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| **Clinical Assignment/Field Placement During Extreme Weather Conditions** | **CHP/PPS No. 05.04.02****Effective Date: 07/2014****Revised Date: 09/2020****Next Review Date: September, E3YRS****Sr. Reviewer: CHP Associate Dean** |

**01. POLICY**

01.01 The purpose of this PPS is to set forth the procedures to be followed by the academic units of the College of Health Professions during impending extreme weather conditions. These procedures apply only to students scheduled for clinical internship experiences.

01.02 The personal safety for students, faculty, and staff during extreme weather conditions should always be considered.

**02. DEFINITIONS**

 02.01 For the purposes of this document, the following definitions apply:

a. Academic units in the College are: Departments of Communication Disorders, Health Information Management, Physical Therapy, Respiratory Care, Programs of Clinical Laboratory Science, and Radiation Therapy, and the School of Health Administration and the St. David’s School of Nursing.

b. Extreme weather conditions include: flash flooding, ice and snow, and tornados.

**03. PROCEDURES**

03.01 Students, faculty, and staff scheduled for clinical internship experiences during extreme weather conditions should do the following:

a. Check the Texas State Weather Alert System for information about campus closings for San Marcos and Round Rock and follow that directive. Phone: (512) 245-2424 website: [www.txstate.edu](http://www.txstate.edu).

b. Clinical Assignment/Field Placement off-campus will follow local school or healthcare facilities closing directives. The clinical instructor/program director and the on-site facility preceptor/supervisor will be notified if not attending the Clinical Assignment/Field Placement.

c. Arrangements will be made by the academic units that require mandatory clinical hours for a schedule to satisfy the requirement where hours have been missed.

**04. CERTIFICATION STATEMENT**

04.01 This CHP/PPS has been approved by the following individuals in his/her official capacity and represents College policy and procedure form the date of this document until superseded.

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| Reviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dr. Matthew Brooks, Associate Dean | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dr. Ruth B. Welborn, Dean | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |