

STUDENT HANDBOOK

BACHELOR OF HEALTHCARE ADMINISTRATION



TEXAS  STATE[®]
UNIVERSITY

The rising STAR of Texas

SECTION I. PROGRAM INFORMATION

WELCOME!

Welcome to the Texas State University School of Health Administration and the Bachelor of Healthcare Administration Program! We congratulate you on your decision to continue your education and trust that this decision will enrich your life and expand your future. This Handbook will give you a sense of the University, College, School, and Program to ensure that you have important information to guide you to success in your academic endeavors. Read it carefully and keep it available for future reference. The faculty and staff of the School wish you the best of luck during your time at Texas State University. We will be happy to answer your questions. Feel free to contact us when we can help.

THE COLLEGE OF HEALTH PROFESSIONS

Vision Statement

The Texas State College of Health Professions will be a nationally recognized premier center for educating professionals in a broad array of health care fields, increasing the knowledge, research, and community coalitions necessary to enhance and restore the health and well-being of the whole person and of society.

Mission Statement

The College of Health Professions educates and prepares health care professionals in a student-centered learning environment. The College excels in teaching, scholarship, and service while responding to the health care needs of the global community. To accomplish this, The College unites faculty, students, the health care communities, and consumers in coalitions that support the academic, scholarly, and service aspects of health care.

The College of Health Professions (College), under the direction of Dean Ruth B. Welborn, is currently comprised of two schools, four academic Schools and two programs. In addition to the School of Physical Therapy, the other Schools include Communication Disorders (CDIS), Health Information Management (HIM) and Respiratory Care (RC). The School of Health Administration, the School of Nursing and programs in Radiation Therapy Technology (RTT) and Clinical Laboratory Science (CLS) complete the College.

The College also includes the Academic Advising Center, the Speech-Language-Hearing Clinic, the Physical Therapy Clinic, and the Sleep Lab. To further its goals, the College has established a number of cooperating teaching sites and has more than 600 affiliations with hospitals and other health care facilities.

THE SCHOOL OF HEALTH ADMINISTRATION

The School of Health Administration (School) is an academic based School that graduated its

initial class of students in 1974. (<http://www.health.txstate.edu/ha/>)

Mission

The mission of the School of Health Administration is to prepare health leaders to serve in a variety of diverse healthcare environments and add to the body of knowledge in our fields.

Vision

The vision of the School of Health Administration is to be the health administration school of choice for students, faculty, alumni and employers.

Values

We value, teach, and model leadership, service, scholarship, professionalism, and lifelong learning.

THE BACHELOR IN HEALTHCARE ADMINISTRATION (BHA) PROGRAM

Mission

The mission of the BHA Program is to prepare ethical, entry-level healthcare administrators for careers in a variety of healthcare settings and to add to the body of knowledge in our fields.

Vision

The vision for the BHA program at Texas State University is to be the undergraduate health administration program of choice for students, faculty, alumni, and employers in the United States.

Values

We value and, teach, model leadership, service, scholarship, professionalism, and lifelong learning <http://www.health.txstate.edu/ha/Prospective-Students/Degree-Plan/BHA.html>

Program Goals & Objectives.

Program Goals

Teaching

The BHA faculty strives to create a learning environment that prepares students to enter the ever-changing healthcare environment. Healthcare is undergoing a transformation from a 'treatment-focused' system to more of a 'prevention-focused' process where our Students must obtain the knowledge, skills and abilities to succeed in this emerging environment.

Research

The faculty contributes to the body of knowledge in healthcare administration. As an emerging research university, all tenured and tenure-track faculty must be productive in this area. Students may have the opportunity to be involved in various research projects ongoing in the School of Health Administration.

Service and Civic Engagement

The BHA faculty and students serve the University, profession, and community through expertise, service and volunteering time and resources to a plethora of community organizations and projects.

Student Success and Admissions

The BHA program strives to admit high-quality students who are successful in the program and beyond. Students are admitted based on their potential to successfully complete the BHA Program. All Students must strive to achieve their full potential by meeting all course requirements in a timely manner.

Program Success

The BHA program maintains national recognition and financial sustainability. Program sustainability is a function of financial viability and reputation.

Program Objectives

Teaching

1. Faculty in the Texas State BHA Program will provide learning opportunities that offer students the knowledge and skills necessary for entry-level management positions as evidenced by student evaluations and hiring metrics.
2. Faculty in the Texas State BHA Program will encourage the development of professional and ethical behavior by providing learning opportunities and modeling proper conduct.
3. Students will demonstrate knowledge of the fundamentals of healthcare administration relating to finance and accounting (focus areas of the program). (Finance and accounting objectives link to the Student Learning Objectives, SLOs, from Southern Association of Colleges and Schools, SACS.
4. Students will demonstrate application of healthcare administration skills and competencies during their internships.
5. Students will integrate theory and practice of healthcare administration to "real world" situations represented by case studies and field experiences.
6. Students will apply effective oral and written communication skills for use in healthcare organizations.
7. Students will attain certifications (a program / preceptor focus area) in accounting software, Excel, and Lean Six Sigma.
8. Students will demonstrate overall healthcare nationwide through third-party pre-post testing.

Research

1. Faculty in the Texas State BHA Program will engage in research activities that enhance the currency of their courses and add to the body of knowledge in their fields.
2. Faculty will engage students in undergraduate research.
3. Faculty will collaborate on research both externally and internally.

Service and Civic Engagement

1. Faculty and students in the Texas State BHA Program will provide meaningful service to their profession.
2. Faculty and students in the Texas State BHA Program will provide meaningful service to their communities.
3. Faculty provide service to the University.

Student Success and Admissions

1. Faculty will prepare students for success in hiring.
2. Faculty will maintain a rigorous admissions process.
3. Faculty in the Texas State BHA Program will mentor students through graduation.
4. The academic program will promote and realize diversity among its student population.

Program Success

1. The Program will maintain national recognition of the BHA program.
2. The Program will maintain adequate resources.
3. The Program will recruit and retain high quality faculty and staff.
4. The Program will maintain satisfied stakeholders.
5. The Program will maintain engaged alumni.
6. The Program will leverage technology for process improvements.

Program Focus Areas

External certifications, Ethics, Accounting & Finance

Program Competencies versus Courses

Course Number	Course Name	When in curriculum	Required or Elective?	Credits	COMPETENCIES ADDRESSED IN COURSE													
					1. Communication Skills	2. Relationship Management	3. Leadership Skills & Behaviors	4. Organizational Climate & Culture	5. Managing Change	6. Healthcare Systems & Organizations	7. Healthcare Personnel	8. The Community & Environment	9. The Legal Environment of HA	10. General Management	11. Financial Management	12. Information Management	13. Information Management	14. Quality Improvement
HA3308	Healthcare Organizations	Pre-Req	All required	3		K				K	K							
HA3309	Ethics in the Health Professions	Semester 1	All required	3	K	K												
HA3315	Healthcare Administration History, Culture, and Language	Semester 1	All required	3	A	K	K	K	K		K							
HA3324	Supervisory Management for Healthcare Managers	Semester 1	All required	3	A	K				K			K					
HA3329	Human Resource Management in Healthcare Management	Semester 1	All required	3	A				K			K	K					
HA3375	Principles of Accounting for Healthcare Managers	Semester 1	All required	3		K							K	K				
HA3340	Management of Health Information Systems	Semester 2	All required	3		K		K	K				K			K		
HA3341	Healthcare Project Management	Semester 2	All required	3	A	A		A					A				K	
HA3344	Patient Care Management & Quality Improvement	Semester 2	All required	3	A		K						K				A	
HA3347	Essentials of Healthcare Law	Semester 2	All required	3		A			A	A		A						
HA3376	Financial Management for Healthcare Managers	Semester 2	All required	3									K	A				
HA4305	Healthcare Services Marketing	Semester 3	All required	3		K							K		K			
HA4315	Health Services Problem Solving & Decision Making	Semester 3	All required	3	A								A			A	A	
HA4318	Employment Law in Healthcare	Semester 3	All required	3		K				K		A	K					
HA4322	Public Health	Semester 3	All required	3	A				K		K							
HA4325	Healthcare Strategic Management	Semester 3	All required	3	A	K	K	K	A				A	A	A	A	A	
HA4141	Healthcare Comprehensive Exam and Review	Semester 3	All required	1	A	A												
HA4848	Healthcare Administrative Residency	Semester 4	All required	8	A			A		A	A		A					

SECTION II. STUDENT INFORMATION

ACADEMIC REQUIREMENTS

For many students, a full-time professional education is a new experience – one that may pose a significant challenge. Professional education has the following characteristics:

- Time: many hours of class, study time on and off campus due to the breadth and depth of the curriculum
- Attendance: faculty expect students to attend all classes as scheduled. Absences may

jeopardize successful completion of the program. There is a high correlation between attendance and successful completion of courses.

