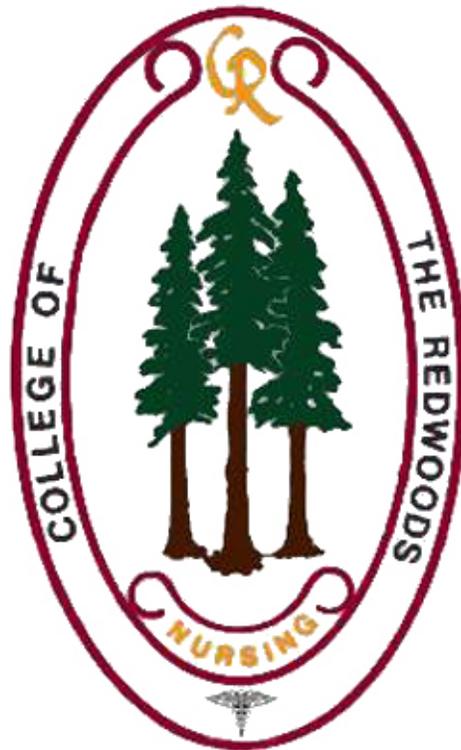




**Department of Nursing and Health
Occupations
Nursing Programs Handbook**



2020-2021

2020-2021 HANDBOOK

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PROGRAM FOUNDATION, ASSOCIATE DEGREE IN NURSING

Organizing Framework

College of the Redwoods Associate Degree Nursing Program has adopted an organizing framework based on QSEN (2007) supplemented by Massachusetts Nurse of the Future (2010) and NLN Education Competencies Model (2010). This curriculum supports the IOM Future of Nursing recommendations to educate nurses in new ways that better prepare them to meet the needs of the population.

There are 9 program outcomes as follows:

- Patient centered care
- Teamwork and collaboration
- Evidence based practice
- Quality improvement
- Safety
- Informatics
- Professionalism
- Leadership
- Clinical reasoning and decision making

The nursing programs adopted the conceptual approach as described by Giddens, Caputi and others. The conceptual approach requires several critical elements: 1) collaboration so that every element of the curriculum is planned and coordinated across the four semesters of the program. Concepts are introduced and reinforced to develop a deep understanding of principles and complexity, 2) engaged and active involvement – students are empowered and responsible for their own learning. This means a complete transformation from traditional methods of teaching/learning to thoughtfully planned activities that deepen understanding and develop clinical judgment, 3) application of concepts to clinical practice. This must occur both in the classroom and in clinical settings.

The RN program identified 43 curricular concepts. The concepts were chosen using Giddens Concepts for Nursing Practice (2017). For each concept, exemplars were chosen based on the most serious and commonly occurring health problems in the US and/or our community. Exemplars are the means by which concepts are studied and brought to life. The goal of the concept-based curriculum is a deep understanding of concepts applied across many disease states. Students develop conceptual understandings and connections that provide the tools to make adjustments in knowledge as new information arises. As a result, students learn how to learn and develop clinical judgment and reasoning skills. The organizing framework of the Nursing Program is integrated into the vision and mission of the program.

Nursing Program Vision

College of the Redwoods Nursing Program will prepare graduates who are caring, professional, lifelong learners that provide high quality, safe patient-centered care and leadership in the communities they serve.

Nursing Program Mission

College of the Redwoods Nursing Program strives to promote excellence in nursing education to build a strong nursing workforce that addresses the diverse healthcare needs of our community and region in collaboration with members of the interprofessional healthcare team. Our nursing program partners with students in the teaching/learning arena so they can achieve their career goals. We partner with the community and healthcare agencies of our region to promote the preparation of a nursing workforce that contributes to healthcare quality and safety through the use of evidence and technology.

Nursing Program Philosophy

The faculty believe that individuals are holistic, multi-system beings encompassing mind-body-spirit. A person is viewed as whole and complete, regardless of illness or disease. Each person(s) model of his or her own world is unique and influenced by a multiplicity of factors, including but not limited to culture, spiritual connection, past experiences, genetics, environment and growth and development. In the health care system, a patient can be defined as an individual, a family, a community, or a population. We believe that the healthcare environment encompasses any setting where people access and receive healthcare.

The faculty believe health is a dynamic condition based upon a person(s) ability to adapt and is not simply the absence of disease or infirmity. Each person(s) perception of health along the health-illness continuum is unique and personally described.

The faculty believe nursing is a dynamic, interactive relationship between the nurse and the patient. Nursing is both an art and a science, which integrates nursing knowledge with knowledge from other disciplines. We believe nursing empowers the individual to identify, develop, and mobilize his or her own strengths and resources to reach optimal health outcomes.

The faculty believe the responsibility for learning is shared by both the student and teacher. Students, like patients, vary in experiences, values, ethnic backgrounds, cultural beliefs, needs, goals, learning styles and have different potentials for growth and levels of motivation. We are committed to sensitive, flexible, caring and creative concept-based education while maintaining high standards of competence and accountability. The teacher role is to guide student discovery, positively facilitate student capabilities, and motivate growth and clinical reasoning and judgment abilities. This faculty-student partnership promotes the development of professional nurse leaders who communicate effectively and use credible evidence and

informatics leading to safe patient-centered care and client education enhanced by collaborative quality improvement processes. These professional nurse leaders, having an awareness of systems-based practice, provide care in conjunction with the interprofessional team. We believe the role of faculty is to instill the value of learning as an ongoing, lifelong process, which provides the student with not only professional competency but also personal transformation.

