if required: and

- c. Acknowledge that Facility will not be responsible for providing Students with health care, worker's compensation, or other benefits. In the event of an emergency, Facility agrees to provide Students with first aid emergency care, which expense shall be that of Students, not Facility.
13. Provide to **XXX**, when requested, the following information regarding students:
 - a. Proof of liability insurance coverage to be carried by each student in an amount no less than \$1,000,000.00 per incident with a maximum total coverage of \$3,000,000.00;
 - b. Proof of each student's current immunizations as required;
 - c. Proof of current basic life support training for health care providers; and
 - d. Confidentiality statements executed by each student in a form the same or similar to Exhibit A attached to this agreement.
 14. Educate students on **XXX** communicable disease reporting guidelines.

V. XXX RESPONSIBILITIES

1. Provide an on-site clinical learning experience which is pertinent and meaningful for students.
2. Designate and inform CONHS of a liaison to schedule hours for students participating in the clinical learning experience.
3. Accept from CONHS a number of students appropriate to staff, space and operations of **XXX**.
4. Allow authorized representatives of CONHS to participate in the clinical learning experience planning.
5. Make representatives of **XXX** available to CONHS for assistance and consultation as the need arises and when possible.
6. Encourage and allow students to gain properly supervised clinical learning experiences appropriate to each student's level of knowledge and training.
7. Based on the availability of facilities, allow student access to departments appropriate to each student's level of knowledge and training.
8. Immediately provide medical care in the event of acute injury or illness experienced by a student while participating in the clinical learning experience; the cost of such health care to be the sole responsibility of the student.
9. Initiate the documentation process for student exposures as well as notifying CONHS for further follow up; draw and process baseline blood samples where appropriate for communicable disease exposures.
10. Make necessary determinations to exclude students from individual patient care. CONHS and students will adhere to this decision.

11. Upon making necessary decision to deny a student access to the health care facility, send written notice to CONHS. CONHS and students will adhere to this decision upon receipt of said notice.
12. Provide adequate space for student-faculty conferences.
13. Provide training to Students regarding **XXX**'s rules, regulations, policies, and procedures.
14. Upon request, **XXX** will provide proof that it maintains liability insurance in an amount that is commercially reasonable.
15. **XXX** will provide written notification to CONHS promptly if a claim arises involving a student. **XXX** and CONHS agree to share such information in a manner that protects such disclosures from discovery to the extent possible under applicable federal and state peer review and joint defense laws.
16. **XXX** will resolve any situation in favor of its patients' welfare and restrict a Student to the role of observer when a problem may exist until the incident can be resolved by the staff in charge of the Student or the Student is removed. **XXX** will notify CONHS if such an action is required.

VI. CONHS AND XXX MUTUAL RESPONSIBILITIES

CONHS and **XXX** agree to:

1. The Parties will not discriminate, sexually harass, or retaliate against any employee, applicant or student enrolled in their respective programs because of race, color, sex, religion, national origin, age, disability, genetic information, veteran status, sexual orientation, gender identity, or any other basis protected by law. Should either Party be given actual or constructive notice of discrimination, harassment, or retaliation on the basis of any of these protected classes, the Parties will cooperate in an investigation to ascertain the facts; stop the discriminatory, harassing, or retaliatory conduct; remedy the effects of such conduct; and prevent the recurrence of such conduct. CONHS takes responsibility for training its students on its nondiscrimination policies and grievance procedures, and **XXX** takes responsibility for training its employees on its nondiscrimination policies and grievance procedures. Failure to meet the terms of this section may result in CONHS or **XXX** terminating this agreement immediately effective upon receipt of written notice, notwithstanding the provisions of Section II of this agreement.
2. Determination of the number of students to be assigned to the clinical learning experience shall be a joint decision based on staff and space available at **XXX** and eligible students enrolled in the Program who desire to be educated at **XXX**.
3. This agreement does not prevent **XXX** from participation in any other program. Nor does this agreement prevent CONHS from placing students with other licensed health care facilities.

4. There will be on-going, open communication between CONHS and **XXX** to promote understanding of the expectations and roles of both institutions in providing the clinical learning experience for students. CONHS and **XXX** representatives will meet as needed at the convenience of both parties to coordinate and improve the clinical learning experience.
5. Either CONHS or **XXX** may remove a student participating in the clinical learning experience if, in the opinion of either party, the student is not making satisfactory progress. Any student who does not satisfactorily complete the clinical learning experience or any portion of thereof may repeat the clinical learning experience with **XXX** only with the written approval of both CONHS and **XXX**.
6. At no time shall CONHS students be considered representatives, employees or agents of CONHS or **XXX**. CONHS students are not eligible to receive payment for services rendered, replace or substitute for a CONHS or **XXX** employee, or possess authority to enter into any form of agreement, binding or otherwise, on behalf of CONHS or **XXX**.
7. TAMIU and **XXX** each acknowledge that neither party assumes liability for actions taken by students during the time that they participate in the clinical learning experience with **XXX**.
8. TAMIU is not responsible for providing personal liability or medical insurance covering students.
9. As an agency of the State of Texas, TAMIU may not agree to indemnify or hold any party harmless from any liability or expenses. Neither party to this agreement shall be required to indemnify or hold the other harmless unless ordered to do so by a court of competent jurisdiction.
10. CONHS and **XXX** agree to assist each other in obtaining and maintaining approvals of regulatory agencies needed to conduct the clinical learning experiences under this agreement.