Pre-Test Requirements

All students must take a pre-test examination by the end of the first month of admission. This examination evaluates your baseline knowledge of healthcare administration. More information will be provided at the BHA Orientation.

BHA Orientation

When admitted to the program, you will receive information about the BHA Orientation. This is a mandatory event. You should dress in business casual for this event.

Course Requirements

All course requirements are established by the individual instructor and are delineated in the course syllabus. The course instructor may establish requirements for the course, which are in addition to the course syllabus if the instructor deems them necessary and beneficial to the course, the School or the students.

Grading Policy

A minimal grade of 70 percent is considered to be passing for any professional course within the School. Undergraduates must maintain a 2.25 GPA. Unless otherwise indicated in a course syllabus, the grading scale will be:

A = 90-100

B = 80-89

C = 70-79

D = 60-69

F = below 60

Honor Code, Texas State University

As members of a community dedicated to learning, inquiry, and creation, the students, faculty, and administration of our University live by the principles in this Honor Code. These principles require all members of this community to be conscientious, respectful, and honest.

WE ARE CONSCIENTIOUS. We complete our work on time and make every effort to do it right. We come to class and meetings prepared and are willing to demonstrate it. We hold ourselves to doing what is required, embrace rigor, and shun mediocrity, special requests, and excuses.

WE ARE RESPECTFUL. We act civilly toward one another and we cooperate with each other. We will strive to create an environment in which people respect and listen to one another, speaking when appropriate, and permitting other people to participate and express their views.

WE ARE HONEST. We do our own work and are honest with one another in all matters. We understand how various acts of dishonesty, like plagiarizing, falsifying data, and giving or receiving assistance to which one is not entitled, conflict as much with academic achievement as with the values of honesty and integrity.

SCHOOL OF HEALTH ADMINISTRATION ACADEMIC YEAR 2022 – 2023

THE PLEDGE FOR STUDENTS

Students at our University recognize that, to insure honest conduct, more is needed than an expectation of academic honesty, and we, therefore, adopt the practice of affixing the following pledge of honesty to the work we submit for evaluation:

"I pledge to uphold the principles of honesty and responsibility at our University."

THE PLEDGE FOR FACULTY AND ADMINISTRATORS

Faculty at our University recognize that the students have rights when accused of academic dishonesty and will inform the accused of their rights of appeal laid out in the student handbook and inform them of the process that will take place.

"I recognize students' rights and pledge to uphold the principles of honesty and responsibility at our University.

Addressing Acts of Dishonesty

Students accused of dishonest conduct may have their cases heard by the faculty member and the Texas State University Honor Code Council. The student may also appeal the faculty member's decision to the Honor Code Council. Students and faculty will have the option of having an advocate present to insure their rights. Possible actions that may be taken range from exoneration to expulsion. <http://www.txstate.edu/effective/upps/upps-07-10-01.html>

Course Failure

Failure of a course will require the student repeat that course when it is next offered. Successful completion of the repeated course is a requirement for progression in the curriculum unless approved by the Program Director. **Students who fail to achieve a passing grade of "C" in a required course will be suspended from the program.**

Grade Appeal Procedure

If a student does not agree with a final course grade, he/she may appeal that grade. This must be done in writing using the CHP form (available on the CHP web site, <http://www.health.txstate.edu/About/College-Policies-and-Procedures.html>) within two years following the date that grades are due to the registrar's office using the following guidelines:

- First level: The first level of appeal will be to the faculty member. The formal appeal should be in writing with supporting documentation. The student should meet with the faculty member with written results available to the student within 1 week following the meeting.
- Second level: The second level of appeal will be the School Chair. Again, this must be in writing with supporting documentation and should be done within two weeks following receipt of written results of the first level appeal. The student shall be notified in writing within 1 week following action of the School Chair.
- Third level: The third level of appeal is to the Dean of the College of Health Professions. Again, the written appeal and supporting documentation should be submitted to the Dean within 2 weeks of receiving results of the second level appeal.
- Final appeal: The final level is a written appeal to the Dean of the Graduate School.

Student Rights

In the event of student problems, academic or personal, every effort will be made to resolve the difficulties at the School level. In the event of unresolved problems, Health Administration students are granted the same due process regulations as any other student enrolled at the University.

Academic Progression

The School will review the academic progress of students enrolled in the School at the end of each semester and recommend specific individual action to the Chair. Reviews will be required for any student on probation or suspension status. Academic status will be reported to the School faculty and the individual student's advisor. Recommendations will be made to the Chair for students requiring further action on status.

Requirements for Graduation

Undergraduate students must complete all work with a 2.25 or better GPA. Students must apply for graduation through the Graduate College during the final semester of course work.

COURSE SEQUENCE INFORMATION

BHA students are required to take the HA courses in the sequence shown below. If you choose to drop a course in any of the semesters, your enrollment in the next semester or graduation semester will likely be delayed.

FIRST SEMESTER – 15 hours

HA 3309	Ethics in Health Professions
HA 3315	Healthcare Administration History, Culture, and Language
HA 3324	Supervisory Management for Healthcare Managers
HA 3329	Human Resources in Healthcare Management
HA 3375	Principles of Accounting for Healthcare Managers

SECOND SEMESTER – 15 hours

HA 3340	Management of Health Information Systems
HA 3341	Project Management
HA 3344	Patient Care Mgt & Quality Improvement in Health Care Integrated Delivery Systems
HA 3347	Essentials of Healthcare Law
HA 3376	Financial Management for Healthcare Managers (HA 3375 prerequisite)

FIRST AND SECOND SEMESTERS MUST BE SUCCESSFUL COMPLETED (no grade below "C") prior to the THIRD SEMESTER.

THIRD SEMESTER – 16 hours

HA 4305	Healthcare Services Marketing
HA 4315	Health Services Problem Solving and Decision Making
HA 4318	Employment Law in Healthcare
HA 4322	Public Health Administration
HA 4325	Healthcare Strategic Management

SCHOOL OF HEALTH ADMINISTRATION ACADEMIC YEAR 2022 – 2023

FOURTH SEMESTER

HA 4848 Healthcare Administrative Residency

NOTE: All students are required to complete a residency for the BHA. A background check is required during your 3rd semester (enrollment in HA 4141) prior to the residency semester. If there is any reason you feel may prevent your placement at a facility, you need to meet with the Field Placement Coordinator to determine if you will be able to complete the residency requirement.

REPEAT POLICY - All HA students must maintain a minimum major (HA) GPA of 2.25 with no grade below a “C.” Students are allowed to repeat **each HA** course (including HA 4141) once, and only once, to improve their major (HA) GPA or their grade in a particular course. **A student having repeated a course and still not achieving a minimum grade of “C,” will not be allowed to continue as a healthcare administration major**, therefore, students needing to repeat courses **MUST** seek assistance from the instructor or a chair-appointed mentor.

Program Probation

Students who fail to achieve a “C” in an HA course will receive notice that they are on program probation. Students have one opportunity to repeat the HA course during the next available semester to achieve the required minimum grade of “C.” If the course is a first or second semester course, the student may take other first or second semester courses with the repeated class. If the course is a third semester course, a student may take other third semester courses. **A student may not take third semester courses with first or second semester courses unless specifically approved by the Program Director.**

Program Suspension

Students having repeated a course and not achieved a minimum grade of “C,” are sent notice that they have been suspended from the Program. Students on program suspension have the right to appeal and should contact the BHA Program Director for further instructions.

EXIT EXAM

All BHA majors are required to pass an EXIT exam administered in HA 4141 before enrolling in field placement. The EXIT exam evaluates the overall learning in the BHA curriculum. It is similar to licensing examinations found in healthcare professions such as nursing or dental hygiene. The EXIT exam is comprehensive and measures basic information from all of the courses in the BHA curriculum. In addition, it is one way to make sure that students enrolled in fieldwork experiences demonstrate their mastery of the comprehensive body of knowledge in healthcare administration.

The EXIT exam is scheduled once during each long semester. In general, this examination is given on the first Friday in April and November. The examination is approximately 2 hours in length.

Currently, there are 170 multiple-choice questions on the EXIT exam (10 per competency exclusive of communication). Each semester's EXIT exam contains new questions. Therefore, it is not a wise study plan to get question-specific information from previous takers.

A score of 70% or higher is considered a passing grade for the EXIT exam; however, the actual grade for the exam is pass or fail. The grade for the EXIT examination is also the grade for the course. Therefore, in HA 4141 the grade will be either pass or fail. After compiling and reviewing the EXIT exam grades, the BHA Program Director will notify students about their EXIT exam pass/fail status.

In addition to attending HA 4141 and taking advantage of all its opportunities, students should feel free to contact individual faculty members concerning specific course material or any study methods appropriate to this material. Faculty members are likely to be more receptive if students are prepared with a list of the most significant material that needs clarification.

FIELD PLACEMENT REQUIREMENTS

To be eligible for residency students must successfully complete all requirements for their BHA, this includes minors; have a 2.25 major BHA) GPA, and no grade lower than "C" in major (HA) courses.

Students must follow the instructions in the Residency Manual. In addition, students must submit a resume and cover letter to the Field Placement Coordinator (FPC) via CANVAS. After this, students will schedule an appointment with the FPC their facility options. Students must then complete the residency pre-placement forms via CANVAS.

Students will then schedule a meeting with a potential preceptor, ensuring that they email their resume and cover letter to the preceptor. After meeting with the preceptor (and sending a thank you note after the meeting) students will submit a completed Resident Placement Form via CANVAS prior to the end of the semester.

Prior to registering for field placement, the following items must be turned in to the FPC:

- Health Forms (Immunizations)
- Background check

Students begin residency on the first day of class for the semester in which they are completing HA 4848. Students will submit a project proposal, their first weekly report, and their first-time sheet with Activity Log via CANVAS, as per Residency Manual guidelines. Lastly, students will complete required hours of residency and submit final draft of project notebook to the FPC by last class day of semester.

Expectation of Students in Field Placements

Students in field placements must conduct themselves in a professional manner and be responsible for understanding and complying with the policies and procedures of the host organization. Students must understand that they are in the role of a student. No line or staff

authority may be assumed unless assigned by the preceptor. The student is expected to complete those projects assigned by the preceptor.

The student in field placement must respect the confidentiality of communication. Problems of one School are not to be discussed with another, unless requested by the preceptor, and are not to be discussed outside the organization. Judgment and discretion are important qualities to be exhibited by the student during field placements. The student will take an observer role unless otherwise directed by the preceptor. The field placement is a major part of the student's educational experience and should be treated as such. The student should take full advantage of the experience by working closely with the preceptor throughout the field placement.

The above referenced field placement requirements are discussed in detail, along with necessary forms, in the **Field Placement Handbook** distributed prior to field placement by the Coordinator of Field Placements.(see **Frequently Asked Questions about Field Placements** on the School's website).

SECTION III. MISCELLANEOUS INFORMATION

PROFESSIONAL INVOLVEMENT

Community

The School faculty encourage all students to participate in community and professional activities. Involvement in such activities is one step toward becoming a complete professional. Such activities include volunteering in the community and participating in student organizations or professional organizations.

Profession

The American College of Healthcare Executives (ACHE) is the organization representing healthcare executives in the United States. ACHE consists of over 40,000 healthcare executives and 80 chapters, one of which a student member will be assigned to be based upon their place of residency.

Membership

Students are eligible for membership in ACHE at a student rate and are encouraged to become members. Benefits of membership include publications, professional events, and networking opportunities. Students can join at <http://ache.org/APPS/StuMem.cfm>.

FACULTY APPOINTMENTS

Appointments with faculty can be made personally. Should you schedule an appointment and be unable to keep it, please call to notify the office or the individual faculty member.

CONTACT FOR IMPORTANT OFFICES

College of Health Professions, Dean's Office – <http://www.health.txstate.edu>, 245-3300

Graduate College – www.gradcollege.txstate.edu, 245-2581

Financial Aid – www.finaid.txstate.edu, 245-2315

Multicultural Student Affairs Office – www.msa.txstate.edu/, 245-2278

Alcohol and Drug Resource Center – www.adrc.txstate.edu/, 245-3601

Career Services – www.careerservices.txstate.edu, 245-2645

Counseling Center – www.counseling.txstate.edu/, 245-2208

Disability Services – www.ods.txstate.edu/, 245-3451

Student Health Center – www.healthcenter.txstate.edu, 245-2161

Writing Center – writingcenter.english.txstate.edu/, 245-3018

Alkek library – www.library.txstate.edu, 245-3681; 245-2686

Bookstore – www.bookstore.txstate.edu, 245-2273

University Police School – www.police.txstate.edu/, 245-2805 (non-emergency); 245-2890 (emergency)

“And whatsoever I shall see or hear in the course of my profession, as well as outside my profession.... if it be what should not be published abroad, I will never divulge, holding such things to be holy secrets.” Hippocratic Oath.

Confidential information is information about a patient or client that is furnished by the patient directly or even from a third party, including information that comes to you in writing or through electronic means. Any time you think a patient has a reasonable expectation that sensitive information will not be shared, treat the information as confidential. The patient who chooses to share confidential information with you has the expectation that he or she can control that information for his or her own welfare. Confidential information should be used to facilitate the goal of helping the patient and be kept from unauthorized people. It is not considered a breach of confidentiality if information is shared with other health professionals involved in the patient's care, as long as the information has some relevance regarding that case.

ANY BREACH OF CONFIDENTIALITY IS GROUNDS FOR DISMISSAL FROM THE

SCHOOL. EXAMPLES OF BREACH OF CONFIDENTIALITY:

1. Discussing a patient's condition or treatment in a public setting;
2. Naming a patient and the patient's condition or treatment in a public setting;
3. Speaking of a patient within hearing range of other patients;
4. Reading a patient's chart when not involved in that patient's care or as a course assignment;
5. Asking co-workers about the condition or treatment of a patient known to you;
6. Reading correspondence or information relating to a patient or employee or discussing that information with others;
7. Discussing information, which a supervisor indicates, is confidential.

EXAMPLES OF POOR SENSITIVITY CONSIDERED A BREACH OF CONFIDENTIALITY:

1. Asking loudly in the waiting room (or other area) about a patient's condition, treatment, lab work, test results, etc.
2. Making light of a patient's condition or personal characteristics;
3. Discussing personal matters of another student or supervisor within hearing range of patients or other students.

HEALTH INFORMATION PRIVACY AND ACCOUNTABILITY ACT (HIPAA)

In 1996, Congress passed HIPAA mandating the adoption of Federal privacy protections for individually identified health information. In response to this mandate, the School of Health and Human Services (HHS) published the Privacy Rule in the Federal Register on December 28, 2000. Final rules were issued in August 2002 making modifications to the Privacy Rule. Final Privacy Rules can be found at www.hhs.gov/ocr/hipaa/finalreg.html. These rules provide comprehensive federal protection for the privacy of health information. The Privacy Rule sets a federal floor of safeguards to protect the confidentiality of information. The rule does not replace federal, state or other law that provides individuals even greater privacy protections. Confidentiality is certainly a key element of HIPAA.

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1. Expectations
2. Writing Tips
3. Student Records Release Form
4. Consent for Photography Release Form
5. Code of Ethics
6. Student Acknowledgement Form
7. Code of Student Conduct

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Attachment #1 Expectations for SOHA Students

The following **expectations** were developed as a collaborative activity by the students and faculty of the School and reviewed annually by the students and faculty to help you anticipate the demands of this physical therapy curriculum.

