College of the Canyons Nursing Program Policy Handbook

The following policies and procedures assist the Nursing Department administrators, faculty and staff in preparing entry-level registered nurses at College of the Canyons.



Updated 4/2019, Nursing Faculty Updated 9/2022, Nursing Faculty

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Santa Clarita Community College District

Nursing Department

POLICY: Selection Process SECTION: Program Administration APPROVAL DATE: Previously Approved, reviewed 3/2019, reviewed 8/2022 REVIEWED: Every 3 years

To be considered for entrance, all prerequisites must be completed with a 2.5 GPA or higher. Students will be admitted to the program based on their scholastic eligibility and placement on a nursing assessment test as per SB 1309 (<u>http://www.leginfo.ca.gov/pub/05-06/bill/sen/sb_1301-1350/sb_1309_bill_20060930_chaptered.html</u>)

SCHOLASTIC ELIGIBILITY: Scholastic eligibility is determined through the California Community College Chancellor's Office Approved formula which calculates the student's probability of successfully completing the ADN program. The formula uses the following criteria:

Core Biology GPA – all Anatomy, Physiology, and Microbiology courses taken at the college level. Core Biology repetitions – the number of times a student has repeated a Core Biology course including withdrawals. English GPA – all credit English course grades regardless of the level of the course. Overall GPA – the college GPA as it appears on college transcripts excluding non-credit and notfor-credit courses. Students must have a minimum required score of 70 to be eligible for admission.

ASSESSMENT TEST: Qualified applicants are required to take a state approved nursing assessment test. Students must rank at the required level to be eligible for admission into the program. Currently, this is a 62% composite score based on the California Community College Chancellor's Office recommendation. Final selections are made using both multi-criteria screening for ranking and random selection. Qualified applicants not selected must reapply in order to be considered. The Health Professions and Public Safety (HPPS) office does not retain applications.

Students not meeting eligibility criteria are offered a remediation plan. After successful completion, students are eligible to reapply for random selection. If the remediation plan is not complete by the deadline, the student is no longer eligible to apply to the program.

Students who have been previously enrolled in the COC or another RN program will only be allowed one entry into the COC RN program.

POLICY: Multi-Criteria Used for Selection Process **SECTION:** Faculty **APPROVAL DATE:** Previously Approved, reviewed 3/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

The following table lists the criteria and point system for use with the multi-criteria screening process.

Life Experie	nces		
Disabilities		1	
Low Family Income		1	
First generation		1	
Need to work		1	
Disadvantaged		1	
Difficult personal/family		1	
Refugee/veteran		1	7
Language Prof	iciency		
	,		
Second Language		1	*1
			*Director will
			review all others reported
			reported
GPA			
Core Biology GPA	4.0	25	
	3.5	20	
	3.0	15	
	2.5	10	25

Overall GPA	4.0	20	
	3.5	15	
	3.0	10	
	2.5	5	20
-			
	ATI TEAS		
	90-100%	40	
	85-89%	35	
	80-84%	30	
	75-79%	25	
	70-74%	20	
	62-69%	5	40
	Total Possible Points		100

POLICY: LVN to RN Selection Process and Work Experience Requirement **SECTION:** Program Administration **APPROVAL DATE:** Previously, revised 4/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

Effective: LVNs entering N109 in 2020:

LVNs admitted in the LVN to RN pathway will be selected on a random selection basis. Qualified applicants will demonstrate a work history as an LVN of one year in the last three years. All other admission requirements continue to apply.

POLICY: TEAS Test SECTION: Program Administration APPROVAL DATE: 3/25/2008. Revised 10/2016, reviewed 3/2019, revised 5/2022, reviewed 8/2022 REVIEWED: Every 3 years

All students entering the RN program must have ATI TEAS test results on file. Students that have taken the ATI TEAS test elsewhere are required to have a copy of their **first** ATI TEAS test results forwarded to the HPPS office by the established deadline for each application period.

If a student is found to have taken the ATI TEAS test previously and did not make this information available to the College of the Canyons nursing program, the student will be dropped immediately from the selection pool and/or the program.

5/2022 revision: Effective Spring 2023: ATI TEAS version 7 will be required for the Spring 2023 admission cycle.

POLICY: Student Records **SECTION:** Program Administration **APPROVAL DATE:** 10/2016. Revised 2018, reviewed 3/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

Student Records

Security

Student educational and medical records are protected at the federal level by the Family Education Rights and Privacy Act ("FERPA"). In addition, the Santa Clarita Community College District adheres to the regulations and policies as stated in Title V and the California Education Code. Lastly, the California Board of Registered Nursing requires that the nursing program keep a complete file of student records.

Student health data and student academic data are stored separately. Health data is separated from academic records and each is stored in a locked file cabinet in the HPPS office. The keys to these cabinets are in a locked desk drawer in a locked office. In addition, the outer office door for the school is locked when office staff are not present. Both file cabinets are available only to the office staff, the Dean the Nursing Program Director and the Assistant Directors.

Documentation

Each student file will contain a form labeled "Student File Tracking" form for documenting information pertinent to student progression (obtained during course meetings or as necessary). The Nursing Program Director and Assistant Directors complete this form.

POLICY: First Semester Sit-in Alternates **SECTION:** Program Administration **APPROVAL DATE:** 2015. Reviewed 3/2019, reviewed 8/2022 **REVIEWED**: Every 3 years

One to two students from the alternate list will be invited to attend the first week of Nursing 112 classes per administrative discretion. If one or two seats become available anytime during that week, one or two students (depending on the number of openings) will be offered placement within that cohort. The number of students invited will be decided by the program director with input from the lead instructor(s). In order to differentiate these students from the other alternates on the list, they will be labeled "Sit-in Alternates". For these students, the following process will be followed:

The week prior to beginning of the semester the first 1-2 students on the alternate list will be invited to attend the first week of all nursing classes. To distinguish them from the other alternates they will be labeled as a "sit-in alternate". The actual number will be jointly decided by the program director and first semester lead instructors.

If the number of openings is greater than the number of actual "sit-in alternates", the alternate list will be used to identify the order in which students are chosen for open seats. The student must meet the attendance policy for all first semester courses. The following policy will be observed if a seat does not become available. In the event the sit-in alternates do not meet the attendance policy as described, the following policy will not apply.

Follow-up:

If the student meets the attendance policy for the entire week and no seat becomes available s/he will be offered a seat the following semester. If the student accepts, s/he will have a guaranteed seat and need not reapply. The student is still required to attend new student orientation and will be required to meet that semester's deadlines for required documents.

POLICY: Social Security and Identification Verification
 SECTION: Program Administration
 APPROVAL DATE: 5/16/2007. Revised 2015, reviewed 1/2019, reviewed 3/2019, revised 7/2020, reviewed 9/2022
 REVIEWED: Every 3 years

All students must confirm that they have a social security number (SSN) or a Tax Identification Number (TIN) when applying. The student will be dismissed from the program if found to have an invalid SSN or TIN.

7/2020 revision: The requirement is stated in the Nursing Student Handbook. Clinical facilities may require SSN to access Electronic Medical Record (EMR) information.

POLICY: Background Checks **SECTION:** Program Administration **APPROVAL DATE:** Previously Approved. Revised Fall 2016, reviewed 3/2019, reviewed 8/2022 **REVIEWED**: Every 3 years

Board of Registered Nursing (BRN) Background Check Requirements

The BRN requires all graduates applying for nursing licensure to report felony and misdemeanor convictions, and to provide fingerprints for background checks. The Board of Registered Nursing may deny licensure based on background information involving criminal convictions. (See Bus. & Prof. Code § 144.) The BRN background check requirements are in addition to, and may differ from, any background checks required by the Program.

Students are hereby advised of the additional background check requirements required by BRN for licensure and students should contact the Board of Registered Nursing if they have any questions regarding these requirements. Please see The Board of Registered Nursing website for more details at http://www.rn.ca.gov/enforcement/convictions.shtml

The Joint Commission accredits health care programs. In order to comply with Joint Commission requirements and state and local regulations regarding background checks for healthcare providers, the College of the Canyons Nursing Program has adopted the following position statement consistent with policies of the Orange County/Long Beach (OC/LB) Consortium for Nursing: All nursing students must meet the health and safety standards of the clinical facilities at all times.

All clinical facilities/agencies require nursing students to undergo criminal background checks and drug screenings prior to being placed at their /agencies for clinical experiences. All nursing students must have clear criminal background checks and drug screenings to participate in placement(s) at clinical facilities/agencies. The background check is not a requirement for admission to the nursing program, however, a background check must be completed after an invitation for admission is received. Students are solely responsible for all costs associated with obtaining background checks and drug screens through the College of the Canyons authorized vendor. Please refer to the Nursing Department website for the current cost of background checks and drug screens. All decisions regarding background checks and drug screenings are determined by the individual clinical facilities/agencies in accordance with their rules and/or regulations. Students unable to obtain both background and drug screen clearances will not be able to complete mandatory course requirements. Applicants are strongly urged to consider these requirements prior to applying for admission. Students denied placement by a clinical facility/agency may request a written decision from the clinical facility/agency and will have an opportunity to respond in accordance with the clinical facility/agency's internal review process.

Students are advised that background check requirements may differ depending on the rules and/or regulations of individual clinical facilities/agencies. Accordingly, clinical facilities/agencies may require students to obtain new background checks and/or drug screening while enrolled in the Program. Anytime there is a break in the student's enrollment, a new background check and drug screening is required. Background checks will minimally include the following:

Seven years history

Address verification

Sex offender database search

Two names (current legal and one other name)

Three counties

OIG search

Social Security Number verification

Students will be unable to attend clinical facilities for the following convictions: • Murder • Felony assault • Sexual offenses/sexual assault • Felony possession and furnishing (without certificate of rehabilitation) • Drug and alcohol offenses (without certificate of rehabilitation) • Other felonies involving weapons and/or violent crimes • Class B and Class A misdemeanor theft • Felony Theft • Fraud. Students may be denied access to clinical facilities based on offenses appearing on the criminal record which may have occurred more than seven years ago. Students must provide schools and/or the authorized background check vendor with information allowing the Nursing Department (and clinical facilities as necessary) access to the background check. If the student's record is not clear, the student will be solely responsible for obtaining documents and having the record corrected to clear it. If this is not possible, the student will be unable to attend clinical rotations. Since clinical rotations are a mandatory part of nursing education; the student will be ineligible to be enrolled in the Nursing Program and will be dropped from the Program.

Clearance, Appeal, and Alternative Placement

Students will provide their background/drug screen data directly to the authorized vendor in accordance with the vendor's application process. Students are also required to sign a Background check and Drug Screen Consent and Release form authorizing the vendor and/or clinical facilities/agencies to release student's background/drug screen information to the clinical sites. If applicable, the clinical facilities/agencies will inform the Director of Nursing whether students are cleared for placement at their site(s). All decisions regarding background checks and drug screening are determined by the clinical facilities/agencies in accordance with their internal rules and/or regulations.

Students denied placement by a clinical facility/agency will receive an Adverse Action notification letter from the Director of the Nursing Program. Pursuant to the College's arrangement with the clinical facility/agency, students denied placement based on information in their background check/drug screen may request a written decision from the clinical facility/agency and have an opportunity to respond in accordance with the clinical facility/agency's internal review process. Students appealing a clinical facility/agency decision are required to email the nursing office. Under Section 612 of the Fair Credit Reporting Act and California law, students also have the right to obtain a free copy of the report if they submit a written request to the clinical facility/agency no later than 60 days after receiving the Adverse Action notification letter. Under Section 611 of that Act, and under California law, students also have the right to dispute with the vendor (consumer reporting agency) the accuracy or completeness of any information in the report.

Students denied placement at a clinical facility/agency may also seek placement at an alternative clinical facility/agency, if any are available for the specific clinical course(s). Students seeking placement at an alternative facility/agency are required to email the nursing office. The Director of the Nursing Program may inform the substitute clinical facility/agency generally of the prior denial of clinical placement and the student will be responsible for conveying specific information to the alternate clinical facility/agency for consideration and approval of placement by that facility/agency. In attempting to find alternate placement, the Director will inform the alternate agency of the reason for the substitution.

Students unable to obtain placement at a substitute clinical facility/agency will not be able to complete required clinical courses and may be dropped from the Nursing Program.

ADDITIONAL REQUIRED BACKGROUND CLEARANCES

The following two clearances are required each semester within 90 days prior to clinical placement. These clearances are in addition to the background check done upon admission to the Health Professions program. There is no cost involved to obtain these clearances. OIG (Office of Inspector General) SAM (System for Award Management)

POLICY: Physical Functional Abilities
 SECTION: Program Administration
 APPROVAL DATE: Previously Approved. Reviewed 3/2019, revised 9/2022.
 REVIEWED: Every 3 years

Nursing is a profession requiring extensive physical abilities applied in providing safe patient care. Adherence to safety practices in nursing is a phenomenon of scholarly inquiry that is ongoing (Vaismoradi, Tella, Logan, Khakurel, & Vizcaya-Moreno, 2020). Per guidelines from the National Council of the State Boards of Nursing (NCSBN) set forth in a dated article by (Yocom, 1996) and as numbered below. Evidence based practice has upheld these standards with the added updates to these guidelines involving the importance of accommodations for disability as an element of diversity (McKee, Gay, Ailey, & Meeks, 2020). Students obtain the accommodations form from the Academic Accommodations Center on campus, as delineated in the Nursing Student Handbook. FERPA guidelines are strictly adhered to in regard to accommodations, as described in the Student Records of this Policy Handbook. Deficits in functional ability can preclude a person from being able to perform all of the duties an RN student must carry out as they can result in negative consequences for patients. Applicants seeking admission who have questions about the functional abilities are referred to the nursing program director. Equal educational opportunity with reasonable accommodation will be provided for students with disabilities, as called for by Meeks, Stergiopoulos, Petersen (2022) within the parameters of adhering to the standards of nursing practice for all students. Withdrawal from the program will be required if a student is unable to maintain functional abilities with reasonable accommodation. The first 6 items listed here involve cognitive and social skills which are factors in providing safe care.

1. Communication must be accurate, clear, professional, collegial and include effective verbal proficiency.

2. Cognitive ability to collect, analyze, and integrate information and knowledge to make clinical judgments and management decisions.

3. Critical thinking ability for effective clinical reasoning and judgment. Examples: Analytical thinking reasoning skills sufficient to perform deductive and inductive thinking, apply knowledge from one situation to another, process information, problem solve, evaluate outcomes, prioritize tasks, manage time, use short- and long-term memory, identify cause/effect relationships, develop care plans, evaluate effectiveness of interventions, gather information, organize and complete tasks.

4. Interpersonal skills to establish and maintain rapport sufficient for professional interactions and relationships with a diverse population of individuals, families and groups respecting social, cultural and spiritual diversity. Examples: Capacity to recognize conflict, resolve conflict, peer accountability to ensure safe handoff communication, understand the concept of "Chain of Command" (e.g. recognizing immediate supervisor as the person to report to).

5. Reading and English abilities include reading comprehension, making inferences, drawing conclusions. Need skills of punctuation, grammar, sentence structure, contextual word recognition and spelling. Examples: Reading written documents/digital displays and use of anatomical designs/diagrams.

6. Mathematical and scientific abilities includes reading and understanding columns of writing, reading graphic printouts and digital displays, calibrating equipment, converting numbers to and/or from the Metric System, measuring time, counting rates, using measuring tools, reading measurement marks, computing ratios, fractions, percentages and decimals, adding, subtracting, multiplying, dividing, algebraic application and data interpretation; and using a calculator.

Physical Functional Abilities to be Verified by Healthcare Provider

The student's healthcare provider must verify the student's functional ability in all of the following areas, as numbered below (Yocom, 1996, McKee, et al., 2020). This healthcare provider verification shall be on the "Registered Nursing Program Physical and Mental Health Clearance Form" attached hereto as Appendix B.

Any student who has acquired a new medical condition which may affect functional ability is required to make an appointment with the healthcare provider immediately upon the change in condition (if during the semester) or before the beginning of the next semester (if between semesters) to obtain a note stating that she/he is medically cleared to participate in clinical without restriction. This clearance must be submitted to the MSHP office before the student will be allowed to participate in clinical. The absence policy applies to any missed clinical days.