ASSOCIATE DEGREE IN NURSING PROGRAM OUTCOMES

1. Patient-Centered Care

The student will implement nursing care to patients, families and groups from diverse backgrounds in a variety of settings that is compassionate, age and culturally appropriate and based on a patient's preferences, values and needs.

2. Teamwork and Collaboration

The student will participate as a member of the interprofessional healthcare team in the provision of safe, quality patient-centered care.

3. Evidence Based Practice

The student will identify best current evidence from scientific and other credible sources as a basis for developing individualized patient-centered plan of care.

4. Quality Improvement

The student will participate in data collection processes that support established quality improvement initiatives.

5. Safety

The student will implement strategies that minimize risk and provide a safe environment for patients, self, and others.

6. Informatics

The student will use evidence-based information and patient care technology in the provision of safe, quality patient-centered care.

7. Professionalism

The student will practice nursing in a professional, ethical, and legal manner while providing patient-centered standard-based nursing care.

8. Leadership

The student will describe how leadership, management, and priority-setting skills are used to support safe, quality patient-centered care.

9. System Based Practice

The student will identify the relationship between microsystems and macrosystems in healthcare.

LICENSED VOCATIONL NURSING CONCEPTUAL FRAMEWORK

The Vocational Nursing Program at College of the Redwoods utilizes the plan that nursing courses progress along the continuum of simple to complex, normal to abnormal. The organizing principle is homeostasis as it relates to the study of representative client problems by addressing the various anatomical systems and specialty areas in nursing. The prerequisite nurse assistant or basic patient care course addresses core concepts related to the fundamentals of nursing, communication, asepsis, ethics, legalities, basic physical assessment and nursing and rehabilitation care of geriatric or long-term care residents.

During the first semester of the vocational nursing program students incorporate concepts and skills learned in the basic course into the vocational nursing program. Anatomical systems are introduced with simple anatomy, physiology, microbiology and related medical terminology. Nutrition and pharmacology are incorporated into the program and there is an expansion of physical and psychosocial assessment concepts and skills. Simple abnormalities and related nursing activities are incorporated.

During the second and third semester of the program students incorporate all previously learned concepts and skills and utilize new concepts of complex pathophysiology to the care of clients with acute illnesses and long-term illnesses. Core concepts of the nursing process, the teaching process and preventive nursing care measures are emphasized. Leadership and supervision concepts are addressed and practiced in either the long-term care facility or the acute care facility.

Various nursing and psychosocial theories are utilized in the development of knowledge and skills in the vocational nursing program. Paramount framework concepts include Maslow's Hierarchy of Human Needs, Erickson's Psychosocial Theory of Personality Development, Kubler-Ross' Stages of Grief, Orem's Behavioral Nursing Theory, and Roger's Systems-Oriented Nursing Theory. These theories are utilized throughout the program.

LICENSED VOCATIONL NURSING PROGRAM OUTCOMES

1. Incorporate principles from the nursing, behavioral and physical sciences in the promotion of competent care to clients of different ages with different biopsychosocial needs.
2. Apply knowledge of specific disease conditions in the prevention, treatment, nursing care and rehabilitation of all clients.
3. Differentiate the role of the Licensed Vocational Nurse in the healthcare team.
4. Conform to professional standards incorporating legal and ethical responsibilities of the LVN.
5. Utilize critical thinking in assessment, planning, intervention, and evaluation of client care, and in the development and implementation of a teaching plan within the scope of LVN practice.

LICENSED VOCATIONAL NURSING TERMINAL OBJECTIVES

The College of the Redwoods graduate vocational nurse will:

- Graduate with the knowledge to successfully pass the NCLEX-PN licensure examination.
- Comply with the scope of practice as outlined in the Vocational Nursing Practice Act, Division 2, Chapter 6.5 of the Business and Professions Code.
- Specifically, upon completion of all required coursework the College of the Redwoods graduate vocational nurse will:
 - Incorporate principles from nursing, behavioral and physical sciences in the provision of competent care to clients of different ages with different biopsychosocial needs.
 - Apply knowledge of specific disease conditions in the prevention, treatment, nursing care and rehabilitation of all clients.
 - Differentiate the role of the Licensed Vocational Nurse in the health care team.
 - Conform to professional standards incorporating legal and ethical responsibilities of the LVN.
 - Utilize critical thinking in assessment, planning, intervention and evaluation of client care and in the development and implementation of a teaching plan within the scope of LVN practice.
 - Organize, prioritize and delegate care for a group of clients communicating effectively with members of the health care team.

NURSING CURRICULUM REQUIREMENTS, ALL PROGRAMS

The nursing curricula are consistent with the requirements of the College, the California State Board of Registered Nursing and the California Board of Vocational Nurses and Psychiatric Technicians.

All nursing courses, regardless of program, must be taken in sequence, and, only students admitted to nursing programs can take nursing courses. Students are responsible for completing the curriculum as published in the College of the Redwoods Catalog. In addition, students are responsible for completing all course requirements including prerequisite courses.

Students are responsible for checking the College of the Redwoods Catalog for academic prerequisites prior to registering for each nursing class. Students missing required prerequisites are ineligible to enroll in the next semester's sequence of nursing classes and will be dismissed from the program. Courses listed in the College of the Redwoods Catalog to satisfy General Education and additional requirements may be taken at any time prior to or after admission to the program.

Students making any deviation from the curriculum plan should consult with their academic advisor or the Director of Nursing and Health Occupations. Students not completing course prerequisites will not be eligible to continue in the program until the course requirements and prerequisites are met.