1. Personal interactions skills you should have:
 - a. General
 - 1) Be patient with each other, the faculty and yourself
 - 2) Recognize the diversity within the class and the faculty
 - 3) Develop support systems outside of school
 - b. With faculty
 - 1) Communicate with faculty and classmates
 - 2) Use faculty as resources
 - 3) Agree to disagree on some topics/approaches
 - 4) Use class reps to approach faculty professionally
 - 5) Use class faculty advisor for guidance
 - c. With classmates
 - 1) Communicate with faculty and classmates
 - 2) Don't compare yourself to or compete with classmates
 - 3) Facilitate learning by working with each other
 - 4) Agree to disagree
 - 5) Learn to appreciate diversity and grow from it
2. Ability to be a self-directed, independent learner
 - a. Establishing your priorities
 - 1) Stay focused on the demands of the Program
 - 2) Know deadlines to complete assignments, projects, thesis
 - 3) Make exercise/good nutrition an important aspect of your health
 - 4) Commit yourself to successful completion of the Program
 - 5) Know and plan for the financial obligation of the Program
 - 6) Embrace all learning opportunities presented
 - 7) Be prepared to spend a lot of additional out-of-class time at Texas State (including Saturday)
 - 8) Maintain your notes from day one – needed for comprehensive exam
 - 9) Consider your choices for living arrangements – e.g., roommates, commuting
 - b. Problem-solving ability
 - 1) Re-assess/re-arrange learning habits from undergrad experience
 - 2) Be prepared to take a more active role in learning
 - 3) Retain information learned; Program is cumulative/comprehensive
 - c. Initiative for learning
 - 1) Be motivated and a "self-starter"
 - 2) Learn from each other
 - 3) Be prepared to work independently and collaboratively
 - 4) Participate in group activities to enhance learning (study groups and research)

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partners)

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- d. Time management skills
 - 1) Study for quality not quantity
 - 2) Make time to maintain your health and your relationships
 - 3) Commit to study as *the* priority
 - 4) Recognize the time in and outside of class needed to complete assignments, do readings, research topics of interest
- 3. Attitude and mental health
 - a. Expect to be overwhelmed – but know your sources for help!
 - b. Maintain a sense of humor
 - c. Prepare for high financial obligation, there is little time for an outside job
 - d. Recognize everything is not concrete, absolute
 - e. Recognize that becoming a "lifelong learner" is one of your main objectives
 - f. Recognize the Program is a "great equalizer" - other students are your equals in academic ability
 - g. Maintain balance of academics, health, fitness, and relationships

TEXAS STATE UNIVERSITY ATTACHMENTS

Attachment #2 50+ (and counting) Tips to Writing a Good Paper

1. All manuscripts should contain the following, organized in the order listed below, with each section beginning on a separate page:

- Title page
- Abstract
- Text
- References
- Tables, each on a separate page
- Illustrations with legends

The only difference among manuscript types is how text (body of manuscript) is managed.

2. All pages from Abstract (page 1) through illustrations should be numbered. Variations from this may be required for submission of a thesis. Check the Texas State Theses and Dissertation handbook for specific requirements for thesis preparation.

TITLES

3. Titles should be brief within descriptive limits (a 16-word maximum is suggested).

ABSTRACTS

4. A comprehensive abstract of 75 to 300 words is suggested. The title should appear at the top, skip two lines, and begin the abstract. It should be structured as the body of the manuscript is and should succinctly summarize the major intent of the manuscript, the major points of the body, and the author's results and/or conclusions. No references should be cited.

5. Suggested structures for abstracts:

Literature Reviews

Objective - What was the purpose of the review?

Data Sources - What sources did you search to find the studies you reviewed? You might include key words and years searched.

Data Synthesis - Summary of the major themes, organized by themes not authors

Conclusions/Recommendations - Advice and clinical applications of the information

Research Report

Objective - Problems or need for the study

Design and Setting - How was the study set up? Where did it take place?

Subjects - Characteristics of the subjects

Measurements - What was being measured? What types of tests were used? How were the subjects distributed within the study?

Results - Of the tests and measurements

Conclusions - Major conclusions particularly related to theory and clinical application of the information

Case Reports

Objective - Problem or need for the case to be presented

Background - On the particular injury or illness

Differential Diagnosis - What was it or what could it possibly have been?

Treatment - What was done for it? What is normally expected for this condition?

Uniqueness - What was different from the expected, or was it the same?

Conclusions - Clinical applications of the information

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6. An abstract is not to be used as the introduction; the abstract is a summary of the entire manuscript, while the introduction develops and proposes the manuscript's problem or purpose.

MANUSCRIPTS

7. In a scientific manuscript the introduction serves two purposes: to stimulate the reader's interest and to outline the reason for the study, that is, the controversy or knowledge gap that prompted the study.

8. Begin the text of the manuscript with an introductory paragraph or two in which the purpose or hypothesis of the article is clearly developed and stated. Tell why the study needed to be done or the article written and end with a statement of the problem.

9. The introduction is not the place for great detail. Highlights of the most prominent works of others as related to the subject may be appropriate for the introduction, but a detailed review of the literature should be reserved for the discussion section. Identify and develop the magnitude and significance of the controversy or problem with brief specific statements (referenced, of course). Pointing out differences among others' results, conclusions, and/or opinions often does this. Remember to keep the detail in the discussion.

10. In the introduction and discussion sections, it is appropriate to use transition sentences to summarize points and link to the next point. Try not to leave the reader hanging, instead create a smooth flow of ideas.

11. The body or main part of the manuscript varies according to the type of paper you are writing; however, regardless of the manuscript type, the body should include a discussion section in which the importance of the material presented is discussed and related to other pertinent literature. Liberal use of headings, subheadings, charts, graphs, and figures is recommended.

12. The term "methods" is more appropriate than "methodology". "Methodology" suggests a study of methods, whereas "methods" suggests a description of methods used, which is what the section is.

13. Begin with a description of the experimental design, which will serve as a road map to the entire section. Follow with descriptions of subjects, instruments, procedures, and statistical analysis. Confusion is often introduced when authors combine the instruments and procedures sections. Describe the instruments used in the instrument section, but describe how they were used in the procedure section.

14. The methods section should contain sufficient detail concerning the methods, procedures, and equipment used so that others can reproduce the study.

15. Methods used by others to study problems such as yours should be reviewed and referenced in your paper. Reference the methods of others as well as reliability and validity information in the methods section. The pros and cons of various methods and why you chose one over another should be discussed and referenced in the discussion or introduction.

16. IRB approval and informed consent procedures should be stated formally in the methods section of the manuscript.

17. Writing results is similar to writing a review of the literature. You state facts and then reference your source. In a results section, the statistics are your evidence or reference for the conclusions you present. The results should summarize the important results of the study, using descriptive and inferential statistics and a few well-planned and carefully crafted illustrations.

18. Report results by stating your conclusions in clear concise statements.

19. The statistical test should not be the focus of the sentence (as in "statistialese" - "Tukey post-hoc testing revealed significant decrease ($p < .05$) in perceived pain in groups that received cold, TENS, or the combined

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treatment"). Writing in "statisticalese" often obscures the conclusions by emphasizing the method and not the meaning. The important information is the meaning of the results.

20. Statistics do not indicate or prove anything; they provide you with support for making a decision. When you review the literature, you make a statement and reference others' writings to support your statement. Use a similar approach when reporting results; make a statement and then reference that statement with your statistical results.

21. Statistical tests do not **find** differences. They provide evidence that a difference between groups is probably real. Looking at the group means tells you if the groups are different; however you must decide if the differences are real or if they occurred by chance. Real differences mean they were caused by your independent variable and not by chance. By chance means the differences were caused by variables other than your independent variable.

22. The symbol "*p*" when used to refer to the level of probability, is written italicized and in the lower case. ($p < .05$)

23. When indicating the level of significance or probability, use only three numbers if the first is not a zero. If the first number is a zero, continue numbers until the first non-zero (i.e., .0002; not .00 or .00023).

24. Put your results in perspective with your expectations and compare your results with the rest of the world. Don't repeat or rehash the results, discuss them.

25. The emphasis of the discussion should not be on other authors but rather on what they reported and how it relates to your work.

26. The discussion must address the contribution the study makes toward theory.

27. The last part of the discussion must suggest how readers might apply the information presented. While the application may be apparent to you, it may not be apparent to first time readers unless you point it out.

28. The body of a review of literature article should be organized into subsections in which related thoughts of others are presented, summarized, and referenced. Each subsection should have a heading and brief summary, possibly one sentence. Sections must be arranged so that they progressively focus on the problem or question posed in the introduction.

29. The body of a case study should include the following components: personal data, chief complaint history or present complaint, results of physical examination, medical history, diagnosis, treatment, and clinical course, criteria for return to activities, and deviation from the expected.

CITATIONS AND REFERENCES

30. Each citation in the text of the manuscript takes the form of a superscript number that indicates the number assigned to the citation. It is placed directly after the reference or the name of the author being cited. References should be used liberally. It is unethical to present others' ideas as your own. Also, use references so that readers who desire further information on the topic can benefit from your scholarship.

31. The reference page(s) should list authors numerically in the order used in the text and in alphabetical order and should be in the following form:

Article - author(s) with surname and initials, title of article, journal title with abbreviations as per Index Medicus (italicized or underlined), issue month if journal is not consecutively paged from issue to issue, year, volume, inclusive pages. Example:

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Bonci CM, Ryan R. Pre-participation screening in intercollegiate athletics. *Postgrad Adv Sports Med.* 1988; 1: 3-6.

Book - author(s), title of book (italicized or underlined), city and state of publication, publisher, year, inclusive pages of citation. Example:

Wadsworth C. *Manual Examination and Treatment of the Spine and Extremities*. Baltimore, MD: Williams & Wilkins; 1988: 205-210.

Secondary Source – the original source is stated with the addition of Cited by using the source where it was cited. . See the AMA Manual of Style for other examples. Example:

Gordis E. Relapse and craving; a commentary. *Alcohol Alert*. 1989;6:3. Cited by: Mason BJ, Kocsis JH, Ritvo EC, Cutler RB. A double blind, placebo-controlled trial of desipramine for primary alcohol dependence stratified on the presence or absence of major depression. *JAMA* 1996; 275:761-767.

32. All statements and ideas of others must be referenced. If the author(s) is (are) not mentioned by name, the reference should be placed after the phrase or first mention of the idea.

33. Anytime you mention another author by name; author must be referenced immediately after name in the same paragraph. Example:

Sanders²² reported... NOT Sanders reported...²²

34. When referring by name to a work with multiple authors; if two authors use both names; if there are three or more authors, use the name of the first author and "et al" which means "and others". Note the punctuation with et al; there are no commas or periods. Reference immediately after et al.

35. When the reference is at the end of a sentence, it should be placed after the period and after any quotation marks.

36. It may be appropriate to refer to ideas or results from numerous authors in the same sentence. In doing so, you would list the references in numerical order. Example:

"The sky is a shade of blue^{1,6,10,21}..."

37. Personal communications are not included in the reference list, but may be included in the text. Example:
In a conversation with B Sanders, PhD (April 1997)....."

STYLE

38. Always refer to the research and writing of others in past tense.

39. Subheadings should be used. Main or first level headers should be placed centered, typed in all capitals, bolded, and not underlined. If the information under a header needs to be subdivided into two or more sections, use second level or subheads. These should be centered and bolded with the first letter of each word capitalized.

40. Begin numbering the pages of your manuscript with the abstract pages as #1; then, consecutively number all successive pages including illustrations.

41. The purposes of tables are to centralize large amounts of data, to save space and to eliminate long paragraphs of text. Tables should not be redundant of text. Put your information either in the text or the table and not both. You must refer the reader to the table. Point out the highlights in the table, but do not be too

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explanatory with a lengthy text.

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42. Don't put information in a table that can more easily be presented and understood in the text. Readers should be able to understand the information in the table without referring to the text. The title of a table should also be understood without referring to the text.
43. Identify the units of measurement of the tabled data in the most general way possible. If all data in the table have the same unit of measurement, that unit should be in parentheses following the table title. If the columns or rows have different units of measurement, but all data in a particular column or row have the same unit, identify the unit (within parenthesis) as part of the column header or row identifier.
44. When a table contains data that have been averaged, be sure to report the mean plus or minus SD.
45. Tables should stand alone. They should have both a title and a legend.
46. Illustrations are often helpful in presenting concepts that are difficult to describe.
47. Each illustration should have a legend that describes the illustration and emphasizes its important points.
48. If an illustration has been published previously, written permission for its use must be obtained from the copyright holder (usually the publisher). The original source should be cited as a reference.
49. The following texts provide additional helpful information for writers.
Day RA. How to Write and Publish a Scientific Paper. 4th ed. Phoenix, AZ, Oryx Press; 1994.
- Iverson C, Dan BB, Glitman P, et al. American Medical Association Manual of Style. 8th ed. Baltimore, MD: Williams & Wilkins; 1989.
50. A style manual is a collection of rules and regulations that editors get tired of repeating to authors. The answers to most questions can be found here. The AMA Manual of Style has been adopted as the official style manual of the American Physical Therapy Association and, therefore, for the School of Physical Therapy.
51. Structure is only half the battle. Grammar and style are equally important.
52. Numbers appearing at the beginning of a sentence, title, or subheading should be spelled out. Numbers greater than nine can use Arabic numerals with the previous exceptions. Numbers nine and under should be spelled out.
53. Appendices are discouraged by AMA style. However, this is in reference to publication. You may include appendices if the material is an adjunct to the text. An example might be a survey instrument.
54. Commas should be used to separate three or more elements in a series and should be used before the conjunction and the final item.
55. Em dashes are used to indicate an interruption or break in thought in a sentence.
56. Gender neutral language should be used when appropriate. Try to word sentences so that you avoid the use of "he and/or she."
57. Abbreviations should be limited to internationally approved and accepted units of measure and well-recognized clinical and technical terms and symbols.
58. When you use the words "however" or "therefore" in the middle of a sentence and the phrases before and after could stand alone as complete sentences, place a semicolon before the "however" and a comma after it. If one or both phrases are not complete sentences, place a comma before and after the "however".

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59. Go to the library and peruse various articles and theses - this is a great way to examine evidence of these writing tips!

These writing tips compiled and presented by the faculty of the School of Physical Therapy, Texas State University-San Marcos. May 1997, Revised July 1998, Revised June 2001, May 2004

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Attachment #3 Student Records Release Form

I, _____, give consent to the School of Health Administration to release the following information contained in my educational record. This information is to be provided to

for the purpose of _____.

-

Signature

Date

UPPS 01.04.31 Access to Students Records
Family Educational Rights and Privacy Act of 1974

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Attachment #4 Consent to Photography

Consent Agreement and Release Statement to be Photographed/Videotaped and Named

You will be asked to complete a separate copy for our records.

I, _____, hereby acknowledge that I agree to give Texas State University-San Marcos (Texas State) the right and permission to make photographs and/or videotapes (audio-visuals) of me. I understand that I may be identified by name when such audio-visuals are used. Such audio-visuals may be published, reproduced, exhibited, copyrighted, and used anywhere in the world in connection with the following situations:

1. Educational presentations by faculty or students
2. Advertising and promotion of the programs and Schools of Texas State including, but not limited to, publication on official Texas State web pages and in official Texas State brochures and alumni newsletters.

I hereby irrevocably release and waive any claims against Texas State and its faculty and staff relating to rights of privacy, rights of publicity, confidentiality, and copyright regarding the use of such audio-visuals when used by Texas State in the situations previously described.

I hereby declare that I am at least 18 years of age and have every right to contract in my own name in the above regard.

Signature

Date

Signature of Witness

Date

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Attachment #5 ACHE Code of Ethics

AMERICAN COLLEGE OF HEALTHCARE EXECUTIVES CODE OF ETHICS*

* As amended by the Board of Governors on November 14, 2011.

PREAMBLE

The purpose of the *Code of Ethics* of the American College of Healthcare Executives is to serve as a standard of conduct for affiliates. It contains standards of ethical behavior for healthcare executives in their professional relationships. These relationships include colleagues, patients or others served; members of the healthcare executive's organization and other organizations; the community; and society as a whole.

The *Code of Ethics* also incorporates standards of ethical behavior governing individual behavior, particularly when that conduct directly relates to the role and identity of the healthcare executive.

The fundamental objectives of the healthcare management profession are to maintain or enhance the overall quality of life, dignity and well-being of every individual needing healthcare service and to create a more equitable, accessible, effective and efficient healthcare system.

Healthcare executives have an obligation to act in ways that will merit the trust, confidence, and respect of healthcare professionals and the general public. Therefore, healthcare executives should lead lives that embody an exemplary system of values and ethics.

In fulfilling their commitments and obligations to patients or others served, healthcare executives function as moral advocates and models. Since every management decision affects the health and well-being of both individuals and communities, healthcare executives must carefully evaluate the possible outcomes of their decisions. In organizations that deliver healthcare services, they must work to safeguard and foster the rights, interests and prerogatives of patients or others served.

The role of moral advocate requires that healthcare executives take actions necessary to promote such rights, interests and prerogatives.

Being a model means that decisions and actions will reflect personal integrity and ethical leadership that others will seek to emulate.

I. THE HEALTHCARE EXECUTIVE'S RESPONSIBILITIES TO THE PROFESSION OF HEALTHCARE MANAGEMENT

The healthcare executive shall:

- A. Uphold the *Code of Ethics* and mission of the American College of Healthcare Executives;
- B. Conduct professional activities with honesty, integrity, respect, fairness and good faith in a manner that will reflect well upon the profession;

- C. Comply with all laws and regulations pertaining to healthcare management in the jurisdictions in which the healthcare executive is located or conducts professional activities;
- D. Maintain competence and proficiency in healthcare management by implementing a personal program of assessment and continuing professional education;
- E. Avoid the improper exploitation of professional relationships for personal gain;
- F. Disclose financial and other conflicts of interest;
- G. Use this *Code* to further the interests of the profession and not for selfish reasons;
- H. Respect professional confidences;
- I. Enhance the dignity and image of the healthcare management profession through positive public information programs; and
- J. Refrain from participating in any activity that demeans the credibility and dignity of the healthcare management profession.