The practice of nursing also requires the following functional abilities:

1. Visual acuity, with or without corrective lenses, sufficient for accurate observation and performance of nursing care. This includes: Collecting data from recording equipment and measurement devices, detecting a fire, drawing up medication into a syringe, see objects from 1 to 20 ft. away, using depth perception, using peripheral vision, and distinguishing colors and intensity.

2. Hearing ability, with or without assistive devices, sufficient for physical monitoring and assessment of patients and their environments. Examples: Hearing normal speaking level sounds, faint voices, faint body sounds (e.g. using medical equipment to hear heart & lung sounds), hearing in situations when unable to see lips (e.g. if using mask over

mouth/someone's voice on the phone), and hearing alarms (e.g. high/low frequency/overhead paging system/fire alarm).

3. Olfactory ability sufficient to assess significant environmental and patient odors such as foul or unusual odors of bodily fluids or spoiled foods, smoke, gases and noxious smells.

4. Tactile ability sufficient for physical monitoring and assessment of health care needs. Examples of relevant activities include detection of: unsafe temperature levels in heatproducing devices used in patient care, anatomical abnormalities, vibrations (e.g. pulses), temperature of room, skin, etc., differences in surface characteristics (e.g. skin texture), and differences in sizes, shapes (e.g. identify body landmarks)

5. Strength and mobility sufficient to perform patient care activities and emergency procedures. Examples: Safely transfer patients in and out of bed, turn and position patients, hang intravenous bags, accurately read the volumes in body fluid collection devices hung below bed level, perform cardiopulmonary resuscitation. Must have ability to lift up to 35 pounds unaided (NIOSH, 2009).

6. Fine motor skills sufficient to perform psychomotor skills integral to patient care such as grasping small objects with hands, keying/typing, pinching, picking, twisting, and squeezing with fingers. Examples: Safely dispose of needles, accurately place and maintain position of stethoscope, manipulate small equipment and containers, such as syringes, vials, ampules, and medication packages.

7. Physical endurance and stamina sufficient to complete assigned periods of clinical practice activities for entire length of work role, such as standing during surgical or therapeutic procedures or performing CPR.

8. Emotional stability for accountability of actions to function effectively under stress, to adapt to changing situations/environment, remaining calm and able to follow through. This includes establishing therapeutic boundaries, dealing with the unexpected, focusing/maintaining attention on a task, performing multiple responsibilities concurrently, and handling strong emotions (e.g. grief, anger).

9. Gross Motor Skills involve broad requirements elaborated in the following. • Sitting-occasional: While charting, talking on the phone, etc. • Standing and walking-continuous: During all phases of patient care within the unit and throughout the hospital. This includes maintaining balance and moving within confined spaces. • Lifting-frequent: From side to side, up in bed, transferring from bed to chair, from bed to gurney, etc. Weight lifted usually ranges from patients weighing 100 to 250 pounds, rarely 250 to 500 pounds (with help). • Pushing/Pulling-frequent: pushing beds, gurneys and wheelchairs. Positioning patients in bed or during transfer to and from gurneys, wheelchairs and commodes. Up to 70 pounds effort. • Crouching/Stooping (bending at knees and waist)-frequent: Emptying catheter drainage bags, checking chest tube containers, positioning wheelchair foot supports; during bathing, feeding, dressing changes, catheterizations, and similar procedures. • Twisting/Reaching-frequent: Above shoulders and below waist. • Kneeling- occasional: Transferring patients, performing CPR. • Handling/grasping, Operation of equipment, -frequent: Preparing and administering medications, performing dressing changes and similar procedures, manipulating oxygen equipment, obtaining supplies, using computer mouse, etc. Setting up and monitoring IV

equipment such as infusion pumps (40 pounds effort). Cardiovascular hemodynamic equipment (40 pounds effort), suction equipment (30 pounds effort), and various other items ranging from 2 to 40 pounds effort. Squeezing with hands to operate a fire extinguisher.

By signing the "Nursing Student Handbook Acknowledgment and Consent" form attached hereto as Appendix A, I certify that I have read, and understand, the above "Functional Abilities" requirements, and further understand that each of these competencies is required for entry into the nursing program at College of the Canyons. Any change in my health status that affects my functional competencies require that I meet with the Nursing Program Director, and resubmit updated current health clearance forms on the form contained in Appendix B.

McKee, M. M., Gay, S., Ailey, S., & Meeks, L. M. (2020). Technical standards. In *Disability as Diversity* (pp. 191-212). Springer, Cham.

Meeks, L. M., Stergiopoulos, E., & Petersen, K. H. (2022). Institutional accountability for students with disabilities: a call for liaison committee on medical education action. *Academic Medicine*, 97(3), 341-345.

Vaismoradi, M., Tella, S., A. Logan, P., Khakurel, J., & Vizcaya-Moreno, F. (2020). Nurses' adherence to patient safety principles: A systematic review. *International Journal of Environmental Research and Public Health*, *17*(6), 2028.

Yocom, C. J. (1996). *Validation study: Functional abilities essential for nursing practice*. National Council of State Boards of Nursing.

POLICY: Challenge Policy/Credit by Exam / Credit for Prior Learning (CPL) 2021
 SECTION: Program Administration
 APPROVAL DATE: Previously Approved, reviewed 3/2019, revised 4/2019, revised Winter 2020/2021, reviewed 08/22
 REVIEWED: Every 3 years

Effective Winter 2020/2021 Credit for Prior Learning (Replaces Credit by Examination) No Nursing Courses have been deemed appropriate for CPL

Credit for prior learning is a method of assessing the entirety of a particular course as defined by its course outline of record. Credit for Prior Learning (CPL) may be awarded for prior experience or prior learning only for individually identified courses with subject matter similar to that of the individual's prior learning, and only for a course listed in the catalog of the community college. District faculty may choose an assessment(s) from the list outlined below.

• Standard satisfactory score on Advanced Placement (AP) Examination administered by the College Entrance Examination Board.

- Standard satisfactory score on College Level Examination Program (CLEP).
- Standard satisfactory score on International Baccalaureate (IB) program.
- Evaluation of Joint Services Transcripts.
- Evaluation of student-created portfolios.
- Evaluation of industry-recognized documentation.
- Other standardized exams.

• Satisfactory completion of approved noncredit course(s) with an equated credit course(s). The final grade of the noncredit course(s) may be used as the Credit for Prior Learning grade for the credit course(s).

• Credit by satisfactory completion of an examination or assessment administered by the College faculty in lieu of completing a course listed in the college catalog.

• The faculty may accept an examination or assessment conducted by an institution other than College of the Canyons for purpose of assessment of prior learning.

To be eligible, students must:

• Be registered at the college in at least one unit or noncredit course.

- Be in good standing or have no standing.
- Request CPL for a course listed in the District's current course catalog.

• Have satisfied the prerequisites and other enrollment requirements for the particular course for which CPL is requested.

- Have paid CPL fees prior to completing the assessment. Fees are non-refundable.
- Not be currently enrolled in the course for which they request CPL.
- Not have requested CPL for the same course previously at the District (although the individual may enroll in the course in a future term for credit if the CPL assessment produced a substandard grade of D, F, or NP.).

Units earned by CPL:

• Shall not be considered units completed in residence towards a certificate or degree.

• Shall not be used for enrollment verification or reports to insurance companies or other similar agencies.

• May count toward major or general education coursework for the associate degree or certificate or as elective units.

• Are inapplicable toward satisfaction of such unit load requirements as Selective Service deferment, Veteran's or Social Security benefits and/or Financial Aid.

• Shall be clearly annotated on the student's academic record to reflect that they was earned as CPL. For more information on how to process a credit for prior learning, including what courses are approved for credit for prior learning, please visit www.canyons.edu/admissions. To request a Credit for Prior Learning, please contact the Admissions and Records office. For full information regard CPL, see Board Policy and Administrative Procedure 4235. ARCHITECTURAL

DRAFTING

ARCHT 114 ARCHITECTURE AND INTERIORS HISTORY: ANTIQUITY - CLASSICAL REVIVAL Units: 3.00 CSU 54.00 hours lecture

Explores the history of building styles in architecture, and the decorative arts in interior design from Antiquity to Classical Revival. Emphasis is placed on style development as it relates to social, economic, and political influences. Field trips may be required. Same as ID-114. ARCHT 115 ARCHITECTURE AND INTERIORS HISTORY: CLASSICAL REVIVAL - POST MODERN Units: 3.00 CSU 54.00 hours lecture Traces the development of styles in the decorative arts, architecture, and interior furnishings in the period from Classical Revival to Post Modern. Emphasizes style

development as it relates to social, economic and political

Courses approved for CPL: 2021 - 2022 Academic Year

- Art: ART 125A and ART 140
- Architecture: all classes
- Culinary Arts: CULARTS 050 and 055
- Engineering: ENGR 110 and 114
- Hotel & Restaurant Management: HRMGT 150, 210, 220, 235, and 245
- Interior Design: all classes
- Land Surveying: all classes
- Modern Languages: all courses in all language programs
- Sign Language: SIGN 101, 102 and 103
- Water Systems Technology: all classes

Prior Challenge by Examination Policy

The challenge procedure will follow the College of the Canyons credit by exam procedure outlined in the catalogue on page 1 of this policy. Next the procedure will follow the specific requirements for the nursing program regarding lecture and lab/clinical examinations outlined on the remaining pages of this policy.

College of the Canyons Catalogue

CREDIT BY EXAMINATION

Credit by examination may be granted for proficiency previously accomplished in other than an accredited institution; for study; travel; or other experiences in College of the Canyons Approved courses.

Credit attempted by this method shall be so marked on the student's permanent record on an A - F grading system.

Units and grade points earned shall be counted toward the associate degree.

Units earned by credit by examination are not considered as units completed in residence and will not be used for reports to insurance companies or other similar agencies.

Students must obtain permission from the division dean or department chair from which the course is offered and obtain approval from a counselor.

A \$29/unit fee must be paid prior to taking the exam.

Department chairs (or division chairs) will forward the results of the examination to the Admissions and Records Office for processing and recording.

Requirements for Credit by Examination

1. Students wishing to receive credit by examination must be in good academic standing at College of the Canyons and be currently enrolled in a minimum of six units.

2. Petitions for credit by examination in Approved courses must be submitted by the eighth week of the semester. Grades for courses taken through credit by examination are due in the Admissions and Records Office by the last day of finals for the semester or term.

3. Courses taken through credit by examination are subject to A - F grading. Incomplete, withdrawals, or no-credit grades are not allowed.

4. Unit credit may not be granted after credit has been earned for a more advanced College of the Canyons course. Additionally, unit credit may not be granted for prerequisites once the more advanced course has been completed.

5. A second examination may not be attempted for the same course, but the course may be taken for credit following regular enrollment procedures.

6. The student must be eligible to take the particular course for credit in terms of any prerequisites and other enrollment requirements.

7. A maximum of 18 units may be taken through credit by examination.

8. Resident, non-resident and international students will all be charged at the same rate of \$29/unit through credit by examination

9. Credit by examination fees must be paid prior to taking the exam. Fees are non-refundable.

Nursing Requirements for Credit by Examination

General Information

Lecture and lab/clinical components must be passed to receive the units for the course. Partial credit will not be awarded.

Students must be eligible to take the particular course for credit in terms of any prerequisites and other enrollment requirements. (For example, enrollment requirements include passing the dosage and calculation test for the semester.)

Students must follow the college procedure for credit by examination (i.e. petitions for credit by exam and payment and meeting the college deadlines). Contact Admission and Records regarding questions related to this.

Students will receive the published unit credit for the course they challenge and cannot exceed the credit by examination limit outlined in the catalogue.

Process and Timeline of the Credit by Exam for Nursing

In this situation, credit by examination is granted for proficiency previously accomplished by the student's experience that may be deemed comparable to for example; Intermediate Medical Surgical Nursing, Nursing 234.

LVNs qualifying credit by exam are required to complete N109, regardless of program placement.

Preparation

Prior to or during the student is in second semester, the student may study for the challenge exam and prepare for the lab/clinical evaluation component.

Refer to the syllabi for lecture content and lab/clinical expectations. The student must request the syllabus from the instructor.

Self-evaluation:

Examine the theory content, review the textbook, determine gaps in knowledge, and develop a plan to master material.

Review required psychomotor skills and determine a plan to develop competency.

The lab is available for the student to practice procedures that the student feels he/she personally needs further practice to be able to pass the lab/clinical component. This is during the spring or fall semesters only.

Students may attend scheduled labs for the course to practice by arrangement with the full-time lab coordinator if a currently enrolled student.

Components of the Credit by Examination

Lecture Evaluation Component

Students will take a comprehensive challenge exam for the course.

This will be a 2-3 hour exam to be taken in the TLC.

The exam may consist of, but is not limited to multiple choice, fill in, essay, short answer, diagrams, calculations, and multiple answer questions.

Lab and Clinical Evaluation Component

Skills Lab Practicum Component

After passing the challenge exam for the lecture component, students must complete and pass the required lab practice and practicums for the course.

The series of practicums are determined by the expected psychomotor skills for the semester that are learned in the semester and skills that are required as competencies for that course.

The student will not be allowed to ask questions that pertain to information the student must already know to perform or receive any input or feedback from the instructors during the lab practicums.

Clinical Experience Evaluation Component

After passing the lab practicum component of the course, students must complete and pass the clinical experience evaluation.

Clinical evaluation consists of a 12-hour day with 3 full time faculty members who will be evaluating each student's performance in the hospital. Each faculty will spend 4 hours with each student. For example: Nursing 234 will consist of completing total patient care for 3 patients. Patients will be chosen for the students by the faculty. The patients chosen will be consistent with the required content of respiratory, cardiac, and neurological. The selected patients will have medications and procedures that would allow the student to demonstrate his/her ability to care for patients at the intermediate medical-surgical level.

The clinical evaluation will include the required paperwork for the course that will be turned in for grading. Examples include focus of care forms for each patient cared for in N234 and a Clinical Experience paper. The clinical paperwork must be turned in on the day of the clinical evaluation for N234. The Clinical Experience paper for N234 will be turned in by a specified deadline.

The student must be able to perform at the expected level for a student at the completion of the course that they are challenging.

The student will not be allowed to ask questions that pertain to information the student must already know to perform in clinical or receive any input or feedback from the instructors during the clinical evaluations.

The clinical evaluation tool will be used for evaluating the student during the clinical evaluation. A panel comprised of the full time faculty who were present during the clinical evaluation will review the evaluation tool and required paperwork. The panel will determine if the student demonstrated a passing level of clinical competency based on a clinical evaluation tool.

Due to the time constraints in this process, the clinical evaluation cannot be rescheduled due to illness.

POLICY: Paramedic to RN Option – Sunsetted (grant funded pathway – no longer offered)
 SECTION: Program Administration
 APPROVAL DATE: Previously Approved, Reviewed 3/2019
 REVIEWED: Sunsetted

The Paramedic to RN challenge procedure will follow the College of the Canyons credit by exam procedure outlined in the college catalogue on page 1 of this policy. Next the procedure will follow the specific requirements for the nursing program regarding lecture and lab/clinical examinations outlined on the remaining pages of this policy.

College of the Canyons Policy

CREDIT BY EXAMINATION

- Credit by examination may be granted for proficiency previously accomplished in other than an accredited institution; for study; travel; or other experiences in College of the Canyons Approved courses.
- Credit attempted by this method shall be so marked on the student's permanent record on an A F grading system.
- Units and grade points earned shall be counted toward the associate degree.
- Units earned by credit by examination are not considered as units completed in residence and will not be used for reports to insurance companies or other similar agencies.
- Students must obtain permission from the division dean or department chair from which the course is offered and obtain approval from a counselor.
- A \$29/unit fee must be paid prior to taking the exam.
- Department chairs (or division chairs) will forward the results of the examination to the Admissions and Records Office for processing and recording.

Requirements for Credit by Examination

1. Students wishing to receive credit by examination must be in good academic standing at College of the Canyons and be currently enrolled in a minimum of six units.

2. Petitions for credit by examination in Approved courses must be submitted by the eighth week of the semester. Grades for courses taken through credit by examination are due in the Admissions and Records Office by the last day of finals for the semester or term.

3. Courses taken through credit by examination are subject to A - F grading. Incomplete, withdrawals, or no-credit grades are not allowed.

4. Unit credit may not be granted after credit has been earned for a more advanced College of the Canyons course. Additionally, unit credit may not be granted for prerequisites once the more advanced course has been completed.