All courses in a nursing program must be completed and a degree or certificate awarded for the student to be eligible for the licensing exam as a graduate of the program. All degree and certificate course requirements must be completed with a grade of C or higher to satisfy graduation requirements.

All students must see an advisor each semester to develop and update their education plans to ensure being on track for graduation. All degree/certificate courses must be complete to graduate.

All students must file a petition to graduate according to the published College timeline the last semester of their program. Failure to do so results in the inability to graduate, which results in the inability to take the licensing exam until the degree/certificate is awarded.

*Please see College of the Redwoods Catalog for program curriculum requirements.

COLLEGE OF THE REDWOODS STUDENT CODE OF CONDUCT

Nursing students must comply with all nursing programs policies as stated in this Handbook as well as the College of the Redwoods Student Code of Conduct (AP 5500) contained in the College Catalog. It is critical that you review this Handbook and College of the Redwoods Code of Conduct, as you will be held to these stated standards.

From the College of the Redwoods Student Code of Conduct:

Violations:

Students are expected to demonstrate qualities of morality, integrity, honesty, civility, honor, and respect. Students are required to engage in responsible social conduct that reflects credit upon the CR Community and to model good citizenship in any community. Disciplinary action may be initiated by the College and sanctions imposed against any student or student organization found responsible of committing, attempting to commit, or intentionally assisting in the commission of any of the ... prohibited forms of conduct.

Removal from Class:

Any faculty member may, for good cause, order a student removed from his or her class for the day of the removal and the next class meeting (Education Code Section 76032). The faculty member shall immediately report the removal to the Division Representative and the Chief Student Services Officer (CSSO) or designee. The CSSO or designee shall arrange for a conference between the student and the faculty member regarding the removal. If the faculty member or the student requests, the CSSO or designee shall attend the conference. The student shall not be returned to the class during the period of the removal without the concurrence of the faculty member. Nothing herein will prevent the CSSO or designee from recommending further disciplinary procedures in accordance with these procedures based on the facts which led to the removal.

NATIONAL STUDENT NURSES' ASSOCIATION, INC.
CODE OF ACADEMIC AND CLINICAL CONDUCT

Preamble

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments. The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust with which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

A Code for Nursing Students

As students are involved in the clinical and academic environments, we believe that ethical principles are a necessary guide to professional development. Therefore, within these environments we:

1. Advocate for the rights of all clients.
2. Maintain client confidentiality.
3. Take appropriate action to ensure the safety of clients, self, and others.
4. Provide care for the client in a timely, compassionate and professional manner.
5. Communicate client care in a truthful, timely and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
7. Promote excellence in nursing by encouraging lifelong learning and professional development.
8. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
9. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff, and peers to mentor nursing students.
12. Refrain from performing any technique or procedure for which the student has not been adequately trained.
13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
14. Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorization is obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain an optimal level of personal health.
17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

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LIVESCAN AND CRIMINAL BACKGROUND CHECK

Introduction

Nursing students must have a clear or approved LiveScan and/or Criminal Background Check to participate in assigned clinical facilities. These screenings are required after the student has accepted placement in a nursing program. The initial screening(s) satisfy the requirement during continuous enrollment in the program. Should the educational process be interrupted, a new/updated LiveScan and or Criminal Background check will be required.

Paramedic/LVN-RN Career Mobility (Bridge) students must complete a Criminal Background Check and LiveScan with the Humboldt County Department of Health and Human Services (DHHS) unless directed otherwise.

Policy

1. Students are required to obtain a clear or approved Criminal Background Check and/or LiveScan according to set deadlines.
2. Directions are provided to the student regarding payment and process. Students pay for the Criminal Background Check and/or LiveScan.
3. Students will be given a deadline date by which the Criminal Background Check and/or LiveScan must be completed.
4. Students who do not begin the screening process by the deadline date will be withdrawn from the program and must reapply. Students must have a “clear” (negative background) or “approved” (positive background) status by the given date. Students who are not clear or approved by the given date will be withdrawn from the program and must reapply. Students must provide consent to allow the school and clinical facilities, as necessary, access to the Criminal Background Check and/or LiveScan results. The consent form is housed in Complio.
5. Criminal Background Check and/or LiveScan will include the following, at minimum:
 - Seven year back history
 - Address verification
 - Sex offender search
 - Two names (current legal and one other name)
 - All counties
 - Office of Inspection General (OIG) search
 - Social Security Number verification
6. Students who have felony and/or related misdemeanor conviction on their record(s) may be withdrawn from the program. Convictions will be evaluated on a case-by-case basis.
7. Students withdrawn from the program because of their criminal convictions may reapply to the program when it has been five (5) years since an offense, or when they receive a clearance or certificate of rehabilitation from the court. However, even with the clearance or certificate,

students may still be denied access by clinical facilities, based on the nature of the convictions even though the convictions may have occurred more than five (5) years ago. Clinical rotations are a mandatory part of nursing education. If a student cannot participate in clinical, he/she/they cannot complete the nursing program and, therefore, will be denied enrollment into the program. Each clinical facility has different requirements. The requirements of the clinical facilities are final.

8. Students on probation or parole or who have outstanding bench warrants or any unpaid citations, restitution, etc., will be denied enrollment and must reapply when all outstanding issues are resolved.

9. Students arrested while in any program may be dismissed from the respective program. Dismissal is decided on a case-by-case basis.

10. The following convictions, even if they have been dismissed, will likely prevent the student from being able to participate in clinical rotations. This list is not exhaustive.

- Murder
- Assault/battery
- Sexual offenses/sexual assault/abuse
- Certain drug or drug related offenses
- Alcohol-related offenses (without certificate of rehabilitation)
- Other felonies involving weapons and/or violent crimes
- Class B and Class A misdemeanor theft
- Felony theft
- Fraud

11. Any future applicable clinical agency and/or BRN and/or BVNPT guidelines and requirements will be incorporated into this policy as they become available.

12. Entrance to and completion of a nursing program does not guarantee eligibility to take the NCLEX examination or obtain a nursing license.

DRUG SCREEN

The majority of clinical agencies require drug screening for placement. Directions will be provided to the student about how to apply and pay for the 10-panel drug screen. Students will be given a deadline date by which the drug screen must be completed. In addition, some agency requirements mandate additional drug screens according to agency policy. Positive results or refusal to submit to testing will result in program termination.

Students taking medications prescribed by a healthcare provider that will appear on the drug screen are required to provide proof of the prescription(s) to the Health Occupations Dept.

STUDENT HEALTH & PHYSICAL EXAMINATION

Students are required to have and submit a complete health examination prior to starting the ADN or LVN program to ensure that they are in good health and are able to perform nursing activities. The examination must be done by a Physician, Physician's Assistant or Nurse Practitioner, and, the examiner must utilize the correct Department of Nursing and Health Occupations forms that are provided to each student for the examination. In order to remain in the program, the examination must be completed by the date provided. If a student has any interruption, more than one semester in the educational process, the student must have and submit a complete health examination prior to returning.

Example: The student withdraws from a nursing course, sits out one semester, if no new health issues, they may use their original health exam.

All students are required to have evidence of specific immunizations and/or titer levels as proof of immunity. Students must sign a "Release of Medical Information" form to authorize the Health Occupations office to release immunization and physical exam information to clinical agencies upon request.

ACTIVITY RESTRICTION

Following any medically-related activity restriction (for example broken bone, skin lesions, chest pain, contagious disease, pregnancy, vaginal/cesarean birth, injury, back injury, any type of surgery), the student is required to report the condition and any restrictions to the faculty as soon as medically possible. Students are to submit a statement from the healthcare provider to the course-specific lead faculty and Director of Nursing listing limitations/restrictions. Once the activity restrictions are no longer in effect the student obtains a statement from the healthcare provider indicating that he/she/they may again participate in an unrestricted manner essential to nursing practice. This statement must be on file prior to student having client contact. Failure to disclose will be treated as a code of conduct violation and evaluated on a case by case basis.

Medically-related activity restrictions that interfere with a student's ability to provide direct patient care may jeopardize successful completion of the course.

ADA COMPLIANCE STATEMENT

In compliance with the 1990 Americans with Disabilities Act (ADA), the Department of Nursing and Health Occupations does not discriminate against individuals with disabilities. Disability is defined in the Act as a (1) physical or mental impairment that substantially limits one or more of the major life activities of such individuals; (2) a record of such impairment; or (3) being regarded as having such an impairment.

For the purposes of nursing program compliance, an individual with a disability is one who, with or without reasonable accommodation or modification, meets the essential requirements for participation in the program.

The faculty endorses the recommendations of the Southern Council on Collegiate Education for Nursing <http://www.sreb.org/publication/americans-disabilities-act> and has adopted specific Physical Requirement Standards for nursing students.

Note that admission to the program is not based on the physical requirements. Rather, the standards are used to assist each student in determining whether accommodations or modifications are necessary. The Physical Requirement Standards provide objective measures upon which students and faculty base informed decisions regarding whether students are qualified to meet requirements. Every applicant and student receive a copy of the Physical Requirement Standards.

If a student has a physical, psychiatric/emotional, medical, or learning disability that may impact ability to complete nursing program course work, the student is encouraged to contact the staff in Disabled Student Programs and Services (DSPS) in the Student Services Building. DSPS staff will review concerns and determine with the student and nursing faculty, what accommodations are necessary and appropriate. All information and documentation are confidential.

PHYSICAL REQUIREMENT STANDARDS

The following physical requirement standards will be evaluated during your physical exam. Additionally, if at any time throughout a Nursing Program you are unable to meet any of these requirements it is your responsibility to be seen by your health care provider for re-evaluation. All changes in health status and ability to continue to meet the physical requirement standards of a program must be documented by the provider and submitted to the Director of Nursing and Health Occupations.

STANDING/WALKING – 75 – 95% of workday spent standing/walking on carpet, tile, linoleum, asphalt and cement while providing and managing client care, gathering client supplies and medications, obtaining and returning equipment. Approximate distance = 3 to 5 miles.

SITTING – 5 – 25% of workday spent sitting while communicating with and teaching clients, operating computers, answering the telephone, writing reports, documenting, calling doctors, and scheduling appointments.

LIFTING – 10 – 15% of workday spent floor to knee, knee to waist, waist to waist, and waist to shoulder level lifting while handling supplies (5 lbs. – 20 to 30 times per shift), using trays (5 – 10 lbs.), and assisting with positioning patients in bed/moving patients on and off gurneys and exam tables (average weight 200 lbs.).

CARRYING – 65% of workday spent carrying items at waist level.

PUSHING/PULLING – 40% of workday spent pushing/pulling, using carts, utilizing crash carts, opening and closing doors, pushing/pulling beds, gurneys, and wheelchairs, and moving equipment and furniture.

BALANCING and CLIMBING – 15 – 25% of workday spent climbing stairs going to and from other departments, offices, and homes.

STOOPING/KNEELING – 10% spent stooping/kneeling while retrieving supplies from medication carts, bedside stands, bathrooms, storerooms, etc.

BENDING – 20% of workday spent bending at the waist while performing patient assessments and treatments, gathering supplies, assisting patients with positioning, adjusting patient beds and exam tables, bathing patients, and emptying drainage apparatus.

CROUCHING/CRAWLING – 2% retrieving patient belongings.

REACHING/STRETCHING – 35% of workday spent reaching/stretching administering and monitoring IV therapy, gathering supplies, operating computers, disposing of equipment and linens, assisting with patient positioning, connecting equipment.

MANIPULATING – 90% hand-wrist movement, hand-eye coordination, simple firm grasping required and 90% fine and gross motor dexterity required to calibrate and use equipment and perform CPR.

FEELING – 90% normal tactile feeling required to complete physical assessment including palpation and notation of skin temperature.

TWISTING – 15% of workday spent twisting at the waist while gathering supplies and equipment, administering care, and operating equipment.

COMMUNICTING IN VERBAL AND WRITTEN FORM – 95% ability to communicate nursing actions, interpret patient responses, initiate health teaching, document and understand health care activities, and interact with patients, staff, faculty and peers.

HEARING – 95% ability to hear and correctly interpret what is heard; auscultation, physician orders whether verbal or over the telephone, patient reports and cries for help, fire and equipment alarms, etc.

SEEING – 95% acute visual skills necessary to detect signs and symptoms, coloring and body language of patients, color of wounds and drainage, and possible infections anywhere. Interpret written word accurately, read characters and identify colors in the patient's record and on the computer screen.

PREGNANCY

Nursing students who are or become pregnant must have medical approval to continue in the nursing program. Nursing students must also accept full responsibility for any risks to self and fetus associated with any class or clinical assignment. In each case of pregnancy, the student is required to inform the lead faculty and clinical instructor per semester of the pregnancy and to file the *Physician's Clearance during Pregnancy* form with the Department of Nursing and Health Occupations Office. The student is required to notify the lead faculty member for any changes in pregnancy status. Following delivery, written approval from the provider for unrestricted activity (use Physician Clearance form) in clinical nursing practice must be submitted prior to return to class and clinical.

Failure to disclose is a code of conduct violation and will be evaluated on a case by case basis.

PROOF OF IMMUNITY

Your physical exam requires you to provide proof of immunity to the following communicable diseases by either immunization or blood titers: MMR – measles, mumps, rubella; Tdap – diphtheria, tetanus, pertussis; Varicella – chickenpox; and Hepatitis B.

Flu immunization is required every fall semester. Students who decline will be required to sign an agency document statement and to follow their guidelines.

Following the first 2-step TB test; "T-Spot" or QuantiFERON TB Gold In-Tube test, a negative PPD must be documented annually. History of a positive PPD, "T-Spot" or QuantiFERON requires the student to provide negative status via chest x-ray. The student obtains a requisition for a chest x-ray from their healthcare provider.

Requirements are based on Centers for Disease Control (CDC) recommendations for health care workers <https://www.cdc.gov/vaccines/adults/rec-vac/hcw.html> and by agreement with our clinical partners.

COVID SCREENING and TESTING

All students will be screened for COVID using a standardized questionnaire prior to entering the skills lab or clinical setting. A non-invasive temperature reading is obtained at the beginning and sometimes during the day depending on the length of the clinical shift.

It is recommended that students self-assess for COVID symptoms as well as monitor their oral temperatures prior to attending a skills lab and or clinical shift. If symptoms and/or a fever ($\geq 100.4^{\circ}\text{F}$) are identified the student is directed off campus and to their healthcare provider or student health center (IPA) for further evaluation. A negative COVID test will be required for the student to return to any school or clinical activity. The results must contain the students name or shared ID number and emailed to the lead faculty and Nursing Director. A positive

COVID test result does not automatically disqualify a student once recovered from participating in their nursing course. The student meets with the lead faculty and Director to discuss their options. Ultimately a minimum course grade of 75% and “Met Ratings” on the summative clinical evaluation are needed in order to progress to the next level or graduate.

If a student contracts COVID-19, they are to contact the lead faculty and or Director of Nursing immediately. Depending on contact tracing classmates may have to self-isolate for fourteen days.

MALPRACTICE INSURANCE

College of the Redwoods provides malpractice insurance in the event of student liability at scheduled clinical or College laboratory sessions. Individual coverage is recommended for all non-program activities related to volunteerism or employment.

CPR

A valid/current CPR certificate is required to participate in the clinical portion of the program. Certification from the American Heart Association BLS or American Red Cross CPR for the Professional Rescuer or CPR Pro for the Professional Rescuer are accepted. Certification must be valid for two years. It is the student’s responsibility to renew and submit to COMPLIO before the card expires. Students with an expired CPR card may not attend clinical experiences regardless of clinical setting.

CONFIDENTIALITY

Nursing students, as members of the nursing profession, must demonstrate respect for the privacy and confidentiality of others. As the client, often in a vulnerable state, encounters the nurse, the nurse has utmost responsibility to respect the client's right to determine their own self-disclosure. Based upon the belief in the dignity of the human being, each nursing faculty member and student shall maintain the privacy and confidentiality for all patient encounters or patient-care situations discussed in private for learning purposes during post-conference.

Students shouldn’t print or photograph any portion of the patient’s chart, including the Medication Administration Record, even if the name is removed.