II. THE HEALTHCARE EXECUTIVE'S RESPONSIBILITIES TO PATIENTS OR OTHERS SERVED

The healthcare executive shall, within the scope of his or her authority:

- A. Work to ensure the existence of a process to evaluate the quality of care or service rendered;
- B. Avoid practicing or facilitating discrimination and institute safeguards to prevent discriminatory organizational practices;
- C. Work to ensure the existence of a process that will advise patients or others served of the rights, opportunities, responsibilities and risks regarding available healthcare services;
- D. Work to ensure that there is a process in place to facilitate the resolution of conflicts that may arise when values of patients and their families differ from those of employees and physicians;

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- E. Demonstrate zero tolerance for any abuse of power that compromises patients or others served;
- F. Work to provide a process that ensures the autonomy and self-determination of patients or others served;
- G. Work to ensure the existence of procedures that will safeguard the confidentiality and privacy of patients or others served; and.
- H. Work to ensure the existence of an ongoing process and procedures to review, develop and consistently implement evidence-based clinical practices throughout the organization.

III. THE HEALTHCARE EXECUTIVE'S RESPONSIBILITIES TO THE ORGANIZATION

The healthcare executive shall, within the scope of his or her authority:

- A. Provide healthcare services consistent with available resources, and when there are limited resources, work to ensure the existence of a resource allocation process that considers ethical ramifications;
- B. Conduct both competitive and cooperative activities in ways that improve community healthcare services;
- C. Lead the organization in the use and improvement of standards of management and sound business practices;
- D. Respect the customs and practices of patients or others served, consistent with the organization's philosophy;
- E. Be truthful in all forms of professional and organizational communication, and avoid disseminating information that is false, misleading or deceptive;
- F. Report negative financial and other information promptly and accurately, and initiate appropriate action;
- G. Prevent fraud and abuse and aggressive accounting practices that may result in disputable financial reports;
- H. Create an organizational environment in which both clinical and management mistakes are minimized and, when they do occur, are disclosed and addressed effectively;
- I. Implement an organizational code of ethics and monitor compliance; and

- J. Provide ethics resources and mechanisms for staff to address ethical organizational and clinical issues.

IV. THE HEALTHCARE EXECUTIVE'S RESPONSIBILITIES TO EMPLOYEES

Healthcare executives have ethical and professional obligations to the employees they manage that encompass but are not limited to:

- A. Creating a work environment that promotes ethical conduct;
- B. Providing a work environment that encourages a free expression of ethical concerns and provides mechanisms for discussing and addressing such concerns;
- C. Promoting a healthy work environment which includes freedom from harassment, sexual and other, and coercion of any kind, especially to perform illegal or unethical acts;
- D. Promoting a culture of inclusivity that seeks to prevent discrimination on the basis of race, ethnicity, religion, gender, sexual orientation, age or disability;
- E. Providing a work environment that promotes the proper use of employees' knowledge and skills; and
- F. Providing a safe and healthy work environment.

V. THE HEALTHCARE EXECUTIVE'S RESPONSIBILITIES TO COMMUNITY AND SOCIETY

The healthcare executive shall:

- A. Work to identify and meet the healthcare needs of the community;
- B. Work to support access to healthcare services for all people;
- C. Encourage and participate in public dialogue on healthcare policy issues, and advocate solutions that will improve health status and promote quality healthcare;
- D. Apply short- and long-term assessments to management decisions affecting both community and society; and
- E. Provide prospective patients and others with adequate and accurate information, enabling them to make enlightened decisions regarding services.

**VI. THE HEALTHCARE EXECUTIVE'S RESPONSIBILITY
TO REPORT VIOLATIONS OF THE CODE**

An affiliate of ACHE who has reasonable grounds to believe that another affiliate has violated this *Code* has a duty to communicate such facts to the Ethics Committee.

ADDITIONAL RESOURCES – Available on [ache.org](https://www.ache.org) or by calling ACHE at (312) 424-2800.

1. ACHE *Ethical Policy Statements*
 - “Considerations for Healthcare Executive-Supplier Interactions”
 - “Creating an Ethical Culture Within the Healthcare Organization”
 - “Decisions Near the End of Life”
 - “Ethical Decision Making for Healthcare Executives”
 - “Ethical Issues Related to a Reduction in Force”
 - “Ethical Issues Related to Staff Shortages”
 - “Health Information Confidentiality”
 - “Impaired Healthcare Executives”
 - “Promise Making, Keeping and Rescinding”
2. ACHE Grievance Procedure
3. ACHE Ethics Committee Action
4. ACHE Ethics Committee Scope and Function

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Attachment #6 Student Acknowledgement Form

I, _____,

have read and understand the policies and procedures contained in the Student Handbook.

I agree to abide by **all** policies/procedures as addressed in this handbook. These policies/procedures include:

1. Academic policies and procedures,
2. ACHE Code of Ethics,
3. Texas State University Honor Code,
4. Confidentiality Statement.

I have completed this page and:

1. returned the original to the School Chair for inclusion in my student file.
2. retained a copy for myself.

Student Signature

Date

Student Copy

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Appendix #7 Code of Student Conduct

I. General Provisions

1.01 Applicability

This Code of Student Conduct is applicable to any student currently enrolled; enrolled in the previous semester/session and eligible to enroll in the next consecutive semester/session; or newly or re-admitted and eligible to enroll in the next semester/session. A student who withdraws from school is subject to disciplinary action for any conduct that occurred while the student met the aforementioned criteria. Students involved in misconduct that would subject them to disciplinary action while not enrolled may be required to appear before the Dean of Students or designee before being readmitted to the university.

This code is adopted pursuant to authority granted by The Texas State University System Board of Regents.

This code is printed annually in the student handbook. The handbook is also available online at: www.dos.txstate.edu. When this code is updated between printed editions, the most updated version, generally the online version, shall prevail.

1.02 Definitions

A. "Disciplinary action" means proceedings under section III of this Code.

B. "Hazing" means those activities defined in sections 37.151-37.157 of the Texas Education Code (See Student Handbook Appendix A).

C. "Hearing Officer" means that person appointed by the Dean of Students to conduct hearings under section III, subsection 3.05, of this code.

D. "Notice" means correspondence:

1. Sent by mail, addressed to the addressee at the local address and/or permanent address, as shown on university records; or
2. Personally delivered to the addressee; or
3. Sent electronically from a Texas State e-mail account to the student's Texas State e-mail account.

E. "Preponderance of the evidence" means the greater weight of credible evidence. It means the strongest evidence, however slight the difference might be.

F. "Published university policy" means a written rule or policy from: (1) the Board of Regents, Texas State University System; (2) a university policy and procedure statement (UPPS); (3) a university division (for example, a PPS from Academic Affairs); or (4) a faculty, staff, or student handbook.

G. "University" means Texas State University, including the San Marcos and Round Rock campuses.

H. "University official" means a person in an official university capacity, including regents, officers, faculty and administrative staff.

I. "University property" means property owned, controlled, used, or occupied by the university, including property physically removed from Texas State campuses.

1.03 Awareness of Policies

Each student is expected to be fully acquainted with all published university policies, copies of which are available to each student for review in the Alkek Library at the Reserve Desk.

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The university will hold each student responsible for compliance with these published policies. A violation occurring off campus while participating in a university-sponsored program may be treated as if the violation occurred on campus. Students also are expected to comply with all federal, state and local laws. Any student who violates any provision of those laws is subject to disciplinary action, notwithstanding any action taken by civil authorities. This principle extends to conduct off campus that is likely to have an adverse effect on the university or the educational process.

II. Responsibilities of Students

2.01 Conduct Required

Students shall conduct themselves in a manner consistent with the university's mission as an educational institution. Students who conduct themselves in a manner that violates this Code of Student Conduct may be subject to disciplinary penalties.