5. A second examination may not be attempted for the same course, but the course may be taken for credit following regular enrollment procedures.

6. The student must be eligible to take the particular course for credit in terms of any prerequisites and other enrollment requirements.

7. A maximum of 18 units may be taken through credit by examination.

8. Resident, non-resident and international students will all be charged at the same rate of \$29/unit through credit by examination

9. Credit by examination fees must be paid prior to taking the exam. Fees are non-refundable.

Nursing Requirements for Credit by Examination

General Information

- Lecture and lab/clinical components must be passed to receive the units for the course. Partial credit will not be awarded.
- Students must be eligible to take the particular course for credit in terms of any prerequisites and other enrollment requirements. (For example, enrollment requirements include passing the dosage and calculation test for the subsequent semester.)
- Students must follow the college procedure for credit by examination (i.e. petitions for credit by exam and payment and meeting the college deadlines). Contact Admission and Records regarding questions related to this.
- Students will receive the published unit credit for the course they challenge and cannot exceed the credit by examination limit outlined in the catalogue.

Process and Timeline of the Credit by Exam for Nursing

In this situation, credit by examination is granted for proficiency previously accomplished by the student's experience as a paramedic that may be deemed comparable to intermediate, Nursing 234. Nursing 234 is 5.5 Units, which is under the limit of 18 units outlined in the catalogue.

Preparation

- Prior to or during the student is in second semester, the student may study for Nursing 234 challenge exam and prepare for the lab/clinical evaluation component.
- Refer to the syllabi for lecture content and lab/clinical expectations. The student must request the syllabus from the instructor.
- Self-evaluation:
 - Examine the theory content, review the textbook, determine gaps in knowledge, and develop a plan to master material.
 - Review required psychomotor skills and determine a plan to develop competency.
- The lab is available for the student to practice procedures that the student feels he/she personally needs further practice to be able to pass the lab/clinical component. This is during the spring or fall semesters only.
- Students may attend scheduled labs for N234 to practice by arrangement with the full time lab coordinator.

College Procedure

Nursing 234 Challenge

- Student must complete Nursing 124 and 126 to be qualified to take the credit by examination for Nursing 234.
- Petition for credit by exam for Nursing 234 must be submitted by the 8th week of the semester.
- Students will take the challenge exam after they receive their passing grade in Nursing 124 or 126 in the second half of the semester. A schedule will be determined for each component of the credit by exam for N234 to occur after the student passes Nursing 124 or 126.

Process

- Students who pass the entire credit by exam process for N234, will only take N236 in that semester. Students then can study for N240 and once they complete N236 will be qualified to take the credit by exam for N240.
- Students, who do not pass N234 challenge exam and/or the lab /clinical evaluation portion of the credit by examination, will take N234 in the semester with N236.

Components of the Credit by Examination

Lecture Evaluation Component

- Students will take a comprehensive challenge exam for the course (Nursing 234).
- This will be a 2-3 hour exam to be taken in the TLC.
- The exam may consist of, but is not limited to multiple choice, fill in, essay, short answer, diagrams, calculations, and multiple answer questions.

Lab and Clinical Evaluation Component

Skills Lab Practicum Component

- After passing the challenge exam for the lecture component, students must complete and pass the required lab practice and practicums for the course.
- The series of practicums are determined by the expected psychomotor skills for the semester that are learned in the semester and skills that are required as competencies for that course.
- Nursing 234 will consist of IV insertion, trach suctioning and care, central line care, TPN, and IM.
- The student will not be allowed to ask questions that pertain to information the student must already know to perform or receive any input or feedback from the instructors during the lab practicums.

Clinical Experience Evaluation Component

• After passing the lab practicum component of the course, students must complete and pass the clinical experience evaluation.

Clinical evaluation consists of a 12 hour day with 3 full time faculty members who will be evaluating each student's performance in the hospital. Each faculty will spend 4 hours with each student.

- Nursing 234 will consist of completing total patient care for 3 patients. For this evaluation, the student must go to the hospital the night before to prepare for the next day. Patients will be chosen for the students by the faculty. The patients chosen will be consistent with the required content of respiratory, cardiac, and neurological. The selected patients will have medications and procedures that would allow the student to demonstrate his/her ability to care for patients at the intermediate medical-surgical level.
- The clinical evaluation will include the required paperwork for the course that will be turned in for grading. Examples include a case study and focus of care forms for N234.
 - The preparation paperwork must be turned in on the day of the clinical evaluation for N234.
 - The case study for N234 will be turned in by a specified deadline.
- The student must be able to perform at the expected level for a student at the completion of the course that they are challenging.
- The student will not be allowed to ask questions that pertain to information the student must already know to perform in clinical or receive any input or feedback from the instructors during the clinical evaluations.
- The clinical evaluation tool will be used for evaluating the student during the clinical evaluation.
- A panel comprised of the full time faculty who were present during the clinical evaluation will review the evaluation tool and required paperwork. The panel will determine if the student demonstrated a passing level of clinical competency based on a clinical evaluation tool.
- Due to the time constraints in this process, the clinical evaluation cannot be rescheduled due to illness.

POLICY: Grievance Policy
SECTION: Program Administration
APPROVAL DATE: Previously Approved, Reviewed 3/2019, reviewed 8/2022
REVIEWED: Every 3 years
A student having a grievance with a faculty member will be initially required to consult with that faculty member to resolve the issue. If resolution is unsuccessful, arrangements should be made to meet with the Assistant Director or the Director of the Nursing Program.

If further guidance is needed, the following is the College of the Canyon's "Student Grievance Policy" (available in the catalogue under "Regulations and Policies"), BP 5532 General Student Grievances, posted in the 2022/2023 COC Catalog.

BP 5532 General Student Grievances

Introduction:

The purpose of this policy is to provide a prompt and equitable means for resolving student(s) grievances. In the pursuit of academic goals, the student should be free of unfair or improper action by any member of the academic community. The grievance procedure may be initiated by one or more students who reasonably believe he/she/they have been subject to unjust action or denied rights involving their status or privileges as students. It is the responsibility of the student(s) to submit proof of alleged unfair or improper action.

Grievances pertaining to grades may be addressed through the procedures contained in Board Policy 5533, Student Grades or Grading Review Policy.

- I. Definitions:
 - A. Grievant –For the purpose of this policy, at the time the alleged circumstance(s) giving rise to a grievance has occurred, a grievant is defined as a student who:
 - 1. has submitted an application to the College for the current or upcoming terms, or;
 - is enrolled in, or registered with an academic program of the College, including classes for credit, noncredit classes, fee-based training classes, and programs including, but not limited to the Employee Training Institute, Community Education, and free workshops where teaching or training occurs, or;
 - 3. has met the conditions above in the immediately preceding semester or intersession.

- 4. Grievances by applicants (non-students as described above) shall be limited to a complaint regarding denial of admission.
- B. Days shall mean normal business days and shall not include Saturdays, Sundays, or administrative holidays.
- C. Respondent Any person claimed by a grievant to be responsible for the alleged grievance.
- D. Grievance Officer For the purposes of this policy the Chief Student Services Officer, (CSSO) or designee shall serve as grievance officers.
- E. Standard of Evidence Should a grievance involve a formal hearing the standard of proof in effect will be that of a "preponderance of evidence." Evidence may be received of the sort upon which responsible persons are accustomed to rely in the conduct of serious affairs, and is not restricted to evidence admissible under the strict rules of evidence of a court of law.

- F. Burden of Proof It is the responsibility of the grievant(s) to submit proof of alleged unfair or improper action.
- II. This Policy Does Not Apply to the Following:
 - A. Challenge process for prerequisites, co-requisites, advisories and limitations on enrollment. (Information on challenges to prerequisites is available from the Office of Admissions & Records).
 - B. Grievances pertaining to grades. (See Board Policy 5533, Student Grades or Grading Review Policy).
 - C. Alleged violations of sexual harassment, sexual assault, actions dealing with alleged discrimination on the basis of ethnic group identification, religion, age, sex, color, sexual orientation (Refer to Human Resources policy BP 3430, Prohibition of Harassment, and Administrative Procedure 3435, Discrimination and Harassment Investigations).
 - D. An appeal for residency determination. (File residency determinations with the Office of Admissions & Records.)
 - E. Eligibility, disqualification or reinstatement of financial aid. (Refer to the Financial Aid Office.)
 - F. Student Discipline (Actions pertaining to student discipline are handled through the Office of the Dean of Student Services.) (See Board Policies 5529, 2230, 5531).
 - G. Parking Citations (or other infractions) (Citation appeals are handled by the Office of Campus Safety).
 - H. Freedom of the Press, Student Rights to Expressive Activities (Actions pertaining to freedom, of speech or freedom of expression may be referred to the Campus Life and Student Engagement.
 - I. Employee Discipline (Students may file complaints about employee conduct with the appropriate level department chairperson and/or administrator).
 - J. Challenges of established District policies, e.g. Board Policies and Administrative Procedures. (Challenges to polices, administrative procedures, or practices may be referred to the appropriate level department and/or administrator).
 - K. Financial claims against the District. (Financial claims against the District may be made through the Office of Risk Management).
- III. Statute Limits:

- A. The statute of limitations period for requesting a grievance hearing under this policy is one hundred twenty (120) days after the occurrence of the incident giving rise to the grievance; or one hundred twenty (120) days after the student learns, or should have learned, that the student has a basis for filing a grievance. (For definition of "days" see, 5532.I.B, above).
- B. Pursuing an informal remedy for a grievance does not relieve the grievant of the responsibility of requesting a grievance hearing within one hundred twenty (120) days of the incident giving rise to the grievance.
- C. Appeal of the time limits must be made to the grievance officer, and shall be based upon documented extenuating circumstances. (Documentation of extenuating circumstances may include, but are not limited to, verifiable medical records, accident reports, court records, military records, and letters from lawyers, doctors, employers, etc. To clarify that which constitutes a documented extenuating circumstance, contact the designated grievance officer.
- IV. Informal Resolution
 - A. Each grievant shall make a reasonable effort to resolve the matter on an informal basis prior to requesting a grievance hearing, and shall attempt to solve the problem with the person(s) with whom the grievant has the grievance, or that person's immediate supervisor if there is no reasonable opportunity to solve the problem with the individual(s) directly involved.
 - Specifically, the grievant(s) should, if appropriate, schedule a meeting about the issue(s) with the person with whom the grievant(s) has the grievance, and if necessary, schedule a meeting with the person's immediate supervisor and/or schedule a meeting with the appropriate college administrator. An "informal" discussion (for example, after class, or a chance meeting regarding the issue), does not constitute completion of III.A of the informal process.
 - 2. If the matter is not resolved at III.A above, the grievant will contact the college grievance officer for assistance. (See I.D, above). The grievant shall provide the grievance officer with a written statement of grievance on the Statement of Grievance form provided to the grievant, and attached to this policy as Form #1, and the grievant may provide any other information and documentation in support of the grievance. The statement of grievance form shall specify the time, place, nature of the complaint, and the remedy or corrective action requested. If a grievant believes that a specific District policy has been violated, the grievant should specify the policy or policies alleged to have been violated, to the best of his or her knowledge. The grievance officer shall inform the grievant of their rights and responsibilities under this policy.
 - 3. The grievance officer will provide a copy of the statement of grievance to the

respondent within ten (10) days of receipt of the grievance, or as soon thereafter as practicable. (In accordance with I.B, above).

- 4. The grievance officer shall gather, copy and review pertinent information, records and documentation and communicate with all parties, and attempt to mediate an informal resolution.
- v. Formal Resolution
 - A. If there is no informal resolution of the grievance, the grievant has a right to request a grievance hearing through the Chief Student Services Officer (CSSO), or designee, and by employing the use of the Request for Formal Grievance Hearing form attached to this policy as Form #2. This request must occur no later than one- hundred twenty (120) days after the alleged incident. The grievant may request that any relevant information and documentation be made available at a hearing. The information requested will be provided in such a way that it does not violate the privacy rights of others. The formal grievance hearing request must be made within one hundred and twenty (120) days of the date of the alleged incident that is the basis of the grievant's complaint.
- vi. Meeting of the Grievance Hearing Committee
 - A. Within fifteen (15) days following receipt of the request for a grievance hearing, or as soon thereafter as practicable, a Grievance Hearing Committee shall meet to select a chairperson and decide if a grievance hearing will be held. The committee shall consider whether the grievant has met the following requirements:
 - 1. The request contains allegations, which, if true, would constitute a grievance under this policy;
 - 2. The grievant meets the definition of a grievant as defined by this policy (See I.A.1- 4, above).;
 - 3. The grievant has met the requirements of the grievance policy with respect to timeliness;
 - 4. The grievant has attempted to solve the matter informally;
 - 5. The grievant(s) is personally and directly affected by the alleged grievance;
 - 6. The remedy requested by the grievant is appropriate for the act that is alleged and is not frivolous; clearly without foundation, or clearly filed for the purposes of harassment.
 - 7. The grievant has cooperated in the processing of the grievance.

- B. If the above conditions are satisfied, and within five (5) days of the meeting, the Grievance Hearing Committee Chairperson shall notify the grievance officer in writing, that a grievance hearing will be held. At this time, the Grievance Hearing Committee may request the production of documents, records, and information requested by the grievant and by the respondent.
- C. If the grievance does not meet each of the requirements, the hearing committee chair shall notify the grievant in writing of the rejection of the request for a grievance hearing, together with the specific reasons for the rejection and the procedures for appeal. This notice will be provided within five (5) days of the date the decision is made by the grievance hearing committee. The grievant may appeal this decision per V. A of this policy.
- VII. Composition of the Grievance Hearing Committee:
 - A. The Grievance Hearing Committee shall be made up of five members of the campus community. Two members shall be faculty members appointed by the Academic Senate President. Two members shall be students appointed by the Associated Student Government President. One member shall be a classified staff member appointed by the person with the authority to appoint Classified Staff to committees. One of the faculty members shall serve as chair. Alternates will be appointed as necessary. Three members of the above committee shall constitute a quorum. All members are entitled to vote on matters related to the grievance.
 - B. No person shall serve as a member of the hearing committee if that person has been personally involved in any matter giving rise to the grievance, has made any public statement on the matters at issue, or could otherwise not act in a fair manner. The grievant(s) or respondent(s) may challenge for cause any member of the hearing committee prior to the beginning of the hearing by addressing a challenge, in writing, to the CEO or designee who shall determine whether cause for disqualification has been shown. If the CEO or designee feels that sufficient grounds for removal of a member of the grievance committee has been presented, the CEO or designee shall remove the challenged member or members and ask that the appropriate person name a replacement.
- VIII. Formal Hearing Procedure
 - A. The grievance officer will ensure that relevant information and documentation is made available at the hearing. Information requested will be provided in such a way that it does not violate the privacy rights of others.
 - B. The decision of the grievance hearing committee chair shall be final on all matters relating to the conduct of the hearing unless there is a vote of a majority of the other members of the panel to the contrary.
 - C. The grievant may obtain the assistance or advice of a person of his or her choice, including legal counsel (at his or her own expense), except the grievant may not be represented by legal counsel.

- D. The respondent may represent himself or herself; or the respondent may obtain the assistance or advice of a person of his or her choice, (at his or her own expense) including legal counsel, except the respondent may not be represented by legal counsel.
- E. Each party to the grievance may call witnesses and introduce oral and written testimony relevant to the issues of the matter.
- F. Formal rules of evidence shall not apply. Any relevant evidence shall be admitted.
- G. Unless the grievance hearing committee determines to proceed otherwise, each party to the grievance shall be permitted to make an opening statement. Thereafter, the grievant(s) shall make the first presentation, followed by the respondent(s). The grievant(s) may present rebuttal evidence after the respondent(s)' evidence. The burden shall be on the grievant(s) to prove with a preponderance of the evidence that the facts alleged are true and that a grievance has been established as specified IV.B.1.a-g above.
- H. Hearings shall be closed and confidential unless all parties request that it be open to the public. Any such request must be made no less than ten (10) days prior to the date of the hearing.
- I. In a closed hearing, witnesses shall not be present at the hearing when not testifying, unless all parties and the committee agree to the contrary.
- J. The hearing shall be recorded by the grievance officer either by tape recording or digital recording, and shall be the only recording made. No witness who refuses to be recorded may be permitted to give testimony. In the event the recording is by tape or digital recording, the hearing committee chair shall, at the beginning of the hearing, ask each person present to identify themselves by name, and thereafter shall ask witnesses to identify themselves by name. The tape or digital recording shall remain in the custody of the District, at all times, unless released to a professional transcribing service. Any party may request a copy of the recording.
- K. When the presentation of evidence is concluded, the hearing committee's deliberations shall be confidential and closed to all parties. The hearing committee's deliberations shall not be recorded. Only those committee members present throughout the hearing may vote on the recommendations of the Grievance Hearing Committee.
- IX. Findings of the Grievance Hearing Committee
 - A. Within twenty (20) days following the close of the hearing, the grievance hearing committee shall prepare and send a written decision to the grievant(s), respondent, and grievance officer.
 - B. The decision shall include specific factual findings regarding the grievance, and shall include specific conclusions regarding whether a grievance has been established as defined in VI.A above.

