



Judson Independent School District
Department of Special Education Services
8205 Palisades Drive
Live Oak, TX 78233
(210) 945-5348 / Fax (210) 945-6921

School Year: _____

EXPECTATIONS AND CODE OF PROFESSIONAL CONDUCT FOR VISITING NURSING STAFF

Judson ISD welcomes professional nursing staff who accompany and care for our students requiring this level of need. While in our buildings and in our classrooms, we ask that you adhere to the following expectations and code of conduct.

1. Your primary commitment is to the student/patient you serve as a nursing staff member of your agency. The classroom teacher will direct activities aimed at the student's progress. We welcome your participation in the student's activities, even those that are educational in nature.
2. Resolve issues and problems that come up with those directly in the classroom. The school nurse of the campus, the classroom teacher, and the campus principal are all good resources to you as well. The school nurse will be asked to monitor all nursing activities on campus and report issues of concern. There is a strong expectation that most issues can be resolved at the classroom level. We ask that you communicate concerns and resolve to have good communication with those in the classroom.
3. You are requested to abide by a strict code of privacy pertaining to student/patient information. Do not tell others about the behaviors or conditions of other students who are classmates of your client. You may hear about personnel and confidential health information, and you are expected to keep these issues private. Any suspicion or indication of abuse or neglect of the student should be reported immediately to the school nurse or the campus principal.
4. Cell phone use in the classroom is strictly prohibited unless conveying a medical issue or concern to outside medical support.
5. Private duty nurses are required to wear a JISD administered badge and to sign in and out of the campus front office daily.

Violations of these expectations may result in JISD asking you not to return to our campuses. We will work with your agency nursing leaders to resolve issues as they arise. Your name and signature below indicate your good faith effort to abide by this code of professional conduct while at JISD.

Printed Name: _____

Signature: _____ Date: _____