2.02 Conduct Prohibited

Specific examples of conduct which are violations of this Code of Student Conduct include, but are not limited to, committing or attempting to commit the following:

- A. committing an act that would constitute a criminal offense under state, federal or municipal law;
- B. violating any published university policy, including its policy against excessive parking violations;
- C. failing to comply with a directive from a university official, including a summons to the office of an administrative officer at a designated time;
- D. furnishing false information to the university or giving false testimony or evidence at a disciplinary or other administrative proceeding;
- E. issuing a check to the university without sufficient funds or otherwise failing to meet financial obligations to the university;
- F. endangering the health or safety of other persons, including, for example, throwing an object, without authorization, in or from university facilities;
- G. misusing fire extinguishers or other safety equipment on university owned or controlled property;
- H. interfering or disrupting university teaching, research or other activity, including administrative, disciplinary or public service activities (see Student Handbook Appendix B on disruptive activities);
- I. endangering the physical or mental health or safety of any person or intentionally or recklessly causing injury to any person;
- J. possession of or use of university keys without authorization;
- K. engaging in or submitting to hazing (see Student Handbook Appendix A), including hazing associated with an initiation by an organization using dangerous, harmful or degrading acts;
- L. violating published university policies on the possession or use of alcoholic beverages (see Student Handbook Appendix C);
- M. gambling on university property;

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- N. possessing, using, selling or distributing any illegal drug or controlled substance (The sanctions for this violation range from mandatory counseling to expulsion. A second infraction shall result in expulsion.);
- O. possessing or using a firearm, ammunition, weapon (except as permitted by Government Code Section 411.2032) or replica thereof on university property. Request for exceptions to this prohibition must be submitted in writing to the Texas State University Police School. The Chief of Police or their designee will review the request and consult any relevant stakeholder. The request may be denied, approved, or approved with qualifications. Examples of approved with qualifications may include requirements for the requestor to provide security, safety equipment, special facilities, and/or notifications. A request must comply with all other applicable laws and regulations to be eligible for exception.
- P. possessing, igniting or detonating an explosive device, firework or flammable object on university owned or controlled property that could damage a person or property;
- Q. stealing, destroying, damaging or misusing the property of the university or that of another person;
- R. forging, altering or misusing university documents, forms, records, student identification cards or admission documents;
- S. violating a published university policy governing residence life or breaching a Housing and Residential Life contract;
- T. advocating, either orally or in writing, the conscious and deliberate violation of any federal, state or local law ("Advocating" means addressing an individual or group for imminent action and steering it to such action as opposed to abstractly espousing the moral propriety of such action.);
- U. entering, without authorization, university buildings or facilities, or using university equipment or resources without authorization;
- V. failing to maintain a current official mailing address in the Registrar's Office or giving a false or fictitious address to a university official;
- W initiating, communicating or circulating a false report of a present, past or future bombing, fire, offense or other emergency that would cause action by an agency organized to deal with emergencies; placing a person in fear of imminent serious bodily injury; or preventing or interrupting the occupation of a building, room, vehicle or other mode of conveyance;
- X. harassing or threatening (by any means) to take unlawful action against any person, causing or intending to cause annoyance or alarm (see Student Handbook Appendix D);
- Y. engaging in academic dishonesty as described in UPPS 07.10.01 (Honor Code) and in this handbook;
- Z. engaging in disorderly conduct on property owned or controlled by the university, or at a university function, that interferes with the university's programs or activities;
- AA. using authority granted by state law, system rule or university policy to deprive a person of his or her civil rights;
- BB. engaging in or making life-threatening gestures;
- CC. violating any published university policy relating to computer resources, electronic network facilities or the Internet; or
- DD. attempting to commit any of these prohibited acts.

III. Administration of Student Justice

3.01 Authorization to Adjudicate Conduct Violations

Under the direction of the Vice President for Student Affairs, the Dean of Students or his/her designee, shall be primarily responsible for the administration of the student justice system.

A. Any student alleged to engage in or make life-threatening gestures may be required to report as soon as possible to the director of the Counseling Center or the designated representative. The director may designate the psychologist, psychiatrist or counselor whom the student will see. The Dean of Students or designee, upon the recommendation of the director, may require such students to obtain, at their own expense, a psychiatric evaluation to determine fitness to continue their current enrollment at Texas State. Failure to consult with the director of the Counseling Center or his/her representative or to comply with evaluation requirements and recommendations can result in disciplinary action, including, but not limited to, a registration hold.

B. The Associate Director of the School of Housing and Residential Life, or designee, will work closely with the Dean of Students, or designee, in resolving minor disciplinary problems resulting from the alleged violation of regulations involving residence hall residents.

3.02 Disciplinary Procedures

A. Investigation — The Dean of Students or designee will investigate information that a student may have violated a university policy. During the investigation, the Dean of Students or designee will give the student an opportunity to explain the incident, unless the student is unavailable. The Dean of Students or designee may conduct an investigation and make an administrative determination in the absence of a student if the student does not respond within the time period specified in any notice to the student. The Dean of Students or designee may place a registration hold, preventing a student from registering for additional courses, until the student responds to a summons or a decision is finalized.

B. Administrative Review — If the Dean of Students or designee concludes, based on the preponderance of evidence, that the student has violated the Code of Student Conduct, the Dean of Students or designee will determine an appropriate disciplinary penalty.

1. The Dean of Students or designee will discuss the findings and determination of an appropriate penalty with the student, if the student is available. In cases where the Dean of Students or designee determines that the allegations against the accused student are true but the only punishment assessed is a warning, the student may not appeal. For sanctions other than warnings, the Dean of Students or designee will give the student an opportunity to either accept or reject the Dean of Students or designee's decision.

2. If the student accepts the Dean of Students or designee's decision, the student shall so indicate in writing and waive his or her rights to a hearing. The Dean of Students or designee may then assess the disciplinary penalty.

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3. If the student does not accept the Dean of Students or designee's decision, the Dean of Students or designee will initiate the hearing procedure.

3.03 Disciplinary Penalties

A. Penalties — Mitigating or aggravating factors in assessing the proper level of discipline may include, but not be limited to, the student's motive for engaging in the behavior; disciplinary history; effect of the behavior on safety and security of the university or college community; and the likelihood that behavior will recur. The following penalties comprise the range of official university actions that may be taken when, based on the preponderance of the evidence, a student is determined to have engaged in prohibited conduct. These penalties are not exclusive and may be imposed together with other sanctions.

1. Warning — A written notice to the student that a violation of a published university policy has occurred and that the continuation of such conduct or actions could result in further disciplinary action.
2. Restricted privileges — Denial or restriction of one or more university privileges granted to students. These may be, but are not limited to: parking privileges; dining facility privileges; visitation privileges; use of university computers, computer facilities or systems; participation in athletics; or other extracurricular activities.
3. Special project — The requirement that the student complete a special project, for example, writing an essay or attending a special class or lecture.
4. Restitution — Paying for physical or property damage, losses or misappropriation, either monetarily or by the performance of specific duties.
5. Cancellation of residence hall contract.
6. Disciplinary probation — An indication that the student is not in good standing, and that his/her continued enrollment is conditioned upon adherence to published university policies. Probation automatically restricts the following privileges:
 - a. A student on disciplinary probation is ineligible to be elected or hold any executive office of any student organization recognized by Texas State; and
 - b. A student on disciplinary probation may not represent the university in any special or honorary role.
7. Withholding an official transcript or degree.
8. Cancellation of pre-registered courses, prohibition against readmission or restriction from pre-registration.
9. Denial or nonrecognition of a degree.
10. Loss of or ineligibility for a student grant or loan.
11. Suspension — Separation from the university for a definite term, during which the student shall not be permitted to: earn university credit at Texas State, be on university owned property nor participate in any university activity.
12. Expulsion — Permanent separation from the university.

A student who has been suspended or expelled from any Texas State University System component shall be ineligible to enroll at any other system

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component during the period of suspension or expulsion. The registrar of each component is authorized to make an appropriate notation on the student's transcript to accomplish this objective and to remove the notation when the student's disciplinary record has been cleared. In addition to Texas State, the Texas State University System includes all Lamar University, Sam Houston State University, and Sul Ross State University campuses.

B. Recording of Penalties — The penalties provided in subsections 3.03a, 8, 9, 11, and 12 may be noted on the student's permanent transcript. Any record of penalty, except for expulsion, not noted on the transcript shall be expunged no later than five years after the penalty is assessed.

C. Finality of Penalties — No penalty shall take effect until disciplinary action becomes final. Disciplinary action becomes final when:

1. During administrative disposition:
 - a. upon acceptance by the student of the Dean of Students or designee's decision,
 - b. if the only sanction is a warning, or
 - c. upon notification to the student of the decision of the Dean of Students or designee and the expiration of the time in which to file a notice of appeal to the hearing board.
2. In the event of a hearing:
 - a. the sanction assessed is a warning, or
 - b. upon notification to the student of the decision of the hearing panel and the expiration of the time in which to file a notice of appeal to the Vice President for Student Affairs.
3. In the event of review by the Vice President for Student Affairs, upon notification to the student of the decision of the Vice President for Student Affairs.