- C. The decision shall also include a specific recommendation regarding the relief to be afforded the grievant, if any.
- D. The decision shall be based only on the record of the hearing, and not on matters outside of that record.
- E. The record will consist of the original grievance, any written response, and the oral and written evidence produced at the hearing.

x. Appeal

- F. Part 1
 - Any appeal relating to a grievance hearing committee decision that the statement of grievance does not present a grievance as defined in these procedures shall be made in writing to the CEO within ten (10) days of that decision.
 - 2. The CEO shall review the statement of grievance and request for grievance hearing in accordance with the requirements for a grievance provided in this policy, but shall not consider any other matters. The CEO's decision whether or not to grant a grievance hearing shall be final and not subject to further appeal.
 - 3. The decision on appeal shall be reached within five (5) days after receipt of the appeal documents. Copies of the CEO's appeal decision shall be sent to the grievant, respondent, and the grievance officer.
- G. Part 2
 - 1. Any appeal related to the findings of the grievance hearing committee following a formal hearing shall be made, in writing, to the CEO within ten (10) days of that decision.
 - 2. The CEO shall review the record of the hearing and the documents submitted in connection with the appeal, but shall not consider any matters outside of the record. Following the review of the record and appeal statements, the CEO shall make a written recommendation regarding the outcome of the appeal.
 - 3. The CEO may decide to sustain, reverse or modify the decision of the grievance hearing committee. The CEO's decision shall include a statement of reasons for the decision. The CEO's decision shall be final.
 - 4. The decision on appeal shall be reached within five days after receipt of the appeal documents. Copies of the CEO's appeal decision shall be sent to the grievant, respondent, and the grievance officer.

Board Approved:

4/30/2020 Next Review

Date: Spring, 2026

POLICY: Student Handbook Contract **SECTION:** Program Administration **APPROVAL DATE:** Fall 2011 updated Fall 2015, Reviewed 3/2019, revised 10/2021 **REVIEWED:** Every 3 years

Updates/Changes to the student handbook are reviewed verbally and posted on the skills lab Canvas site. Students acknowledge changes by signing a Student Handbook Contract with the following statement:

"I have received a copy of and agree to abide by the nursing program policy changes described in the Student Handbook. If I am a returning student, my signature verifies that in addition to the changes, I will abide by all handbook policies."

Revised 8/22: An updated Nursing Student Handbook is posted on the Nursing Department Website and the Nursing Newsroom Canvas site at the beginning of each semester. Changes are reviewed with students per above. Students sign an acknowledgement form each semester reflecting their understanding of changing program requirements. Documentation of acknowledgement is kept in the Health Professions and Public Safety (HPPS) office.

POLICY: Psych 101 Requirement Policy **SECTION:** Program Administration **APPROVAL DATE:** 12/9/2005, Reviewed 3/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

The Board of Registered Nursing (BRN) requires that Psychology 101 or equivalents must be completed prior to N 126 (Psych Mental Health Nursing).

POLICY: Registration Policy **SECTION:** Program Administration **APPROVAL DATE:** Previously Approved, Reviewed 3/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

Students must be registered for their courses by the deadline date set by the nursing department. Students will be notified of this date in writing. If a student does not register by this date, their seat will be given to an alternate student. College policy states that fees are due at the time of registration. If all fees are not paid, student will be removed from all courses.

POLICY: Noncredit Nursing Course Support **SECTION**: Program Administration **APPROVAL DATE**: 2016, Reviewed 3/2019, revised 8/2022 **REVIEWED**:: Every 3 years

In order to provide students with ancillary supplemental instruction related to the Nursing Program course work, students must enroll in NC.NURS-080 prior to the start of the regular semester. Because NC.NURS-080 is noncredit, there is no cost for enrolling.

Failure to enroll by established deadlines will result in a written Advisory.

Revision 8/2022: In order to support success during the COVID pandemic, **required** hours in NC-080 were added to Nursing courses. No fee is associated with this change.

POLICY: Program Progression
SECTION: Admission
APPROVAL DATE: Previously Approved, Reviewed 3/2019, revised 1/2020, reviewed 8/2022
REVIEWED: Every 3 years

This statement provides an explanation of the student's progression through the program for the generic RN, the LVN to RN, transfer, nurse with an international degree, or 30-unit option. The process for returning to the program after failure, withdrawal, or when the student drops out of the program is described.

Generic RN Program Progression

Complete Progression:

• Student begins in first semester and continues through the program until graduation in fourth semester and completes the program in 4 consecutive semesters to graduate.

Failure in Any Course:

- Students failing/withdrawing from a course must complete an individualized remediation plan by the established deadline. Upon completion of that plan, students must supply the HPPS office evidence of completion, including official transcripts, and/or documentation of any lab/clinical remediation. Students will be placed on the waiting list for the appropriate course once all remediation documentation has been received. Students will be re-admitted into the program on a space available basis.
- Students often ask:
 - If I finish by the end of one semester, will I be able to return in the next semester? Answer: No, that is not possible.

If I complete my remediation plan after the stated deadline, can I still return to the program? Answer: No. Students who fail to complete remediation plans by the deadline will not be able to return to the program.

LVN to RN student progression

Complete Progression

- Students begin the transition course as an LVN to RN student. Upon completion of the course, they are either placed in to an available spot in Psychiatric Nursing after those on the wait list or are placed on the wait list for Psychiatric Nursing behind others already on the list. The students are placed on the list based on their application date.
- Once they complete the transition course, they then complete Psychiatric Nursing, Intermediate Medical Surgical Nursing, and Advanced Medical Surgical Nursing to graduate.

Transition Course Failure

- Student fails, drops, or withdraws from the transition course. Students complete remediation and provides their official transcripts and if required their completion of the lab/clinical remediation to the office by their established deadline.
- Upon completion of the transition course, the student repeating the transition course will be placed on the list for Psychiatric Nursing after the students completing the transition course for the first time.

Failure in Another Course

• LVN to RN students failing, dropping, or withdrawing from any other course will follow the same procedure as a generic student failing a course.

Transfer Student Progression

Complete Progression

- Students begin the Transition course as a transfer student. Students are placed on the wait list for the specific semester/course they are transferring into after other students already on the waitlist for the course. Students then begin the program in the specific course and continue through the rest of the nursing program to graduation. *Transfer student failure or drop from a Course*
- Transfer students who have previously failed another RN program will only be allowed one entry into the COC RN program. After one failure in COC's RN program the student will not be allowed to return.

30 Unit option students progression

- Complete Progression
- Students completing the 30 unit option will complete the transition course and will be placed on the list to enter Psychiatric Nursing after the LVN to RN students, transfer students, and students repeating the transition course along with International students as a group by their application dates.

30 Unit Option Failure or Drop from a Course

• When the student fails, drops, or withdraws from the transition course or specific course, the student follows the same procedure as LVN to RN students.

Nurse with an International Nursing degree progression

Complete Progression

- Students with international RN licenses required by the BRN to take specific courses will complete the Transition course (Nursing 109).
- They are then placed on the list to enter the specific course after the LVN to RN students, transfer students, and students repeating the transition course along with 30 unit option students as a group by their application dates. *International RN failure or Drop from a Course*
- When the student fails, drops, or withdraws from the transition course or specific course, the student follows the same procedure as LVN to RN students.

Revision 1/2020: Nurses with International Nursing Degrees are not currently being admitted due to transcript evaluation/equivalency challenges.

POLICY: Readmission Policy **SECTION:** Program Administration **APPROVAL DATE:** Previously Approved, Reviewed 3/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

A student may re-enter the COC Nursing Program only one time after failing, dropping a nursing course, or withdrawing from the program. If the student wishes to be placed on the waitlist for re-entry, they must notify the HPPS office in writing stating that they would like to return at the first available seat. After two failures or withdrawals, a student may not return to the program.

Students who re-enter the program will be subject to all current nursing program policies as defined by the Nursing Student Handbook, catalog, and published materials and must fulfill all entrance requirements including a repeated background check and 10 panel drug screen. In addition, completion of the individualized remediation plan is required. Failure to complete the remediation plan by the specified deadline will disqualify a student from re-entering the program. Re-entry students will be admitted on a space available basis only.

Any Professional Development Plans (PDP's) from prior semesters do not count in the PDP totals for returning students. Upon return to the program, the policy for PDP's is the same as for all students in the program;

3 PDP's in one course or 3 PDP's in two consecutive semesters will result in failure from the program.

Two year policy:

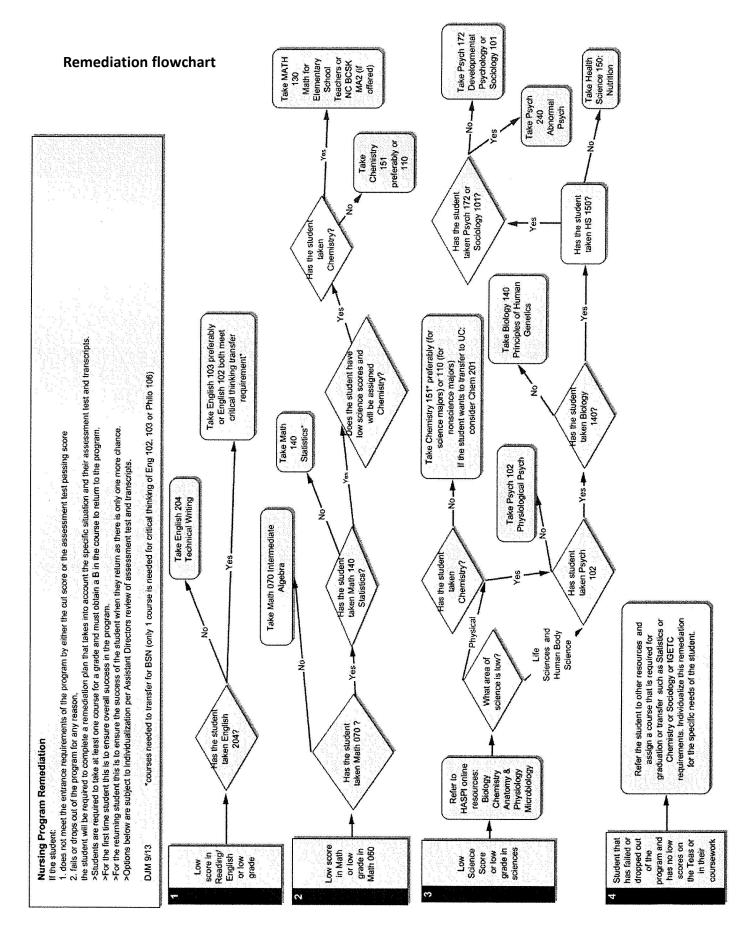
Students who re-enter more than two years after leaving the program must take Nursing 109 – Nursing Transition – before re-entering. This applies to both generic RN students as well as LVN-RN students. If an LVN-RN student takes Nursing 109 but is not able to enter the program within two years, that student will have to repeat Nursing 109.

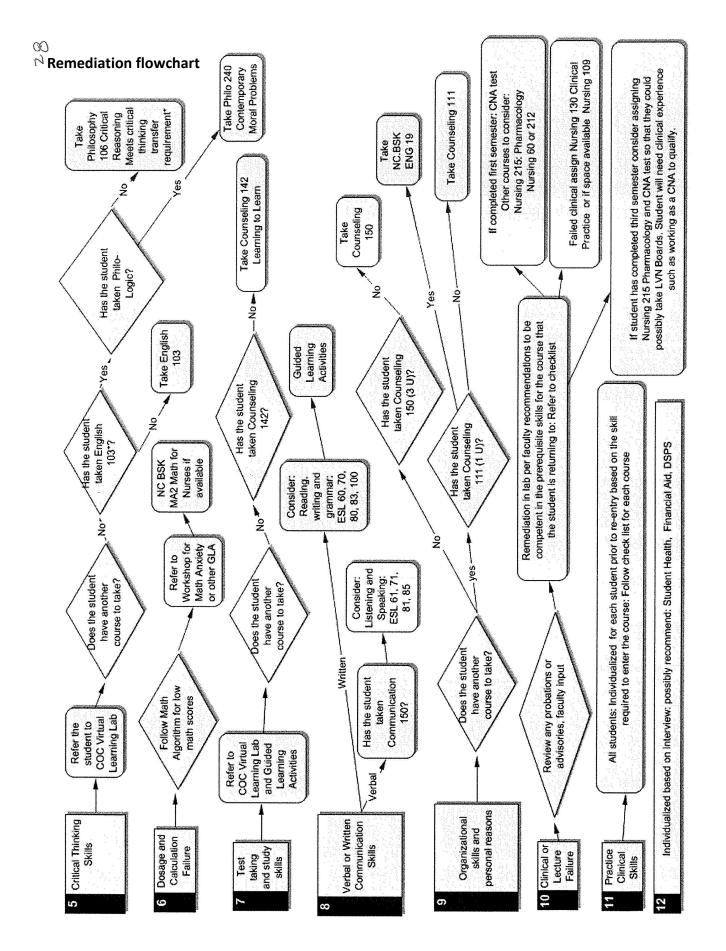
Transfer student policy:

Students who have previously failed in another RN program will only be allowed one entry into the COC RN Program. They will not be allowed to re-enter if they fail, drop, or withdraw from the program.

POLICY: Remediation Process Flowchart **SECTION:** Program Administration **APPROVAL DATE:** Previously Approved, Reviewed 3/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

The remediation process flowchart is a tool which has been developed to support the formulation of remediation plans for students. It is updated as needed to reflect accuracy and relevance.





POLICY: Transfer Policy **SECTION:** Program Administration **APPROVAL DATE:** Previously Approved, Reviewed 3/2019, reviewed 8/20 22 **REVIEWED:** Every 3 years

TRANSFER PROCESS: Students may apply to the RN program by transfer or challenge. Students are not allowed to transfer into the first semester; students must enter first semester as a generic student. Students are only eligible to be considered for transfer if they have been in a nursing program within 12 months of the day their application is accepted and are clinically safe and are eligible to re-enter their previous program. Students who have been out of a nursing program for more than 12 months must apply as beginning students.

The Director of Nursing has the right to accept or deny any transfer. The Director of Nursing determines how the applicant's previous courses correlate with the COC Nursing Program curriculum and accepted applicants are notified as to which portions of the curriculum must be taken in order to complete the nursing program at COC.

Selected applicants must attend a mandatory orientation and complete Transitions into Nursing, Nursing 109. Upon completing Nursing 109, the student will be placed on a waiting list until an opening in the appropriate course becomes available.

POLICY: Veteran Priority Policy – Replaced by Veteran Admission Policy 2016 **SECTION:** Program Administration **APPROVAL DATE:** Previously Approved, Reviewed 3/2019 **REVIEWED:** Sunsetted

Veterans receive priority enrollment in the specialty courses funded by the WIA grant through admissions. The LVN to RN and Paramedic to RN programs funded by the WIA grant accepted all qualified students which included veterans that applied.

Veterans seeking admission will be awarded one multi-criteria point.

POLICY: Veteran Admission Policy **SECTION:** Program Administration **APPROVAL DATE**: 2016, reviewed 3/19, revised 4/19, revised 5/22, reviewed 8/2022 **REVIEWED:** Every 3 years

Individuals who have held Military Health Care Occupations, specifically: Basic Medical Technician Corpsman (Navy HM or Air Force BMTCP), Army Health Care Specialist (68W Army Medic) or Air Force Independent Duty Medical Technician (IMDT 4N0X1C) may achieve advanced placement into the second semester of the nursing program. Documentation of education and experience qualifying for the specific Military Health Care Occupation is required.