Students who breach patient confidentiality will be liable for damages resulting from the breach and face possible termination from the program. Each student is required to sign and submit the “Student Acknowledgement of Patient Confidentiality” form upon entry to the nursing program. This signed form will be kept as part of the student file in Complio.

ADMISSION, COURSE PROGRESSION, WITHDRAWAL AND DISMISSAL

Student movement through the nursing programs is governed by policies that address admission, course progression, withdrawal and dismissal. Awareness of these policies is critical to successful program completion.

Admission:

Forty-four (44) students are admitted to the first semester of the RN program, Thirty (30) LVN students on both the Eureka and Del Norte campuses are accepted into each program and ten (10) paramedic/LVN students move forward on the Career Mobility Track. As more eligible student applications are received than can be accommodated, the Department of Nursing and Health Occupations maintains a program waitlist for eligible LVN, Paramedic/LVN-RN and RN applicants. All program waitlists change throughout the academic year and over summer. Because of this, a student on a program waitlist, is provided with a new waitlist number in early Fall each year. Please be aware that our application/waitlist process for all programs is as follows (subject to change):

ADMISSION TIMELINE/PROCEDURE (includes all programs)

December	On Dec 1 st program applications become available online through the CR website under "Divisions and Departments". Submission dates announced. LVN program application occurs every other year in odd numbered years.
February	Program applications accepted during designated dates. Applications received before or after the application period are ineligible. Applications are not held over from year to year.
February - April	Application review period Admissions Committee review of candidate eligibility.
March	RN Only: TEAS exam provided to eligible applicants.
April	Following random ordering all newly eligible applicants are notified of their placement onto the program waitlist. The initial wait list number is emailed to the applicant. Incoming first semester students are sent "Seat Acceptance" letters. No return email or USPS response, or late form, etc. is treated the same as if the applicant declined the seat offer.
May	Waitlist numbers are updated and emailed to students who responded to the "Waitlist Continuation" letter.

	Mandatory incoming student orientation takes place during finals week. Condensed make-up orientations are provided for late entry students.
September	Waitlisted students (LVN, Paramedic/LVN to RN, RN) are emailed a “Waitlist Continuation” letter. A Decline/no reply/late reply = removal from waitlist (student accountability is expected regarding all deadlines). Waitlist numbers are then updated to reflect student responses and a new waitlist number provided.
October	Waitlist numbers are updated and emailed to students who responded to the “Waitlist Continuation” letter.
November	Mandatory orientation held for incoming Paramedic/LVN to RN students.
The Lottery Process	Each spring, all newly eligible applicants are randomly ordered, assigned a number and added to the current program waitlist. Once a waitlist number is assigned the student remains “in line” for admission. The time from acceptance to admission is approximately two years and depends on seat availability.

Students must keep the Health Occupations office apprised of **any change** in contact information and/or plans to attend. Please be aware that if the Health Occupations Office does not have a **current mailing address, current email address and current phone number** that you may miss **critical** information from us regarding seat availability and other items. *We cannot provide you with new and updated enrollment information if we do not have your current contact information.* Please note that any change in your mailing address, your email address and/or your phone number must be made through the Health Occupations Office as well as through Web Advisor. Students are reminded to check their junk or spam email for correspondence from the Health Occupations Dept. as it may be mistaken by the internet server as an unsolicited message.

Additional Seat Availability, Paramedic/LVN-RN Career Mobility Track:

Each spring, a specific number of seats are assigned to Paramedic/LVN-RN students. Ten (10) students on both the Eureka and Del Norte Campuses are admitted.

- Any remaining seats are offered to returning NURS 3 students first.
- Any unfilled seats are then offered to students on the Paramedic/LVN-RN Program waitlist who were not assigned seats.

ADMISSION, COURSE PROGRESSION, WITHDRAWAL AND DISMISSAL (cont'd)

Declining a Seat Prior to Initial Enrollment in RN, Paramedic/LVN-RN & LVN Programs

- “Seat Acceptance” letters are emailed to eligible students on program waitlists each spring (every other spring for LVN program).
- When a seat is declined the first time, a deferral is granted and the student is grouped with the next incoming cohort.
- Should a student decline a seat for a second time, they are removed from the program waitlist and must reapply to the program during the next application period.
- Timeframe does not apply to students who are offered a seat close to the beginning of class (2 weeks or less). These students will have one additional opportunity to decline.

Example:

1. Student is offered a seat > student declines > student grouped with the next incoming cohort > student offered seat a second time > student declines > student removed from waitlist = student must reapply to program

2. Student (includes returning to NURS 1, NURS 20, and LVN 121) is offered a seat close to when class begins (two weeks or less) > student declines > student grouped with the next incoming cohort > student offered seat a second time > student declines > student grouped with the next incoming cohort > student offered a seat a third time > student declines > student removed from waitlist = student must reapply to program

Late or No Response to Waitlist Number Updates

The following steps are taken when a student does not respond to the emailed “Waitlist Continuation” letter or submits their response after the due date. The student is removed from the waitlist and must reapply during the next application period. (Student accountability is expected regarding all deadlines).

Course Progression

To demonstrate mastery of course objectives, students will accomplish a variety of assignments. Each nursing professor develops course assignments and posts the grade distribution for course work including examinations and written assignments. Explanations and grading criteria will be listed in each course syllabus. In combined lecture and clinical courses, there are three components that determine the final course grade.