VII. FERPA

To the extent **XXX** generates or maintains educational records related to the participating Student, **XXX** agrees to comply with the Family Educational Rights and Privacy Act of 1974 (FERPA). **XXX** agrees to maintain the confidentiality of the education records in accordance with the provisions of FERPA to the same extent as such law and regulations apply to TAMIU (attached as Exhibit B) and shall limit access only to those employees or agents with a need to know. For purposes of this Agreement, pursuant to FERPA, TAMIU hereby designates **XXX** as a school official with a legitimate education interest in the educational records of the participating Student(s) to the extent that such access to TAMIU's records is required by **XXX** to carry out the Program.

VIII. HIPAA

TAMIU and **XXX** agree that:

1. **XXX** is a covered entity for purposes of the Health Insurance Portability and Accountability Act (HIPAA) and subject to 45 CFR Parts 160 and 164 (“the HIPAA Privacy Regulation”).
2. To the extent that CONHS students are participating in the Program [and CONHS faculty are providing supervision at **XXX** as part of the Program], such students [and faculty members] shall:
 - a. be considered part of **XXX** workforce for HIPAA compliance purposes in accordance with 45 CFR §160.103, but shall not be construed to be employees of **XXX**;
 - b. receive training by **XXX** facility on, and subject to compliance with, all of **XXX** privacy policies adopted pursuant to the HIPAA Privacy Regulations; and
 - c. not disclose any Protected Health Information, as that term is defined by 45 CFR §160.103, to CONHS which a student accessed through Program participation [or a faculty member accessed through the provision of supervision at **XXX** facility] that has not first been de-identified as provided in 45 CFR §164.514(a);
3. CONHS will not access or request to access any Protected Health Information held or collected by or on behalf of **XXX**, from a student [or faculty member] who is acting as a part of **XXX** workforce as set forth above, or any other source, that has not first been de-identified as provided in 45 CFR §164.514(a); and
4. No services are being provided to **XXX** by CONHS pursuant to this agreement and therefore this agreement does not create a “business associate” relationship as that term is defined in 45 CFR §160.103

IX. DISPUTE RESOLUTION

To the extent applicable, the dispute resolution process provided in Chapter 2260, Texas Government Code, and the related rules adopted by the Texas Attorney General pursuant to Chapter 2260, shall be used by TAMIU and **XXX** to attempt to resolve any claim for breach of contract made by **XXX** that cannot be resolved in the ordinary course of business. **XXX** shall submit written notice of a claim of breach of contract under this Chapter to the Vice President for Finance and Administration of TAMIU, who shall examine **XXX** claim and any counterclaim and negotiate with **XXX** in an effort to resolve the claim.

X. PUBLIC INFORMATION

- (a) **XXX** acknowledges that TAMIU is obligated to strictly comply with the Public Information Act, Chapter 552, Texas Government Code, in responding to any request for public

information pertaining to this Agreement, as well as any other disclosure of information required by applicable Texas law.

- (b) Upon TAMIU's written request, Facility will provide specified public information exchanged or created under this Agreement that is not otherwise excepted from disclosure under chapter 552, Texas Government Code, to TAMIU in a non-proprietary format acceptable to TAMIU. As used in this provision, "public information" has the meaning assigned Section 552.002, Texas Government Code, but only includes information to which TAMIU has a right of access.
- (c) **XXX** acknowledges that TAMIU is required to post a copy of the fully executed Agreement on its internet website in compliance with Section 2261.253(a)(1), Texas Government Code

XI. MISCELLANEOUS PROVISIONS

1. Execution and modification. This agreement is binding only when signed by both parties. Any modifications or amendments must be in writing and signed by both parties.
2. Assignment. This agreement, with the rights and privileges it creates, is assignable only with the written consent of both parties.
3. Force Majeure. Each party shall be excused from any breach of this agreement which is proximately caused by government regulation, war, strike, act of God, or other similar circumstance normally deemed outside the control of well-managed businesses.
4. Entire Agreement. This agreement contains the entire understanding of the parties with respect to clinical learning experiences and supersedes all other written and oral agreements between the parties with respect to the clinical learning experiences. It is acknowledged that other contracts may be executed. Such other agreements are not intended to change or alter this agreement unless expressly stated in writing.
5. Governing Law and Venue. The validity of this agreement and all matters pertaining thereto, including but not limited to, matters of performance, non-performance, breach, remedies, procedures, rights, duties, and interpretation or construction, shall be governed by the Constitution and laws of the State of Texas. Pursuant to Section 85.18, Texas Education Code, venue for any suit filed against TAMIU shall be in the county in which the primary office of the chief executive officer of TAMIU is located, namely, Webb County, Texas.
6. Independent Contractor Status. This agreement will not be construed creating an employer/employee relationship between TAMIU or CONHS and **XXX** or the clinical learning experience students.