1. Applicants must meet all general entrance requirements of the Associate Degree Nursing Program, including completion of designated prerequisites and the Test of Essential Academic Skills (TEAS) and must be granted a seat in the program.

2. Challenge includes a medication calculation exam (minimum passing score 90%), didactic exams (minimum passing score 75%), psychomotor skills assessments (minimum passing "proficient"). Please see the challenge procedure details accompanying this policy.

3. Applicants applying for advanced placement must submit the following materials verifying education and experience:

a. Official transcripts from appropriate educational program(s) demonstrating satisfactory completion of coursework and clinical experience

b. Documentation of experience including dates of experience. Experience provided in the form of a resume or Curriculum Vitae.

4. Advanced Placement will be granted if the applicant meets minimum requirements equivalent to those required of students who enrolled in N112. If N112 is successfully challenged, N114 may then be challenged.

5. If the challenge is unsuccessful, since a seat in the program has already been granted, the veteran will be required to begin the program with N112. Any unsuccessful challenge will be considered a program attempt.

PROCEDURE:

If a veteran is interested and would like to be considered for advanced placement, the following procedures will be followed:

1. Provide documentation of education and experience for the qualifying Military Health Care Occupation. Documentation must be submitted to the HPPS office at least one week before the start of challenge testing.

2. N112 and N114 course syllabi, content outlines, bibliographies, textbook lists and exam format description will be made available.

3. In addition, study guides for the medication calculation exam and the challenge exam and will be available.

4. Following review of the required documents, the veteran will be notified to proceed with the process for challenging N112 and N114.

5. The challenge process must be completed in the following order:

Step 1

Successfully pass a medication calculation exam (N112 content). Exam time limit is 30 minutes. The minimum passing score is 90%. The student will have three attempts to pass. Upon successful completion of this exam, the veteran may advance to step 2. Step 2

Successfully pass a written challenge exam (N112 Fundamentals and Pharmacology content, and N114 content if included in challenge petition). The minimum passing score is 75% on any challenge exam. Upon successful completion of this exam or exams, the veteran may advance to step 3.

Step 3

Successful completion of psychomotor skills assessment (vital signs, physical assessment, catheterization of female, sterile dressing change, medication administration to include oral, subcutaneous, intramuscular injections). Evaluation is based on practicum standard used for all N112 practicum. The student must be at the "proficient" level. The instructor's evaluation is final. References to all procedures will be provided following successful passing of the challenge exam and medication calculation exam.

Additional Information:

1. The written exam and medication calculation exams will be available in the HPPS office and will be administered in the TLC. Arrangements are the responsibility of the veteran.

2. Upon successful completion of the exams, the veteran will be contacted, and a mutually acceptable date will be determined by the student and one of the Foundations/Fundamentals instructors for psychomotor skill testing. Testing is expected to last two to three hours. Location will be determined by the instructor. The veteran may come to lab one hour early to become familiar with the equipment.

3. Demonstration of competent clinical care of one patient, if N114 is being challenged (skills lab or clinical setting) will be scheduled.

4. The entire advanced placement process must be completed no later than one week before the end of the semester in which admission occurred.

5. Veterans who have previously failed another RN program will only be allowed one chance for advanced placement by challenge. After one failure in COC's RN program, the veteran will not be allowed to return.

5/22 Revision: Veterans who successfully meet requirements for advanced placement into the second semester may continue the challenge process in subsequent Nursing courses if their military experience is deemed equivalent to course content by the associated BRN content expert and Nursing Program Director. The procedure for challenging courses will be consistent with the N112/ N114 challenge. Courses must be challenged in the sequence of the nursing program curriculum.

POLICY: Medical Deferral SECTION: Program Administration APPROVAL DATE: 2017, Reviewed 3/2019, revised 1/2020, reviewed 8/2022 REVIEWED: Every 3 years

Due to extenuating circumstances, a student can request a one semester medical deferral. For a medical deferral request to be considered the following conditions must be met:

The requesting student must have both a confirmed seat in first semester of the program and not have submitted a previous deferral request.

The request must be accompanied by a verifiable note from the health care provider. The note must indicate that the health condition seriously impacts and limits participation due to a temporary medical condition.

The request must be made no later than the first day of the semester.

The request must be approved by the Dean.

If the deferral is approved, the student next on the alternate list will be notified of an opening in the incoming semester.

If this alternate student chooses not to start, this will not count as a deferral.

After the one semester deferral, the following will apply:

At least two weeks prior to the start of the next immediate semester, the student must submit a note from a health care provider stating that the student "can participate in the program without restrictions".

The student is required to attend new student orientation.

The student must submit all required clinical site clearance documentation by the due dates established by the office staff.

1/2020 revision: Students in **any semester** may request a one semester deferral due to extenuating circumstances, including COVID-19 vaccination issues and other medical conditions. Any student deferring due to medical or vaccination issues must meet all health requirements, including vaccination requirements, before returning to the program. Students who defer due to a medical condition must present a medical provider note stating that they can return to clinical "without restriction" before re-entering the nursing program. All deferrals are granted at the discretion of the Nursing Program Director.

Santa Clarita Community College District

Nursing Department

POLICY: Assignment of Grant Funded Activities **SECTION:** Program Administration **APPROVAL DATE:** 3/22/2019, effective 6/1/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

Supplementary services (Grant work) may be assigned to full-time faculty at any time. Any parttime faculty must have an instructional assignment (contract) during the corresponding term of the grant activity to be eligible for participation, or consent and approval from college administration.

POLICY: Nursing Student Injuries/Illnesses Policy (on/off campus or in the clinical area) **SECTION:** Theory/Clinical

APPROVAL DATE: Previously Approved/ Updated 2016, 2018, reviewed 3/2019, reviewed 8/2022

REVIEWED: Every 3 years

If a student incurs an injury of illness while participating in Program courses or while engaging in clinical rotations in a clinical setting, the following shall apply:

Medical Emergency- Depending on the circumstances, the instructor, student, or designee should call 911 or the student should go to the nearest Emergency Room. If the illness/injury happens in the local area, the student should be transported to Henry Mayo Hospital at 23845 McBean Parkway, Valencia, CA 91355 (661)253-8000. Immediately contact Human Resources Lauren Helsper via 661-362-5427 or cell phone at 818-425-3939. Exposure to Body Substances- If the exposure occurs during a clinical rotation, the supervising faculty will escort the student to the facility's/agency's Emergency Department (ED) for evaluation and possible treatment. The supervising faculty is to contact Lauren Helsper in Human Resources immediately (information above). The student should be directed to seek further evaluation and is required to provide proof thereof or sign a refusal to seek medical treatment waiver. Student must follow clinical facility/agency's policy regarding release of confidential blood testing. It is expected that U.S. HealthWorks Medical Group or the student's pre-designated health care provider will provide further evaluation and follow-up care. **Non-Emergency-** Illness/injuries requiring medical care, the instructor will notify Lauren Helpser in the Human Resources Department (661-607-5427) within 24-hours. This step is crucial in

order to obtain authorization for treatment.

Unsure- If a student is ill/injured and is not sure if s/he wants or needs medical care, the student should be dismissed as soon as possible and advised by the supervising faculty that they have the option to seek care at the Student Health and Wellness Center on the COC Valencia campus. Contact Lauren Helsper in Human Resources.

The supervising faculty will contact the course lead faculty (if applicable) as soon as circumstances allow. The lead faculty is responsible for notifying the assistant director for the course and/or the nursing program director (whomever is available), as well as the Dean of HPPS. If the lead faculty is unavailable, s/he will contact the Assistant Director or the Director and the Dean of HPPS. The supervising faculty will complete a SUPERVISOR'S REPORT OF EMPLOYEE INJURY, which will be turned in to Human Resources.

Students may pre-designate a healthcare provider and must complete the attached Predesignating of Personal Physician form (Appendix in student handbook) prior to any incident, which will be kept on file in the Health Professions Office. The student must inform the supervising faculty that: they have a pre-designated healthcare provider. If the student has not pre-designated a health care provider s/he will be sent for treatment to U.S. HealthWorks Medical Group.

(Pre-designated health care provider- the student can tell the faculty, or the information is available by calling the Health Professions Office 661-259-3369)

U.S. Healthworks Medical Group 25733 Rye Canyon Road Valencia, CA 91355 (661) 295-2500 Hours: 8:00am-5:00pm (M-F)

U.S. Healthworks Medical Group 22840 Soledad Canyon Road Saugus, CA 91350 (661) 253-8800 M – F: 7:00 a.m. – 6:00 p.m. Sa – Su: 9:00 a.m. – 5:00 p.m.

U.S. Healthworks Medical Group 16300 Roscoe Boulevard, Suite 1-A Van Nuys, CA 91406 (818) 893-4426 24 hours a day/7 days a week (1st time visits)

After Normal Office Hours- For faculty or nursing student injuries sustained (on/off campus), please contact Rian Medlin as follows:

True Medical Emergency (Emergency Room or Paramedic) - Immediately contact Rian Medlin on her cell phone at 661/607-6387

Non-emergency – Contact Rian Medlin via telephone (661-362-3426) or email on the next business day for authorization for treatment paperwork. Please feel free to contact Rian Medlin on her cell phone with any questions.

POLICY: Accommodations SECTION: Theory/Clinical APPROVAL DATE: 2016, reviewed 3/2019, reviewed 8/2022 REVIEWED: Every 3 years

It is the responsibility of each 2nd, 3rd, and 4th semester student to alert each lead course instructor at least four weeks before the end of the prior semester, if accommodations are necessary related to religious observances, military commitments, or court-mandated issues affecting the ability to attend lecture and/or clinical on certain days of the week or weekend. Incoming 1st semester students are to notify the HPPS office staff and the nursing program director at orientation.

Failure to disclose the request for accommodation within the specified time-frame may result in an inability to facilitate the request. In addition, if new circumstances not previously disclosed arise, it is the student's responsibility to alert the lead faculty as soon as possible. The nursing program will make every effort to facilitate the accommodation(s). Depending on circumstances, equivalent, alternate assignments may be made by faculty.

POLICY: Attendance Policy SECTION: Theory/Clinical APPROVAL DATE: Previously Approved/ Updated 2015, Reviewed 3/2019, reviewed 8/2022 REVIEWED: Every 3 years

Regular attendance in class and clinical is necessary to meet course learning objectives. Since it is faculty responsibility to ensure that course learning objectives are met, faculty believe that absences should only occur in the event of personal illness or an emergency situation. However in the event of absence, the following college attendance policy will be followed:

BP 4233 "Any student with excused or absences amounting to more than 10% of the class meetings may be dropped or withdrawn from the class. An instructor may drop a student up until 20% of the course (2nd week of a full semester length course) or withdraw a student from a course up until 75% of the course time (12th week for a full semester length course) due to excessive absences." (Excessive absence is defined by more than 10% of the class meetings.) See individual course syllabi for attendance information specific to each course.

Example: If a class meets three days a week (theory and clinical), the student could be dropped after missing two days. If a class meets two days a week (theory and clinical), the student could be dropped after missing three days.

Information about Clinical Absences

Because of the progressive nature of the nursing courses absence from clinical disrupts learning. This disruption may impact the ability to pass the course which will result in being dropped from the program. Passing the clinical component of the course is based on weekly assessment of clinical competence and the meeting of weekly objectives which is evaluated using the clinical evaluation tool and written work. Due to the weighted nature of the weekly clinical experiences and associated learning objectives, unnecessary absences are to be avoided. Refer to the syllabus for specifics.

If a clinical absence is necessary, it is the student's responsibility to notify the clinical instructor prior to the start of clinical. If a student is absent and does not notify the instructor prior to the start of the clinical shift, the student will receive a Professional Development Plan. In the event of an extraordinary circumstance students are advised to contact their instructor and program director as soon as possible.

Additionally:

If a student is absent for hospital/course orientation, he/she will be dropped from the course.
 Missing the first day of a class is defined by the college as a "no show" and will result in being dropped from the course. The "no show" policy applies to classroom, skills lab, or clinical site.
 A tardy includes being late to, or leaving early from clinical or pre/post-conference or skills lab. Three (3) tardies equal one (1) absence. If the student is over an hour late, it will be considered a late arrival which is the same as an absence. Similarly, leaving an hour or more before the end of clinical/skills lab will be considered an absence, as the student will not be in a position to fully meet the day's objectives.

POLICY: Clinical Assignments **SECTION:** Theory/Clinical **APPROVAL DATE:** Previously Approved, reviewed 3/19, reviewed 8/22 **REVIEWED:** Annually

Students must be able to attend any clinical facility utilized by College of the Canyons during any time period (day, evening, or weekend). The instructors assign students to the clinical groups. Placements are made to provide the best learning environment for all students. Students must be able to provide transportation to any clinical facility. Transfer and returning students will take whatever space is available for their class assignment.

POLICY: Chain of Command SECTION: Theory/Clinical APPROVAL DATE: 2017, reviewed 3/2019, reviewed 8/2022 REVIEWED: Every 3 years

Being a member of a profession also dictates that one follows the appropriate chain of command in order to resolve conflicts. For example, if a student believes that s/he has a conflict or issue with the clinical professor, the professional chain of command would have the student first discuss the issue with the professor. If there is no resolution, the next step would be to discuss the issue with the lead lecture professor. If necessary, the student would then request a meeting with the appropriate assistant director. If further discussions are deemed necessary, the nursing program director, followed by the Dean of HPPS would be involved. See the nursing program organization chart for further details.

POLICY: Standards of Student Clinical Appearance SECTION: Theory/Clinical APPROVAL DATE: Previously Approved/ revised 2016, Reviewed 3/2019, revised 1/2020, reviewed 8/2022 REVIEWED: Every 3 years

Professional Attire Guidelines

Student appearance is a reflection of the individual as well as the Nursing Program and the College of the Canyons. A professional, neat, and well-groomed appearance must be maintained at all times. Uniforms with the COC patch and photo ID must be worn during clinical unless instructed otherwise (for example, some psych units). This may be subject to change. Clinical uniforms must be purchased through Cherokee Uniforms. Information about ordering, sizing, etc., is available on the COC Nursing Department website.

Uniforms must be kept clean and neat. Due to infection control concerns, uniforms are never to be worn on campus or in other public places (such as restaurants and grocery stores) after clinical. On occasion, students will be required to wear laundered uniforms for specific campus activities. These activities include: the N112 skills lab course, the N112 skills lab practicum and all scheduled course simulations.

At no other time are uniforms (including scrubs) to be worn on campus. Revised 1/2020:

SKILLS LAB DRESS CODE

Students must wear safe, closed toe shoes at all times in the skills lab.

A student who is practicing skills in the skills lab (N089) or completing required assigned activities for courses may wear: 1) clinical uniform 2) dark blue scrubs or 3) reasonable street clothes.

A student who is being evaluated by a faculty member for skill competence may wear: 1) clinical uniform 2) dark blue scrubs.

A student who is participating in simulation may wear: 1) clinical uniform 2) dark blue scrubs.

N112 COURSE DRESS CODE

Students must wear safe, closed toe shoes at all times in the skills lab.

N112 students may wear 1) clinical uniform or 2) dark blue scrubs when participating in the skills lab theory/pharmacology portions of the course. Street clothes may be worn to the lecture portions of the course.

While in a clinical facility/agency in the role as a student, adherence to the dress code is required and includes wearing the COC photo ID. If the uniform top has a zipper, it must be

zipped up all the way. If the students are in the clinical setting in order to prepare for the next day's clinical by reviewing charts, or doing research for required clinical paperwork, the designated uniform must be worn. If permitted by the facility, an above the-knee length white lab coat may be worn over professional street clothes. It is inappropriate to wear jeans, shorts, sandals, exercise gear, or overly tight and revealing clothing when in the hospital even if a lab coat is worn.

Long sleeves either in the form of a shirt or lab coat may be worn with the uniform. Shirts may be turtle-neck or crew neckline but must be white and in good condition, similarly, any undergarments must also be white or tan, so as not to be visible under the uniform. Shirts may not be made of thermal material, contain any logos, and may not be discolored. Faculty will ask for the shirt or lab coat to be removed for any of the above conditions or if the garment interferes with a professional appearance.

Shoes: Shoes worn in clinical must be all white, sturdy and safe. Shoes and laces must be kept clean. Open toed/open backed shoes are not allowed in clinical facilities.