Clinical Evaluation

The clinical portion of the class is evaluated on a pass/fail basis. The clinical faculty determines whether course clinical competencies are “Met/Not Met”. To pass the clinical portion students must meet all clinical objectives. Students who do not receive all “MET” ratings on summative clinical evaluations are given a grade of “F” for the course despite current nursing theory grade.

ADMISSION, COURSE PROGRESSION, WITHDRAWAL AND DISMISSAL (cont'd)

Formative and Summative Evaluations: Examinations

Quizzes, examinations, and other assignments allow both student and faculty to evaluate learning and to assist nursing students in preparing for NCLEX. Quizzes (formative evaluation) cover a relatively small amount of material and are not cumulative. The midterm (summative evaluation) assesses student's knowledge of the first half of the term. The final exam (summative evaluation) assesses the student's knowledge of the second half of the term.

Preliminary and Cumulative (Final) Grade

There are two components to the determination of a final course grade: Preliminary Academic Grade and Cumulative Academic Course Grade. The Preliminary Academic Grade includes the quiz average (with the lowest quiz score dropped), midterm, ATI proctored examination(s), and final examination. The computation of these test scores is the Preliminary Academic Grade. The student must have a 75% Preliminary Academic Grade in order to pass the course and to progress within the nursing program. The Cumulative Academic Course Grade will include the Portfolio Assignment and or Critical Thinking Assignment.

Course Assignments and Grading

To demonstrate mastery of course objectives, students will accomplish a variety of assignments.

<u>Assignments</u>	<u>% Of Course Grade</u>	
Formative		
Quizzes	25-30%	
ATI Proctored Exams	5-10%	
Summative		
Midterm Exam	25-30%	
Final Exam	25-30%	
Portfolio (RN Program)	5-15%	
Critical Thinking Assignment (CTA)	5-10%	(Licensed Vocational Nursing Program)

Each course syllabus delineates course evaluation criteria and grading scale. Although faculty may alert students regarding marginal or failing grades, the primary responsibility for tracking success in a course (written work, exams and clinical evaluations) remains with the student. Course faculty are available by appointment to review student grades and status.

Program Dismissal

Progression in either nursing program is often interrupted by the following situations.

- The 75% criteria to pass a nursing course not met; requirements for progression are unfulfilled; student withdrawal. Course failure applies to all courses: NURS 20, NURS 1-4, LVN 110A, LVN 110B, LVN 118, and LVN 121-123. Students in this category may be eligible for readmission into any of the Health Occupations programs.

ADMISSION, COURSE PROGRESSION, WITHDRAWAL AND DISMISSAL (cont'd)

- b. Demonstration of unethical, unprofessional/unsafe behavior as determined by the Nursing Faculty (see Safe Practice Policy in this handbook and NSNA Code of Ethics). Students in this category do not qualify for readmission and cannot be admitted or readmitted into any Health Occupations program.
- c. Demonstration of thought processes and decision-making ability that is impaired by excessive stress, poor mental or physical health or the use of drugs or alcohol. In most cases, students exhibiting such behaviors will not be allowed to continue in the program. Students in this category can be readmitted at a later time. Note: Faculty have the responsibility and the authority to take immediate corrective action with regard to the student's conduct and performance in the clinical setting.

Recognizing that these are illnesses and should be treated as such, it is the student's responsibility to voluntarily seek diagnosis and treatment. Instructors and academic counselors will assist in making appropriate referrals.

- d. Demonstration of non-compliance with college or program policies. See the College of the Redwoods Student Code of Conduct and program policies listed in this Handbook. Students in this category do not qualify for readmission and cannot be admitted or readmitted into any Health Occupations program.

Program Withdrawal

A student may choose to withdraw from a course at any time. College policy related to timing of the withdrawal determines the type of grade and or refund awarded. Please see College Catalog/Calendar for specifics regarding the "Last Date to Drop and Receive a Refund or Drop without a "W".

Readmission: NURS 1, NURS 20, LVN 121

- The student who withdraws or is subject to a qualifying dismissal and wishes to return to the program will be placed at the bottom of the current program waitlist, prior to the addition of new applicants for the next academic year.
- If a seat is offered to a returning student and the seat is declined, the student must reapply to the program.

Example:

Student enrolled in first course of program > student does not meet course requirements or withdraws > student placed on program waitlist > student is offered a seat > student declines > student removed from waitlist = student must reapply.

*does not apply to an offer given close to beginning of class (two weeks or less). See "Declining a Seat Prior to Initial Enrollment in RN, Paramedic/LVN-RN & LVN Programs".

ADMISSION, COURSE PROGRESSION, WITHDRAWAL AND DISMISSAL (cont'd)

NURS 2/LVN 122, NURS 3/LVN 123, NURS 4

- The student who withdraws or is subject to a qualifying dismissal will be placed on a waitlist for returning students.
- When seats are assigned, if there are more returning students than seats, the students waiting to return will be subject to a lottery.
- If a seat is offered to a returning student and the seat is declined, or the student does not return the "Seat Acceptance Letter" by the stated deadline, the student will be removed from the returning student waitlist.
- If a return to the program is desired after removal from the waitlist, the student must make an appointment with the Director of Nursing and Health Occupations to discuss the return.
- The Admission, Progression and Graduation Committee determines return eligibility and placement on a case-by-case basis.

Example:

Student enrolled in subsequent course > student does not meet course requirements or withdraws > student placed on course waitlist > student is offered a seat > student declines > student removed from waitlist = case heard if return is desired.