7. Headings. Headings appear solely for convenience of reference. Such headings are not part of this agreement and shall not be used to construe it.
8. Provisions. If any provision or provisions of this agreement shall be held to be invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions shall not in any way be affected or impaired thereby.
9. Notice. Any notice required or permitted under this agreement must be in writing, and shall be deemed to be delivered (whether actually received or not) when deposited with the United States Postal Service, postage prepaid, certified mail, return receipt requested, and addressed to the intended recipient at the address set out below. Notice may also be given by regular mail, personal delivery, courier delivery, facsimile transmission, email or other commercially reasonable means and will be effective when actually received. CONHS and **XXX** can change their respective notice address by sending to the other party a notice of the new address. Notices should be addressed as follows:

CONHS:

Texas A&M International
 College of Nursing & Health
 Office of the Dean
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 Laredo, Texas 78041
 Phone: 956-326-2450
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 Email: glenda.walker@tamiu.edu

XXX:

XXX
 Name:
 Title:
 Address:
 City, State, zip code:
 Phone:
 Fax:
 Email:

The parties are signing this agreement on the date stated opposite that party's signature.

RECOMMENDED FOR APPROVAL:

 Glenda C. Walker, Ph.D.
 Dean

 Date

**APPROVED AND ACCEPTED FOR:
TEXAS A&M INTERNATIONAL UNIVERSITY
on behalf of the COLLEGE OF NURSING
AND HEALTH SCIENCES**

Thomas R. Mitchell, Ph.D.
Provost and Vice President for Academic Affairs

**APPROVED AND ACCEPTED FOR:
XXX**

Agency Representative Officer
Title – **XXX**

Date

APPROVED AND ACCEPTED FOR:

Name
Title – **XXX**

Date

EXHIBIT A

Student Clinical Learning Experiences Confidentiality Agreement

Students enrolled in the College of Nursing recognize the importance of protection of confidential information about patients and their families and of the operations of agencies where students are placed for clinical experiences. It is the obligation of every student to protect and maintain this confidentiality. All patient information stored via paper or computer system is considered confidential. It is the ethical and legal responsibility of all students to maintain and comply with all confidentiality requirements of the agencies used for clinical experiences.

As a student at the Texas A&M International University College of Nursing, I agree to the following:

1. I will protect the confidentiality of all patients, family, and clinical agency information.
2. I will not release unauthorized information to any source.
3. I will not access or attempt to access information other than that information which I have authorized access to and need to know in order to complete my assignment as a student.
4. I will report breaches of this confidentiality agreement by others to my clinical instructor and/or the course coordinator. I understand that failure to report breaches is an ethical violation and subjects me to disciplinary action.
5. I will not put patient/family/clinical agency identifying information on any stored information (disk or hard drive) on my own personal computer or on any other public or private computer.

Signature

Date

Print Name

This form will be placed in my academic file. I was given a copy of this agreement for my records.

EXHIBIT B

Student Clinical Learning Experiences FERPA Guidelines

Information in student records will be released only to faculty and professional staff for authorized legitimate educational interest. The student's consent is required to release information other than public information to any non-CONHS or non-university system person unless required by law or upon subpoena duces tecum.

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. These rights include the right to provide written consent before CONHS or **XXX** discloses personally identifiable information from the student's education records, except to the extent that FERPA authorizes disclosure without consent.

Student information may be disclosed in certain circumstances:

- to comply with a judicial order or a lawfully issued subpoena;
- to appropriate parties in a health or safety emergency;
- to officials of another school, upon request, in which a student seeks or intends to enroll;
- in connection with a student's request for or receipt of financial aid, as necessary to determine the eligibility, amount, or conditions of the financial aid, or to enforce the terms and conditions of the aid;
- to certain officials of the U.S. Department of Education, the Comptroller General, to state and local educational authorities, in connection with certain state or federally supported education programs;
- to accrediting organizations to carry out their functions;
- to organizations conducting certain studies for or on behalf of the CONHS; the results of an institutional disciplinary proceeding against the allegation of a crime of violence may be released to the alleged victim of that crime with respect to that crime.