COC Photo ID: Obtained at the COC Student Center. ID is worn on the front of the uniform above the waist. The title on the ID must be listed as "Student RN."

COC Patch: The COC patch is worn on the left shoulder of the uniform and lab coat.

Hair: Shoulder length or longer must be pulled back and off the collar. Hair accessories are not permitted, other than simple unadorned clips to confine the hair if necessary. Hair must be of a color that would occur naturally, i.e., no blue, orange, pink, purple or other color that would not occur naturally is allowed.

Nails: Nails must be kept short to prevent injury to the patient. Artificial nails are not allowed. No nail polish or gels may be worn. Violation of this policy will result in removal from the clinical area.

Make-Up: Make-up should be carefully applied so that it enhances the wearer. Extremes should be avoided.

Facial Hair: Men's facial hair must be short and neatly trimmed to allow for proper fit of isolation masks.

Chest Hair: If chest hair is visible, student must wear white, short sleeve, crew neck shirt under the uniform to cover the chest hair.

Tattoos: All tattoos must be covered.

Jewelry: No jewelry other than wedding rings and a watch with a second hand should be worn while in uniform. One ear accessory per ear (a stud-type earring) that does not hang below the ear lobe may be worn. No tongue accessories or piercings are acceptable. No other body piercing accessories are allowed.

Gum: Gum is not allowed while in uniform.

Grooming: While at the clinical or agency site, any grooming or application of cosmetics and/or personal care products must be done in the restroom or lounge and not in any patient care areas nor in the nurses' station

Smoking and Vaping: Those who wish to smoke/vape may do so only in designated areas. Be aware that smoking or vaping immediately before patient care may be hazardous to the patient. The student may be asked to change his/her uniform if smoke/odors can be detected on the uniform.

Perfume/Aftershave/Deodorant: Perfume and aftershave should not be used when caring for patients. These odors may be nauseating for an ill person or cause allergic reactions. Please use a reliable deodorant. The synthetic fabric of some uniforms picks up body odor which may be difficult to eliminate. Good oral hygiene is also necessary.

Belongings: Bring the following to clinical (may vary based on clinical setting/specialty area): black pen (not gel ink nor marker), bandage scissors, stethoscope, penlight, small pocket notebook, and a watch with a second hand.

Clinical instructors will recommend items to bring to clinical. Please do not bring backpacks, purses, briefcases, etc. Hospitals do not provide lockers for students and these items cannot be placed on the nursing units.

POLICY: Guidelines for COC Nursing Students during Code Blue and Rapid Response **SECTION:** Theory/Clinical **APPROVAL DATE:** 2021, reviewed 8/2022 **REVIEWED:** Every 3 years

COC nursing faculty support the following general guidelines, which apply to all COC nursing students during clinical rotations:

Students will:

1. Initiate BLS independently while activating code blue process, as appropriate, as all are BLS certified.

2. Transition out and into BLS as directed by the staff of the clinical site, with support of the clinical instructor.

3. Carry out BLS intervention under the supervision of clinical faculty and /or clinical site RN clinicians.

4. Utilize facility required personal protective equipment (PPE) at all times.

5. Stand in the patient room observing patient emergent care only with staff approval.

6. Exit the room immediately if directed by clinical staff or the clinical instructor. Students will not:

1. Touch medication at any time.

2. Gather supplies during the emergent patient care situation, except when accompanied by an RN staff member or the clinical instructor.

POLICY: Student Impairment by Alcohol, Drugs, and/or Emotional Illness SECTION: Theory/Clinical APPROVAL DATE: 2013, reviewed 3/2019, reviewed 8/2022 REVIEWED: Every 3 years Substance abuse or emotional/mental illness among nursing students is a major issue as it can

Substance abuse or emotional/mental illness among nursing students is a major issue as it can place vulnerable patients at risk, as well as compromise the integrity of the learning environment. Nursing students are at high risk for developing substance abuse behaviors or emotional/mental illness due to the inordinate levels of stress, burn-out, and the high demands of nursing school.

Substance Abuse and Emotional/Mental Illness:

The Board of Registered Nursing considers the student use of controlled substances, dangerous drugs or devices, or alcoholic beverages to an extent or in a manner injurious to self or others to constitute unprofessional conduct. The conviction of a criminal offense involving the prescription, consumption, or self-administration of the above substances is conclusive evidence thereof. (B&P 2762). Also, the Board of Registered Nursing considers that substance abuse and emotional/mental illness are diseases and should be treated as such. Therefore, the Board has established a diversion program for impaired registered nurses as a voluntary alternative to traditional Board disciplinary actions. (B&P 2770)

It is the responsibility of the student nurse who suffers from any of these conditions to seek voluntary diagnosis and treatment. It is recognized that the nature of these illnesses requires extensive and thorough rehabilitation. The Counseling and Nursing Departments as well as the Student Health Center can provide information regarding treatment centers. If left untreated, this could lead to disciplinary action and may prevent licensure in California.

Procedure:

Any student demonstrating characteristics of substance abuse, emotional, or mental illness will be directed to a health care provider for diagnosis and treatment.

If the student is in a patient care setting, the student will be removed from the clinical setting immediately by the instructor and referred to seek appropriate attention with a physician or the COC Student Health Center.

If the Behavioral Intervention Team (BIT) is notified, the student is required to comply with BIT follow-up recommendations. The course instructor or nursing program director will communicate with the BIT team regarding ability to return to clinical.

The student may be dropped from the program.

Reentry into the nursing program will be considered on a space available basis only after documentation of aggressive, continuous rehabilitation, or counseling and recommendation

from a physician indicating satisfactory health status. The BRN requires students to show evidence of rehabilitation when submitting application for licensure.

Additionally, the nursing faculty recognizes that high levels of anxiety can significantly interfere with learning as well as patient care and believes in the importance of addressing this issue immediately. If a student demonstrates high levels of anxiety the following guidelines will be followed:

The student will be referred to the Student Health Center.

Following the Student Health Center referral, the student must meet with the course instructor or Nursing Program Director.

Before returning to the clinical setting, the student must meet with the clinical instructor and/or program director for assessment and discussion about follow-up measures to control anxiety.

NOTE: The Nursing Department is subject to College of the Canyons policy regarding drug and alcohol abuse by students. A student will be dismissed from the program if he/she is deemed unsafe to practice. Students are advised to read the College of the Canyons policies governing student rights and responsibilities in the College Catalog. Every attempt will be made to help a student find appropriate agencies to help in rehabilitation. The Board of Nursing guidelines indicate that the student must participate in such a program. Crisis counseling is available in the Student Health and Wellness Center.

This entire policy will be discussed in new student orientation.

POLICY: Clinical Behavior SECTION: Theory/Clinical APPROVAL DATE: 4/28/2013 / revised 2016, 2017 (PDP form), reviewed 3/2019, reviewed 8/2022 REVIEWED: Every 3 years

The following policy defines clinical behavior and describes the process for correcting the behavior. More serious behaviors considered reckless are also described and will result in immediate removal from clinical.

RECKLESS BEHAVIOR:	AT RISK BEHAVIOR:
Chose to consciously take a substantial & unjustifiable risk, or was dangerously deficient in knowledge base jeopardizing patient safety.	Did not recognize risk or mistakenly believed risk to be justified.
 Endangering the welfare of patients or others: Intentional harm or abuse to patients, staff, faculty, peers, school Providing patient care while demonstrating physical, mental, or cognitive limitations; including, but not limited to, intoxication. Abandoning a patient which then jeopardizes the patient's welfare. Unprofessional/illegal behavior: Deliberately falsifying the patient's chart to cover-up inappropriate care 	 Failing to meet required practice standards as defined by the clinical evaluation tool.

	1 7
 Illegal acts such as stealing, or profiting from patient information Hospital bans student due to inappropriate behavior. 	
PROCESS	PROCESS
 Removal from clinical immediately. There will be an investigation of the clinical issues by a departmental panel consisting of both administrator(s) and faculty. The student and instructor will have the opportunity to present their interpretation of the events leading up to the instructor's recommendation that the student be removed from clinical to the departmental panel. If the panel deems that the student engaged in reckless behavior, the student will immediately fail the current course and may not return to the program. The decision by the panel does not replace the college grievance procedure. 	 Remove from clinical after <u>3</u> documented incidents in any given semester or 3 documented incidents in two consecutive semesters. Student fails the current course. If the student is eligible to return to the program, he/she will be given a remediation plan to complete before returning. Remediation plan will consist of: Transition class with semester appropriate goals and outcomes reflecting competencies needed for successful re-entry. Academic remediation if warranted.
DISPOSITION	DISPOSITION
Not permitted to return to program	1. Student permitted to return to program after completion of remediation plan.
	Progress report completed as listed in the remediation plan for re-entry
	 into the program. 3. If progress report is unsatisfactory, the instructor(s) and Assistant Director will consult to determine if further corrective measures are warranted.

- 4. If a student demonstrates "at risk" behavior, he/she receives a written warning documented on the Professional Development Plan. The "PDP" details both the incident and a plan to improve performance.
- 5. If another "at risk" incident happens or the student fails to improve, a second written PDP is created.
- 6. If a third incident occurs, the third and final PDP is issued. The student is removed from clinical, and fails the course, because he/she is unsafe to remain.

Professional Development Plan / Advisory

Student Name	Date/	_/	Course	
NOTICE: You are receiving (checkone):				
An Advisory (Failure to meet Adviso	ry requirements ma	ıy result in a Pro	ofessional Development Plan)	
A Professional Development Plan (P	DP) <u>For The Followir</u> C Excessive Abs Poor clinical	sences	 Poor academic achievement Professionalism 	
1st PDP Notice (Date) As stated in the Nursing Student Handle semester, or in two	□ □ook, if a student re	(Date) ceives three Pro		 given
Summary of Concerns Defic	iencies			
Requirements for successful meeting of o	course objectives	Due by	_//	
Requirements met Requirem	nents not met	Date/	/	
///////	<u> </u>			
Name & Signature of Instructor	//	Nam	e & Signature of Assistant Director	

Faculty 9/5/17

POLICY: Professional Development Plan for Returning Students **SECTION:** Theory/Clinical **APPROVAL DATE:** 4/28/2013 revised 2016 [(reflecting PDP, formerly known as Personal Improvement Plan (PIP)], reviewed 3/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

Any PDP's from prior semesters do not count in the PDP totals for returning students. Upon return to the program, the policy for PDP's is the same as for all students in the program; 3 PDP's in one course or 3 PDP's in two consecutive semesters will result in failure from the program.

POLICY: Utilization of Patient Information **SECTION:** Theory/Clinical **APPROVAL DATE:** Previously Approved, reviewed 3/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

Clinical Preparation: All accessed patient information must be hand written. No patient records may be duplicated or electronically transmitted.

During Clinical Hours: Patient information may be accessed and utilized per hospital policy with clinical instructor guidance. All documents containing patient information must be disposed of appropriately before the student leaves the clinical area. Patient confidentiality must be protected at all times. Health care providers (including student RNs) are required to comply with state and federal laws concerning he confidentiality of patient information including the Health Insurance Portability and Accountability Act (HIPAA).

Any evidence of a breach of confidential patient information will result in disciplinary action that may include expulsion from the program and the Santa Clarita Community College District. The following are a few examples of acts that would constitute violation of patient confidentiality requirements:

Accessing patient information not required for care.

Posting photographs and/or any patient information on the web or social networking sites. Removing any printed, copied, photographed or otherwise duplicated patient medical records from the facility, whether or not specific patient identifiers have been redacted or removed.

Clinical written assignments may be completed as required.

POLICY: Social Media SECTION: Theory/Clinical APPROVAL DATE: 2015, Reviewed 3/2019, reviewed 8/2022 REVIEWED: Every 3 years

The American Nurses Association (ANA) and the National Council of State Boards of Nursing (NCSBN®) have mutually endorsed each organization's guidelines for upholding professional boundaries in a social networking environment. Both professional organizations caution nurses that they shall not disclose, and also need to be aware of the potential consequences of disclosing patient-related information via social media and must be mindful of employer policies, relevant state and federal laws, and professional standards regarding patient privacy and confidentiality. The ANA developed a guide for nurses to ensure that professional standards are maintained in new media environments. These principles will be used to guide policy by the College of the Canyons Nursing Program.

ANA's Principles for Social Networking

1. Nurses must not transmit or place online individually identifiable patient information.

2. Nurses must observe ethically prescribed professional patient — nurse boundaries.

3. Nurses should understand that patients, colleagues, institutions, and employers may view postings.

4. Nurses should take advantage of privacy settings and seek to separate personal and professional information online.

5. Nurses should bring content that could harm a patient's privacy, rights, or welfare to the attention of appropriate authorities.

6. Nurses should participate in developing institutional policies governing online conduct. Tips to Avoid Problems

1. Remember that standards of professionalism are the same online as in any other circumstance.

2. Do not share or post information or photos gained through the nurse-patient relationship.

3. Maintain professional boundaries in the use of electronic media. Online contact with patients blurs this boundary.

4. Do not make disparaging remarks about patients, employers or co-workers, even if they are not identified.

5. Do not take photos or videos of patients on personal devices, including cell phones.

6. Promptly report a breach of confidentiality or privacy.

References:

American Nurses Association. (2011, September). Principles for social networking and the nurse. Silver Spring, MD: Author.

National Council of State Boards of Nursing. (2011, August). White Paper: A nurse's guide to the use of social media. Chicago, IL: Author.

http://www.nursingworld.org/FunctionalMenuCategories/AboutANA/Social-

Media/SocialNetworking-Principles-Toolkit/Tip-Card-for-Nurses-Using-Social-Media.pdf Sept. 2011

Patient information includes more than name. Protected information may include: age, gender, race, dates, diagnosis, medical photos. No pictures may be taken in skills labs without the permission of the supervising instructor. No pictures taken in classrooms or skills labs may be posted without appropriate permission. In addition, it is considered cheating to post, text or discuss any content from graded exams or quizzes.

Policy Violation

All information described under the social media heading constitutes social media policy, and therefore violation will result in:

Meeting with the nursing program director in order to determine disciplinary actions. Documentation of policy violation will be placed in student's department file.

Consequences or disciplinary actions may result in a Professional Development Plan

(PDP) and/or referral to the Dean of HPPS or the Dean of Student Services.

Continued eligibility in the program will be determined at that time.

Reporting of violation and subsequent disciplinary action by clinical facility/agency if appropriate.

POLICY: Grade Calculation (Grading Policy)
SECTION: Theory/Clinical
APPROVAL DATE: Previously Approved/ Updated 2015, Reviewed 3/1209, reviewed 8/2022
REVIEWED: Every 3 years

GRADING POLICY

The theory instructor will explain the requirements and grading method at the beginning of every course. The following percentage groupings determine the letter grades used in nursing courses.

A = 90 - 100% B = 80 - < 90% C = 75 - < 80% F = < 75% and below.

There will be no rounding when calculating grades. Calculations will not be extended past the tenths place.

All classes must be passed with a C or better. This applies to nursing classes as well as all classes required for graduation.

PASSING NURSING COURSES – PROCESS

Both lecture and lab/clinical components of a course must be passed at the 75% level in order to pass a nursing course. Failure to achieve the 75% level in either lecture or lab will result in failing the course.

Individual assignment and individual exam scores will be calculated to the tenths place and not rounded up. Total assignment and total exam scores will be calculated to the tenths place and not rounded up. Final course grades will not be rounded up.

In order to pass a course:

1. A combined average score of 75.0% must be earned on exams.

2. A final course grade of 75.0% must be earned.

74.9% does not meet either of these requirements, and will result in failure of the course.

Lecture grading:

All students must pass the exam portion of lecture with a cumulative score of 75% or above in order to pass the course. If the student fails to achieve the required 75% in exams, the student will fail the course. No other scores will be calculated into the grade. Students who achieve the passing level for exams will then have other graded

assignments added to their grade for a cumulative final grade. Students must still pass at the 75% level. Therefore, if the grades for other assignments lowers a grade to below 75% over all, the student will fail the course.

Clinical grading:

Both the written assignments and the clinical evaluation must be passed in order to pass the clinical portion of each class. The passing level for all written work is 75%.

Clinical paperwork is considered a test. Each set of clinical paperwork will only be scored once.

The written grade from clinical is not factored into the course letter grade upon completion of the class.

The Clinical Evaluation Tool describes expected behaviors and will be used to evaluate clinical performance.