3.04 Interim Disciplinary Action

A. The President or Vice President for Student Affairs or their designee may take immediate interim disciplinary action, including suspension, pending a hearing, against a student for allegedly violating a university policy when the student's continuing presence is reasonably believed to pose:

1. A danger to persons or property; or
2. An ongoing threat of disrupting the academic process.

B. The university official involved shall notify the student of the interim disciplinary action by the most expeditious means available. Thereafter, the Dean of Students or designee may offer the student an opportunity to have an administrative review or to immediately initiate the hearing procedures provided in this code. If the latter option is chosen, a hearing shall be held no later than 12 class days after the temporary disciplinary action was taken.

3.05 Hearings

A. Hearing Board — At the beginning of each fall semester, the Dean of Students will appoint an at-large hearing board composed of student members and hearing officers. The hearing officers will be full-time faculty or staff members. Student members must be in good academic and disciplinary standing. One hearing officer,

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two student members, and an alternate student member, hereafter collectively referred to as the hearing panel, shall be scheduled to hear each hearing based on availability and scheduling constraints. If one hearing officer and three student members are not able or willing to hear a case, the Dean of Students may appoint new members to the board so that every case may be heard within a reasonable time period. During hearings, new appointments, whether appointed for one hearing or the remainder of the current academic year, shall have all the qualifications, authority and responsibilities of a board member appointed at the beginning of the fall semester. The hearing officer shall preside over the disciplinary hearing.

B. Students' Rights — Each student who requests a hearing or who is given an interim disciplinary sanction shall be afforded:

1. **Notice** — Written notification at least five class days before the hearing specifying:

- a. the university policy alleged to have been violated;
- b. a summary of the facts alleged to constitute the violation;
- c. the date, time and location of the hearing;
- d. the names of expected witnesses and a summary of their expected testimony;
- e. a description of other evidence that the Dean of Students or designee will present at the hearing;
- f. notification if the Dean of Students or designee intends to use legal counsel for other than advisory purposes as provided in section B, 3;
- g. a statement that the student must provide a list of witnesses and a summary of their expected testimony to the Dean of Students or designee at least 48 hours before the hearing; and
- h. the names of the hearing officer and student members of the hearing panel.

The Dean of Students or designee will send this notification to the student either by certified mail with return receipt requested, addressed to the student at the address appearing in the registrar's records; by hand delivering the notification to the student and having the student sign a receipt; or from a university e-mail account to the student's assigned university e-mail account.

2. **Hearing** — This is an opportunity for the student to attend the hearing and present relevant evidence. If the student fails to attend, the hearing may proceed. The student may present his or her own defense against the charges and may produce either oral testimony or written affidavits of witnesses on his or her behalf.

3. **Representative** — This is an opportunity for the student to have an advisor or counsel present at meetings with the Dean of Students or designee and during hearings. The student will provide the representative at his or her expense. The university is not obligated to arrange or provide a representative. In addition, the student may also have parents or a legal guardian present.

- a. To the extent that the Dean of Students or designee uses legal counsel for other than advisory purposes during the hearing, the

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student shall be afforded the same opportunity. The Dean of Students or designee will notify the student of the Dean of Students or designee's intent to use legal counsel when providing the notification described in 3.05, B, 1.

b. The student's representative may not address the panel, question witnesses or the Dean of Students or designee, or participate in the hearing except to offer advice and counsel to the student.

4. Challenge to Impartiality — This is an opportunity for the student to challenge the impartiality of the hearing officer or a student member of the hearing panel. This challenge must be made at any time before the introduction of testimony or other evidence. The person challenged will be the sole judge as to whether he or she can serve with fairness and objectivity. If the person challenged chooses not to serve, the Dean of Students will appoint a special replacement for that case.

C. Notification of Evidence — At least 48 hours before the hearing, both the Dean of Students or designee and the student will provide the other party with the witnesses, summaries of testimony, documents and other evidence to be presented at the hearing.

D. Burden of Proof — The Dean of Students or designee has the burden of going forward with the evidence and the burden of substantiating the violation by the preponderance of the evidence.

E. Questioning Witnesses — The Dean of Students or designee, the student, and members of the hearing panel may question witnesses regarding relevant matters.

F. Recording — The hearing, with the exception of the panel's deliberation, will be recorded. If the student or the Dean of Students or designee desires to appeal the panel's findings, a copy of the hearing recording and records presented at the hearing will be forwarded to the Vice President for Student Affairs. Students may request an electronic copy of the hearing at no cost. Requests for additional records that incur an expense will be paid by the requesting party.

G. Postponement — The Dean of Students may postpone a hearing for good cause. A request for postponement must be filed with the Dean of Students Office at least 24 hours before the hearing.

H. Hearing Officer — The hearing officer will determine the procedure to be followed, rule on the admissibility of evidence, and control decorum in the hearing.

I. Attendance — Upon the request of the student or the Dean of Students or designee, or upon his or her own initiative, the hearing officer may issue a written request for a witness to appear and testify or to produce documents at a hearing. Requests shall be personally delivered or sent by certified mail. Students who are requested to appear at hearings are expected to comply.

J. Confidentiality — During the hearing, only the members of the hearing panel, Dean of Students or designee and his counsel, the student and his or her advisor, the student's parents or legal guardians, the witness currently testifying, and the transcriber will be allowed in the hearing room. After testifying, a witness may not remain in the hearing room unless both the student and the Dean of Students or

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designee consent. All persons present at the hearing shall treat matters discussed with confidence.

K. Relevant Evidence — Legal rules of evidence shall not apply to hearings. Any relevant evidence shall be admitted, if it is credible and is the sort that reasonable people would rely upon in the conduct of their affairs.

L. Not Compelled to Testify — The student may not be compelled to testify against himself or herself.

M. Procedural Rules

1. The hearing officer will invite all parties entitled to be present into the hearing room.
2. The hearing officer will read a statement of confidentiality.
3. The hearing officer will state the university policy alleged to have been violated;
4. The Dean of Students or designee will present evidence of the student's violation of the policy.
5. The student may present his or her own defense against the charges.
6. Both parties may question the witness.
7. Both parties may present rebuttal evidence.
8. Both parties may present brief summations.
9. The hearing officer will dismiss both parties and the hearing panel will deliberate and determine by a majority vote whether the student has violated a university policy. If the panel finds that the student did violate a university policy, it will assess the penalty. The hearing officer shall report in writing the panel's findings and the penalty, if any, to be assessed.
10. The hearing officer will send the panel's report to the VPSA, with copies to the student and to the Dean of Students or designee. If the student is found to have violated a university policy, and if a disciplinary penalty has been assessed, the hearing officer will inform the student of his or her right to appeal to the VPSA.

IV. Appeals

4.01 Vice President for Student Affairs (VPSA)

In cases in which the sanction assessed is a verbal or written warning or probation, the decision of the hearing panel is final. In cases in which the sanction assessed is beyond a warning or probation, either party may appeal to the VPSA based on:

- A. whether or not a fair hearing was afforded (A fair hearing includes notice of the alleged misconduct, and an opportunity to present evidence.)
- B. whether or not the sanctions levied were appropriate to the offense
- C. whether or not the finding was supported by the evidence
- D. whether or not new evidence is introduced that was not available at the time of the hearing

An appeal is not a rehearing of the original case; the VPSA's review will focus on arguments addressing the basis, listed above, of the appeal.

4.02 Notice

Either party appealing to the VPSA must give written notice to the VPSA no later than five business days after the hearing panel's decision. All supporting documentation, including written

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arguments, when appropriate or requested, shall be filed with the VPSA no later than five business days after notice of appeal is given. Both parties, at the discretion of the VPSA, may submit oral or written arguments to support their positions.

4.03 Action

Upon appeal, the VPSA will review the materials presented at the hearing and may require the parties to submit written material or oral statements. The VPSA shall respond to the appeal within 10 business days after all the documentation is received and all testimony is heard. The VPSA may postpone a decision for good cause.

A. If the student is required to appear in person before the VPSA, the student may have a representative present, as provided in section 3.05 B, 3.

B. The VPSA may approve, reject, or modify the decision of the hearing panel or may require that the panel reopen the hearing to hear additional evidence or to reconsider the decision.

C. The VPSA will inform the student, the Dean of Students or designee, and the hearing officer of his or her decision in writing. The VPSA's decision is final except for the discretionary review described below.

4.04 Discretionary Review

The VPSA, the president or the Board of Regents may, on their initiative, review any disciplinary case, and upon such review may approve, reject or modify the lower decision, or may remand the decision to the hearing officer or hearing panel for presentation of additional evidence and reconsideration of the decision.

More information can be found in the student handbook available at <http://www.dos.txstate.edu/handbook.html>