Failure to attain a 75% in any area of the clinical evaluation tool during the clinical rotation will result in a written notification that performance is less than expected for the semester. Written notification will be in the form of a Professional Development Plan (PDP) and will include a contract for improvement.

Failure to attain a 75% in any area of the clinical evaluation tool at the end of the course will result in failure of the clinical portion of the course and therefore, failure of the entire course.

3 PDP's in one course or 3 PDP's in two consecutive semesters will result in failure and being dropped from the program.

Failure to meet clinical objectives (as noted in the syllabus) as a result of absences and tardies will result in failure of the clinical portion of the course and, therefore, failure of the entire course.

POLICY: Composition of Weighted Grades **SECTION:** Theory/Clinical **APPROVAL DATE:** Previously Approved/ revised 2018 to include Kaplan testing, reviewed 3/2019, revised 2020, reviewed 8/2022 **REVIEWED:** Every 3 years

Grades for core courses will be consistently weighted as follows:

95% Examination

5% Other (This may include quizzes, homework, papers, presentations, Kaplan testing)

2020 revision: 5% "Other" to include mandatory N080 skills lab hours/assignments assigned in courses.

POLICY: Incomplete Grade Policy **SECTION:** Theory/Clinical **APPROVAL DATE:** Previously Approved, reviewed 3/2019, reviewed 8/2022 **REVIEWED**: Every 3 years

Incomplete grades may be assigned when course requirements are not met due to unforeseen circumstances. This grade will be given in accordance with the College of the Canyons grading policy as found in the College Catalog. Students must meet with faculty to discuss the reasons for the incomplete, whether or not an incomplete is appropriate to the circumstances, and ways in which the situation can be resolved.

An incomplete grade does not indicate that the student has satisfactorily completed the course objectives. Therefore, the student is judged unprepared to advance in the nursing program.

An incomplete grade in a nursing class must be replaced with a grade of "C" or better in order to be eligible to advance in the sequence of nursing classes. Replacement of the incomplete with a "C" or better must take place before the start of the next class in the program sequence. If an incomplete grade in a nursing course is not removed by the timeline indicated, the student will be dismissed from the program.

College of the Canyons Catalog:

The grade of incomplete is given only in cases of emergency and when the student is unable to complete the course due to circumstances beyond his/her control usually during the final weeks of the course. Arrangements to receive an "I" must be made with the instructor before the course ends.

To clear an "I" grade, a student must make arrangements with the instructor to make up the grade prior to the end of the ensuing semester in which the incomplete was given. Failure to clear an "I" grade will result in a grade by the instructor given in lieu of completion of the course and could result in an F or FW grade being assigned. An incomplete grade cannot be changed to a W or to NC. Students may not re-enroll in a class in which an "I" is pending.

POLICY: Rounding Rules for Dosage and Calculation Policy **SECTION:** Theory/Clinical **APPROVAL DATE:** November 2006/ revised 2015, reviewed 3/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

Rounding rules will be used for all dosage and calculation examinations. Basic rounding rules will be introduced to students in the first semester; more complex will be introduced in subsequent semesters. Any changes based on necessity due to current clinical practice standards will be reviewed by the dosage and calculation subcommittee and presented to the entire faculty for review and approval.

Zero Rules with Numbers

Do not put a trailing zero after the decimal point, only leading zeros are placed before the decimal

Remember, zeros lead never follow.

Example (leading zero): 0.25mg

Basic Rounding Rule

When rounding, if the last number is 5 or higher, round up to the next "place".

Example: 2.15 would be 2.2 if rounded to the tenths place.

Example: 0.336 would be 2.34 if rounded to the hundredths place.

Calculations in mL

If the amount to be administered is less than one mL, the amount needs to be rounded to the hundredths place.

Examples: 0.754 would be 0.75 mL

If the amount to be given is more than one mL, round to the tenths place. Examples: 2.28 would be 2.3 mL

Intravenous Calculations

When calculating the rate on an IV pump, round to tenths place. Example: 40.5 mL/hour, 8.5 mL/hour, etc.

When calculating IV for gravity delivery, drops per minute (gtts/min) needs to be rounded to a whole number.

Example: 33.5 gtts/minute would be 34 gtts/minute.

Pediatric Calculations

For a pediatric patient, the amount administered always needs to be rounded to the hundredths place.

Example: 1.24 mL.

For a pediatric patient, the dose/dosage range is rounded to the hundredths place.

Example: 66.67 – 133.33 mg/dose For a pediatric patient, weight is rounded to the hundredths place. Example: 13.636 kg would be 13.64 kg.

Weight-Based Medications

For a pediatric patient, the amount administered always needs to be rounded to the hundredths place.

Please also refer to your text: Morris, Deborah. (2013). Calculate with Ronfidence. (6th ed.).

POLICY: Clinical Experience Paper Grading (prior to 2016 this was known as "Case Study Grading")
 SECTION: Theory/Clinical
 APPROVAL DATE: Previously Approved, reviewed and updated 3/19, reviewed 8/2022
 REVIEWED: Every 3 years

The initial grade awarded for the case study/clinical experience paper is counted. It may not be re-graded. It may be re-written for learning purposes only.

POLICY: Testing Policy SECTION: Theory/Clinical APPROVAL DATE: 2020, reviewed 8/2022 REVIEWED: Every 3 years

In Person Exams

No personal belongings will be allowed on the desk during the exam except for a pencil or pen. Cell phones and all other electronic personal devices must be stowed in book bag or coat during exams. All book bags must be zipped and placed under the desk or at the front of the room. Coats will be placed at the front of the room. Students will be notified prior to the exam if a calculator will be allowed. Traffic during exams is distracting. Students will have the opportunity to use the restroom before the exam.

Online Exams

The following applies to any students whose course has an online exam. During an online exam, students must show their entire desk and area prior to starting the exam. If a student is using a desktop computer, the student may need to use their cell phone to video the area. Instructors will discuss the rules with all students prior to the beginning of the exam. It is at the discretion of the instructor to give out their cell phone for students to use to ask questions. If a student is kicked out of exam or accidently submits early, instructors will consider letting student back in on a case-by-case basis.

Students must remain at the computer during the exam. Authorized materials will be made available in the exam. Attempting to access external websites and/or course materials in the course site is never permitted and will invalidate the exam.

Students may not use notes, calculators, or other materials unless otherwise stated in their course site. Any unpermitted materials (including smart devices, such as cell phones and smart watches) must be stored away from the testing area. All electronic devices must also be turned off.

Exams must be completed alone in a quiet, private location, with no distractions. The testing environment must remain secure throughout the exam. No other individuals may remain in or enter the testing area for the duration of the exam.

Students may be asked to conduct room security checks at any point during an exam. All requested security checks must be performed. Loss of time during these security checks cannot be made up.

Students must conduct themselves professionally throughout the duration of the exam. Any inappropriate or illicit behaviors will be reported accordingly.

All remote testing sessions will be recorded. If the proctor or instructor suspects that a violation of testing policies and/or academic dishonesty has occurred, a record of the student's activity will be consulted during and/or after the completion of the exam.

Make-up Exams

Students will be allowed to make up missed examinations if they notify the instructor of their absence before the start of the examination. Failure to do so will result in a zero on that exam.

Students will have 48 hours to make up the examination. It is up to the instructor to decide on format of the makeup examination.

· Quizzes in lecture and clinical may be made up only at the discretion of the instructor.

• Students are not allowed to re-take an exam if they received a failing grade.

• The syllabus will contain information for each course regarding the make-up policy.

Exam Review

It is up to faculty to decide to review an exam. Faculty may choose to review the exams in class, online, or individually in their offices. Students need to check with each individual instructor. No books, pencils, pens, or cell phones are allowed while reviewing an exam. The intent of a review is to understand how to improve on the next exam and to gain an understanding about questions answered incorrectly. Exams will not be available for review until all students have taken the exam.

Testing Accommodations

Students who have verified disabilities and accommodations request on file with the Academic Accommodations Center (AAC) may take out of classroom exams in The Learning Center (TLC). Any student (requesting test accommodations) must supply the instructor with a current "Request for Academic Accommodations" form at least one week prior to the exam.

Exam Integrity

 \cdot Students will not disclose or discuss information about the items or answers seen on exam/test/quiz unless it is during a formal test review with the course faculty. This includes posting or discussing questions on the internet and social media websites.

Students may not copy or reconstruct exam items during or following the exam for any reason.

• Students may not seek help from any other party in answering items (in person, by phone, text, or by email) during the exam/test/guiz (including breaks).

• Students may not remove exam/test/quiz items and/or responses (in any format) or notes about the exam/test/quiz from the testing room.

• Students will comply with any investigation related to exam integrity that needs to be conducted.

· Students may not take the exam/test/quiz for somebody else.

• Students may not tamper with the computer or use it for any function other than taking the exam/test/quiz.

Note: If a student witnesses any of the above behavior, or any irregular behavior that is in violation of the exam/test/quiz rules, the student is required to report it to the lead nursing instructor.

POLICY: Medication Administration Competency Assessment Policy and Procedure **SECTION:** Theory/Clinical

APPROVAL DATE: Previously Approved/ revised 2017, Reviewed 3/2019, reviewed 8/2022 **REVIEWED:** Every 3 years

Clinical sites require assurance that students have passed the medication administration competency before they are eligible to pass medications at the clinical site. To maintain competency, this assessment must be completed each semester in the RN program with a score of 90% prior to administering medications in the clinical setting (see specific course syllabi for further information). This dosage calculation assessment covers material previously taught. If need be, students may take this assessment up to a maximum of three times total. If a student fails the competency assessment, the student will fail the current course. Remediation including coursework will be provided before the student may return to the program. Refer to the readmission policy in the student handbook for reentry procedures.

Procedure:

The first assessment (except as noted below) will be taken during the first week of the course during the established first day of lecture, orientation, skills lab, or clinical orientation.

The second and third assessments if necessary will be taken in the TLC.

However, if after three attempts the student is unable to pass the assessment, the student will fail the course.

Students must review the exam prior to taking the next exam.

Assessments may be taken more than once in a week.

Medication administration competency assessment must be passed before the first day of clinical in the second week.

One medication administration competency assessment will be taken per semester. Exceptions and deviations from this procedure: In third semester, Nursing 236 has a separate pediatric medication administration competency that is part of the course in addition to the one in Nursing 234. The medication administration competency will be given during each of these beginning courses. RN Program: First Semester: Nursing 112 LVN to RN Program: First Semester: Nursing 109.

Santa Clarita Community College District

Nursing Department

POLICY: Simulation Policy SECTION: Theory/Clinical APPROVAL DATE: Spring 2018, reviewed 3/2019, reviewed 8/2022 REVIEWED: Every 3 years

College of the Canyons Nursing Department Simulation Policy

Confidentiality Acknowledgment and Consent

Simulation of real-life patient care experiences in a safe environment assists students with developing critical thinking and decision-making skills by providing active learning opportunities. Scenarios are created providing experiences appropriate to the student's learning level. Students participate in the scenarios in various roles as well as in debriefing where they reflect on their learning and receive feedback on individual and team performance. Simulation experiences can be used the classroom, lab class, skills lab and as part of a clinical day. All students are required to sign a confidentiality agreement prior to the first simulation experience. COC Philosophy of Simulation. The COC simulation philosophy is grounded in experiential learning in which students take simulated experiences and apply to clinical situations. Simulation will provide a safe and realistic learning environment where participants will have the opportunity to improve skills, utilize critical thinking skills and provide safe, evidenced based patient centered care. Trained faculty will provide students with feedback through debriefing of their performance and will empower students to self-analyze their performance during the guided reflection. All simulation-based experiences will adhere to the standards of best practices of simulation and proceed from simple to complex to maximize student learning.

College of the Canyons Nursing Department Simulation Confidentiality Acknowledgment and Consent By signing the Student Handbook Acknowledgement form (Student Handbook, Appendix A).

I agree to keep confidential all content of the scenarios in which I participate. I agree not to discuss any aspect of the simulation program, situation, or event with anyone else other than the actual group participants. I acknowledge that sharing information with others outside the participant group is a breach of confidentiality. This is to protect the integrity of the scenarios so future participants don't learn about them in advance and to keep the participating students own performance confidential. I understand each simulation program using high fidelity simulators may be videotaped for educational purposes. This agreement is for any simulation in which I am involved during the entire nursing program. Failure to adhere to the confidentiality policy will

result in an advisory or professional development plan. Not fulfilling the requirements of the advisory and/or subsequent breaches in confidentiality will result in a Professional Development Plan.

Code of Conduct

Professionalism must be displayed at all times. Students will follow the College of the Canyons code of conduct. Students are to wear their uniform for simulation and adhere to the clinical dress code. They are to bring a stethoscope, penlight, watch and any applicable equipment specified on the course specific simulation paperwork. Simulation sign-ups are made available on the Skills Lab Canvas site and it is the student's responsibility to register for simulations in a timely manner. All learners are expected to come to simulation experience prepared. In order to assure that students are prepared, the facilitator will review the student's papers prior to beginning the simulation. If a student does not have the preparation paperwork completed they will not participate in simulation and it will count as an absence. In addition, simulation hours are clinical hours therefore not attending simulation will lead to a clinical absence.

General Rules

Due to the expense of the complex equipment, no eating or drinking, with the exception of water, is allowed in the simulation labs. Use equipment only for the purpose specified. If you have not been oriented on how to use the equipment, ask the lab staff for a demonstration. Treat manikins with the same respect as real patients. Introduce yourself, explain what you are going to do, and provide privacy. Please cover manikins, make beds, return equipment to its place, when finished. Permission must be obtained from simulation coordinator in order to take and/or photographs. Absolutely no ink pens, felt-tipped markers, or iodine/betadine near the patients. These permanently stain task trainers and manikin skins. If you have lotion on your hands, please wash this off before touching the manikins. All personal electronics need to be turned off during simulation.

Latex Allergy: Every effort will be taken to order latex free items when they are available. If a student has a latex allergy, they are to notify the skills/sim lab staff. Users who suffer from latex allergies should take precautions while using or handling the latex supplies by wearing non-latex gloves.

POLICY: BSN Bridge Co-Enrollment SECTION: Theory/Clinical APPROVAL DATE: Fall 2018, updated 3/2019, reviewed 8/2022 REVIEWED: Every 3 years

Each student may be required to complete a survey regarding bridge/co-enrollment in BSN programs at some time each semester. Bridge/co-enrolled students will be asked to provide evidence of BSN program enrollment.

POLICY: Acknowledgement Forms **SECTION:** Faculty **APPROVAL DATE:** Previously Approved 2018, revised 2019, revised 2020, reviewed 8/2022 **REVIEWED:** Every 3 years Acknowledgement forms will be signed by students after corresponding content is provided.

N112/ N114 (1st semester) N109 (LVN Advanced Placement)

Nursing Student Handbook Acknowledgement and Consent HIPAA Education Verification Acknowledgement Confidentiality and Non-Disclosure Agreement Acknowledgment of Bloodborne Pathogen Training Release of Personal Information Waiver (Clinical Facilities)

N236 (3rd semester)

Statement Acknowledging Requirement to Report Suspected Abuse of Dependent Adults and Elders

Statement Acknowledging Requirement to Report Child Abuse

Revision 1/2020: Addition of College-wide waivers related to COVID-19: Permission to record – Online course recordings COVID-19 Acknowledgement of Risk and Consent Form for Students, Vendors, and Visitors

POLICY: Faculty Remediation Policy SECTION: Faculty APPROVAL DATE: Previously Approved, reviewed 3/19, reviewed 8/22 REVIEWED: Every 3 years

Any faculty needing remediation must complete plans developed by the director and the content expert per BRN guidelines which include providing direct patient care and demonstrating clinical competency.

FACULTY REMEDIATION GUIDELINES

PURPOSE

The purpose of these guidelines is to assist directors in assuring faculty members who will be teaching in new content/clinical areas [i.e., not already approved by the BRN] are clinical competent.

STATUTORY AUTHORITY

CCR Section 1420(d) defines clinical competency:

"Clinically competent" means that the nursing program faculty member possesses and exercises the degree of learning, skill, care and experience ordinarily possessed and exercised by staff level registered nurses of the nursing area to which the faculty member is assigned.

EXPLANATION OF REGULATIONS

Faculty members, for BRN purposes, include BRN approved instructors, assistant instructors, and clinical teaching assistants. To teach in a new nursing/clinical area, the faculty member must be able to function at the level of a staff RN in the designated nursing area (Geriatrics, Medical-Surgical, Mental Health/Psychiatric Nursing, Obstetrics, or Pediatrics).

A. Evaluation of Competency:

- Evidence of direct patient care experience as a registered nurse, direct patient care experience within the previous five (5) years in the nursing areas (geriatrics, medical-surgical, mental-health/psychiatric nursing, obstetrics, or pediatrics) to which the faculty is assigned, that can be met by either one of the following:
 - A. One (1) year's continuous, full-time or its equivalent experience providing direct patient care as a registered nurse in the designated nursing area; or
 - B. One (1) academic year or of registered nurse level clinical teaching experience or its equivalent in the designated nursing area that demonstrate clinical competency; and

- Sufficient evidence of continuing education classes that support the requested nursing area(s) taken in the last 5 years.
 - B. Plan to Gain Clinical Competency: Includes the following:
 - 1. Director, in consultation with the content expert and faculty member, formulates a written remediation plan that includes:
 - (a) Specific measurable theory and clinical objectives sufficient to validate competency in the new content/clinical areas;
 - (b) Specific plan of activities sufficient to validate theory/clinical competency;

2. The program director may elect to send the assigned NEC a copy of the proposed remediation plan for comment prior to implementation (Optional).

3. The faculty member meets with the agency's representative or program's content expert, or both, to implement the remediation plan.

4. Upon completion of the plan, the faculty member presents the director written verification from the preceptor or content expert, that the faculty member has demonstrated the competency level of a staff RN and met the theory and clinical objectives specified in the remediation plan.

DOCUMENTATION TO SUBMIT TO BRN:

- 1. Remediation plan;
- 2. Written letter of verification of competency;
- 3. Faculty appointment form for specified nursing area(s).

POLICY: Course Coordinator Responsibilities SECTION: Faculty APPROVAL DATE: 4/28/13 /revised Fall 2017, Fall 2018, reviewed 3/2019, reviewed 8/2022 REVIEWED: Every 3 years

Full time faculty function as a course coordinator if: s/he is lecturing for the course and is responsible for management of the details of the course and clinical requirements.

Preparation for the next semester during the current semester:

1. Schedule of classes: needs to be developed in coordination with the Department Chair. Responsibility is to check the schedule for accuracy related to total hours of the course taking into consideration holidays during the next semester, as well as days, times, and classrooms. The schedule needs to include any orientations, skills lab days, simulation, and testing. This requires coordinating times with the lab coordinator for the labs and simulations, if any, associated with the course.

2. Labs and simulations: determine inclusion of skills laboratory and simulation activities that related to the objectives specified by the course outline of record to be integrated into the course. The planned activities for labs and simulations will be arranged and scheduled with the lab coordinator.

3. Place your textbook order by the bookstore deadline.

4. Coordinate with the previous semester and the upcoming semester to provide for proper coordination of content, progression, and student success.

5. Make changes to your syllabus to be uploaded into Canvas. Consider the inclusion of handouts in the syllabus or on Canvas to minimize the need for reproductions.

6. Create clinical groups of students with the previous semester instructors. This must be done prior to the deadline for students' requirements so that the student may register in the correct sections. Be sure section numbers are associated with the courses and any other identifying information if known, such as facility, instructor, days, and times. (Deadline: may vary)

7. Send out "welcome" letter to the students with any pertinent information that they need to know prior to the semester starting regarding: clinical groups, first day information for lecture or clinical and any other requirements. (Deadline: may vary)

Just prior to the beginning of the semester:

1. The HPPS office will check requirements before they are allowed to register. The office will make sure everyone is registered. If students are not registered, they have failed to meet e deadline requirements and risk a Professional Development Plan (PDP), an advisory, or the loss of placement.

2. Course coordinator will meet with the adjuncts/clinical faculty prior to the beginning of the semester (and will document same in the appropriate binder located in the HPPS office).

3. Faculty/adjunct meetings--You are expected to review the following: syllabus, clinical rotations, objectives for the course, expectations of students for the semester, assignments, clinical evaluation process and tool, clinical arrangements. Adjuncts should be reminded to complete the interagency communication form (hospital entrance/exit form), and place in the appropriate binder in the HPPS office.

During the semester:

1. Document communications on the faculty/adjunct meeting form. Regular communication between lead and adjuncts is expected throughout the rotation. Any student-related issues that cannot be resolved between the lead faculty and adjunct, or issues of a serious nature should be directed to the assistant director or director. The assistant director should be involved in both issues requiring PDPs, and the writing thereof.

2. Provide guidance to adjuncts regarding evaluating students, PDPs, clinical evaluation tools, grading, etc.

4. Ensure that dosage and calculation tests are successfully completed by the stated deadline 5. Ensure that student issues are documented in student files per policy (FERPA)--(PDPs, unsafe practice, remediations, psychosocial concerns).

At the end of the semester:

1. Enter grades and attendance within 48 hours of the end of the semester

2. Provide the Assistant Director/Director with any information that should be placed on the student tracking form.

3. Ensure for all sections coordinated: Clinical evaluation tools, representative course assignments, positive attendance, exit/entrance forms are submitted by section to HPPS. Each section's folder of clinical paperwork will be reviewed for completeness before submission.

4. Ensure that all Advisories/ PDPs have been submitted to appropriate assistant director.

4. For any students who have failed, notify the appropriate assistant director and director and complete the student exit/re-entry form; collect the student badges.

POLICY: Clinical Faculty Responsibilities SECTION: Faculty APPROVAL DATE: 4/28/13, Updated Fall 2017, Fall 2018, reviewed 3/2019, reviewed 8/2020 REVIEWED: Every 3 years

Prior to semester:

- 1. Arrange for room for post-conference and orientation at facility
- 2. Meet with or call managers of units
- 3. Arrange for orientation for self/ students
 - Handouts to reprographics and/or email to students
 - Computer class if applicable for instructor
 - Contact hospital education/liaison if necessary
 - Hospital badges (ID or security), parking passes if applicable
- 4. Develop student rotation schedule in collaboration with lead instructor and *Return a copy to the HPPS Office*
- 5. Post schedule and objectives on each unit
- 6. Provide facility with course syllabus and copy of rotation schedule and any other paperwork, per hospital requirements (sometimes e-copies of course syllabi are acceptable).
- 7. Complete the Interagency Communication Form (entrance/exit form); entrance only

During the Semester:

- 1. Communicate regularly with course coordinator regarding student progress
- 2. Evaluate students and provide student with feedback
 - Grade paperwork including focus of care, etc. as per syllabus
 - Grade clinical experience paper as per syllabus/rubric
 - A formal mid-semester clinical evaluation is not required; however, ongoing student progress-related feedback must be a regular part of the communication with the coordinator
- 3. Document coaching provided to struggling students. Complete Professional Development Plan notices, advisories, remediation forms, etc.
- 4. Utilize assistant director, director as backup support to lead instructor.

End of the Semester

1. Clinical evaluation tools, representative course assignments, positive attendance, exit/entrance forms are submitted by section to HPPS. All not previously submitted advisories/PDPs/documented coaching records are submitted. Each section's folder of clinical paperwork will be reviewed for completeness before submission.

POLICY: Content Expert SECTION: Faculty APPROVAL DATE: Previously Approved, reviewed 3/19, reviewed 8/22 REVIEWED: Every 3 years

Content experts are designated for each of the specialty areas. There are two content experts for Medical Surgical. One is designated for the first year of the program and the other for the second year. Each must collaborate with the other to ensure the coordination of content throughout the program. Each content expert meets the requirement of having their master's degree in the designated nursing specialty area. Additionally, each has continuing education units in their area of specialty.

FACULTY CONTENT EXPERT

CCR section 1420(f): "Content expert" means an instructor who has the responsibility to review and monitor the program's entire curricular content for the designated nursing area of geriatrics, medical-surgical, mental health/psychiatric nursing, obstetrics, or pediatrics.

CCR section 1424(h): The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing required by section 1426(d) who will be the content expert in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.

CCR section 1425(f): A content expert shall be an Instructor and shall have:

- (1) a master's degree in the designated nursing area; or
- (2) a master's degree that is not in the designated nursing area and shall:

(A) Have completed thirty (30) hours of continuing education or two (2) semester units or three (3) quarter units of nursing education related to the designated nursing area; or have national certification in the designated nursing area from an accrediting organization, such as the American Nurses Credentialing Center (ANCC); and (B) have a minimum of two hundred forty (240) hours of clinical experience within the previous three (3) years in the designated nursing area; or have a minimum of one (1) academic year of registered nurse level clinical teaching experience in the designated nursing area within the previous five (5) years.

Explanation: Each school must have at least one content expert in each area of nursing; one Instructor may qualify for more than one area. The required areas are interpreted as geriatric, medical-surgical, mental health/psychiatric, obstetric, and pediatric nursing.

Methods to Qualify as a Content Expert

- **EITHER** Master's degree in the area.
- **OR** Master's degree in another area and additional theoretical and clinical experience as shown below.

THEORY -*EITHER* national certification <u>OR</u> course work in content area equivalent to 30 hours of continuing education or 2 semester units/3 quarter units, **AND**

CLINICAL - *EITHER*- clinical experience in content area to equal 30 eight-hour shifts within the last three years \underline{OR} - clinical experience teaching the content area (e.g., geriatrics) for a minimum of 2 semesters or 3 quarters.

POLICY: Faculty Mentoring of Full-time and Part-time Faculty
 SECTION: Faculty
 APPROVAL DATE: Previously Approved, reviewed 3/2019, revised 1/2022, reviewed 9/2022
 REVIEWED: Every 3 Years

Full-time mentoring: General orientation to the Nursing Department is provided by Assistant Director and Department Chair which includes a packet of information and includes resources for teaching. The lead faculty for the given class provides a course specific orientation. Access to a Canvas site with resources is provided. Faculty members are assigned by the nursing department chair to another faculty member that is familiar with the course they are teaching.

Part- time mentoring: General orientation to the Nursing Department is provided by an Assistant Director and the Department Chair which includes a packet of information and including resources for teaching. Course specific orientation is provided by the Course Coordinator. Faculty work closely with the lead faculty to learn their role via meetings, email, and phone calls. Assistant Directors provide informal mentoring to part-time faculty by assisting them in writing Performance Development Plans. Faculty members are provided an opportunity to shadow a full-time faculty or seasoned part-time faculty in the hospital.

All mentoring is provided with guiding principles of collegiality, respect, and support.

Revised 1/2022: Access to a Faculty Orientation Canvas site with resources is provided.

The following is a checklist that full and part time faculty and mentors sign. The form is placed in the faculty file.

COC Nursing Department New Employee Checklist

- Complete and return all COC paperwork to HR
- Obtain a COC email
- Attend COC orientation
- Complete annual physical, TB test, and submit all necessary documents to the Nursing Office (Fire card, BLS, ACLS, Proof of vaccinations)
- Email Chad Estrella (<u>Chad.Estrella@canyons.edu</u>) and request access to the following canvas shells:
 Nursing Faculty Resources, Nursing Instructor Orientation, COC Nursing Newsroom & Nursing Skills Lab
- Request a mentor from Department Chair
- Review all modules in the Nursing Instructor Orientation canvas site
- Attend nursing faculty retreat during flex week (the first week before the semester starts)

- Attend faculty skills lab day during flex week (the first week before the semester starts)
- Meet with Julie Lutes for orientation to OnBase (electronic timekeeping)
- Review job-specific union contract (COCFA/AFT contract)
- Review student handbook
- o Reach out to Department Chair for all assignments before the start of the semester
- o Meet with the lead instructor before your clinical assignment starts
- Obtain a COC parking sticker from Safety and Security
- Obtain keys for instruction
- Obtain business cards from Repro
- Attend the Synergy course
- Complete Sandbox Training in Canvas

I attest that all items have been reviewed/completed

 Signature of Employee	
Signature of Mentor	

POLICY: Faculty Orientation SECTION: Faculty APPROVAL DATE: Previously Approved/ revised 2014, reviewed 3/2019, reviewed 8/2022 REVIEWED: Every 3 years

New faculty will be oriented to the nursing department, college campus, and the clinical setting to ensure they are able to function in the role of the clinical faculty and or course coordinator.

Orientation and mentoring activities are available on campus, within the Nursing department and clinical facilities.

	Nursing Department	College Activities	Clinical Facilities
	Orientation Activities		
Full- time Faculty	General orientation to the Nursing Department by Assistant Director and Department Chair which includes Canvas access to the Faculty Resources. Course specific orientation by Course Coordinator.	Full-time faculty College orientation is provided by the Academic Senate President and Professional Development. Professional development opportunities provide practice in teaching such as courses by the Center for Excellence in Teaching and Learning.	Orientation is provided to each hospital through their own hospital orientation for policies and documentation systems.
Part- time Faculty	General orientation to the Nursing Department by Assistant Director and Department Chair which includes Canvas access to the Faculty Resources. Course specific orientation by Course Coordinator.	Orientation provided by Human Resources to some general procedures with updates every fall semester.	Orientation is provided to each hospital through their own hospital orientation to policies and documentation systems.

Nursing Department Mentoring	College Mentoring Activities
Activities	
Faculty members are assigned someone in the nursing department	College has a formal mentoring program for new faculty and they
that is familiar with the course they are teaching.	may be assigned someone within the nursing department or from another department. Tenure committee provides feedback to support the faculty as they learn their role and help them to improve. A remediation plan is offered for those seeking BRN approval in a specialty area.
Faculty work closely with their course	College mentoring program is
	available for part-time faculty. A remediation plan is offered for
calls.	those seeking BRN approval in a
Assistant directors provide informal mentoring to part-time faculty by assisting them in writing Advisories and Performance Development Plans.	specialty area.
Grant activities sometimes fund initial part-time faculty clinical teaching experiences, working with a	
	Activities Faculty members are assigned someone in the nursing department that is familiar with the course they are teaching. Faculty work closely with their course coordinator to learn their role via meetings, email, text and phone calls. Assistant directors provide informal mentoring to part-time faculty by assisting them in writing Advisories and Performance Development Plans. Grant activities sometimes fund initial part-time faculty clinical teaching

Faculty new to teaching are further encouraged utilizing resources provided by the Health Workforce Initiative for Strategies for Teaching Clinical Nursing. Other web site tutorials include www.wa-skills.com/proftech.html, www.RNteaching.org and www.RNteaching.org and

Updates to all nursing faculty members are provided through biannual department retreats. A Canvas website has been developed with resources for faculty to access, which includes the faculty handbook materials. The college provides ongoing professional development courses for faculty. Full time faculties are required to obtain 41 flex credits per year. An annual orientation and update for all part time faculty members prior to the fall semester.

POLICY: Online Student Progress Report –Sunsetted 2014 **SECTION:** Faculty **APPROVAL DATE:** Spring 2013 **REVIEWED:** Sunsetted

Academic progress and any other data pertinent to student success will be documented by part and full time faculty on the "Student Progress Report". The report should include lecture and clinical grades, strength of clinical performance, attendance, practicum completion, number of Performance Improvement Plan's (if any), and issues the instructor feels may impact a student's success (personal, D&C, attitude). AHO personnel will provide IT with a list of faculty with current teaching assignments.

The Student Progress Report is available via the Course Management System "Blackboard". Student names are populated during registration into expected graduation cohorts. For privacy, each cohort is listed as "not available" but can be accessed by those faculties with current teaching assignments. Directions for documentation are provided on the announcement page for each cohort.

POLICY: Full Time/Part Time Faculty **SECTION:** Faculty **APPROVAL DATE:** Previously Approved, reviewed 3/19, reviewed 8/2022 **REVIEWED:** Every 3 years

Each faculty member responsible for the consistent implementation of the program philosophy, objectives, policies, and curriculum. Part-time faculty share the same responsibility as full-time faculty.

References

Yocom, C. J. (1996). *Validation study: Functional abilities essential for nursing practice*. National Council of State Boards of Nursing.

POLICY: COVID-19 Vaccine Policy SECTION: Program APPROVAL DATE: 9/2022 REVIEWED: Every 3 years

Requirement of Proof of COVID Vaccine:

Nearly all nursing clinical facilities **require full COVID-19 vaccination** from all nursing students receiving clinical training at their sites. The nursing program does not guarantee clinical placement of students who do not meet the COVID vaccination requirement.