LVN110A

- Student fails LVN 110A but passes LVN 121. Must pass LVN110A to progress to LVN122.
- Once qualified, the student will be placed on the course waitlist for LVN122.
- A lottery is used when there are more returning students than seats.
- If a seat is offered to a returning student and the seat is declined, or the student does not return the "Seat Acceptance Letter" by the stated deadline, the student will be removed from the waitlist.
- If a return to program is desired after removal from the waitlist, an appointment is made with the Director of Nursing and Health Occupations to discuss return.
- The Admission, Progression and Graduation Committee determines return eligibility and placement on a case-by-case basis.

LVN110B

- Student fails LVN 110B but passes LVN 122. Must pass LVN 110B to qualify for LVN 123.
- Once qualified, the student will be placed on the course waitlist for LVN123.
- A lottery is used when there are more returning students than seats.
- If a seat is offered to a returning student and the seat is declined, or the student does not return the "Seat Acceptance Letter" by the stated deadline, the student will be removed from the waitlist.
- If a return to program is desired after removal from the waitlist, an appointment is made with the Director of Nursing and Health Occupations to discuss return.
- The Admission, Progression and Graduation Committee determines return eligibility and placement on a case-by-case basis.

ADMISSION, COURSE PROGRESSION, WITHDRAWAL AND DISMISSAL (cont'd)

Example:

Student enrolled in LVN 110A/110B > student does not meet course requirements or withdraws > student subsequently passes the failed course > student placed on course waitlist > student is offered a seat > student declines > student removed from waitlist = case heard if return is desired.

*Students who were not successful in LVN 110A or LVN 110B at College of the Redwoods may take a pharmacology course through another school to meet policy guidelines and continue progression in the LVN program. The course must provide the same number of college credits, course description and learning outcomes as the CR course. The course must also be approved by faculty teaching LVN 110A/LVN 110B prior to enrolling. Once complete, CR Petition for Course Substitution forms must be initiated by the student, approved by faculty and Director and submitted to Admissions and Records.

Exit Interviews

Students who withdraw or who are dismissed from the program are encouraged to schedule an exit interview with the Director of Nursing and Health Occupations to discuss strategies for success and preparation for readmission.

Enrollment between the RN, Paramedic/LVN-RN Career Mobility (Bridge) and LVN Programs

LVN Program:

Students are allowed two attempts in the LVN program before the opportunity to reenter is exhausted.

Should entry into the RN program be desired and the student is qualified to do so, the student must submit an application; the student is subject to all admission requirements and waitlist procedures.

Examples:

Unsuccessful first LVN program attempt > return to LVN program following readmission policy OR submit an application to the RN program once requirements are met.

Unsuccessful second LVN program attempt > no opportunity to reenter the LVN program. Submit an application to the RN program once requirements are met.

RN Program:

Students are allowed two attempts in the RN program before the opportunity to reenter is exhausted.

Should entry into the LVN program be desired, the student must submit an application; the student is subject to all admission requirements and waitlist procedures.

ADMISSION, COURSE PROGRESSION, WITHDRAWAL AND DISMISSAL (cont'd)

Examples:

Unsuccessful first RN program attempt > return to program following readmission policy OR submit an application to the LVN program once requirements are met.

Unsuccessful second RN program attempt > no opportunity to reenter the RN program without Paramedic or LVN licensure and successful completion of NURS 20.

Paramedic/LVN – RN Career Mobility Track (“Bridge”)

NURS 20 the Transition Course must be successfully completed to enter the third semester of the RN program (NURS 3). Students are allowed two attempts to successfully complete NURS 20 before the opportunity to progress to NURS 3 is exhausted. Should this occur, one opportunity to apply to and be accepted into the generic RN program (first course, NURS 1) will be allowed. Should this first attempt at the RN program be unsuccessful, there is no opportunity to reenter or reapply.

After successfully completing NURS 20, students are allowed two attempts in the RN program (second year) before the opportunity to reenter is exhausted.

Students who exhaust all opportunities to be successful in the generic RN program but who subsequently and successfully complete the LVN program have one opportunity to apply to and enter the Paramedic/LVN-RN Career Mobility Track (“Bridge”). Unsuccessful attempts are managed as above.

Examples:

1. No past attempts in RN program:

Unsuccessful first NURS 20 attempt > return to course following readmission policy for NURS 20

Unsuccessful second attempt at NURS 20 > no opportunity to reenter the course > can choose to apply to the generic RN program (first course, NURS 1) once requirements are met > one attempt allowed > no opportunity to reenter or reapply.

2. Past attempts in RN Program exhausted, successful completion of LVN program:

Unsuccessful generic RN attempts x 2, successful completion of LVN program > one time entry to Transition Course, NURS 3 and NURS 4. > should either of these attempts be unsuccessful, there is no opportunity to reenter or reapply.

COURSE CHALLENGE/CREDIT BY EXAMINATION

All nursing courses may be challenged by examination. In order to challenge a course, the student must currently have a waitlist number, and an accepted criminal background check. The student interested in challenging a course must complete the following:

1. Meet with the Director of Nursing and Health Occupations plus course faculty to discuss advanced placement options, challenge eligibility, and challenge procedures ***before the course begins***.

Eligibility must be met through:

- Three letters of reference applicable to the course being challenged: one must be from a supervisor/manager in an area applicable to the course being challenged.
- 1,000 hours of work in providing direct patient care; evaluated on a case by case basis by the nursing faculty

Note: The student cannot be enrolled in the course to be challenged. The student should allow sufficient time to complete the challenge process. In the event that the student does not successfully complete the challenge process, the student must enroll in said course to progress through the program.

Eligible candidates will be provided with the course Syllabus/Syllabi at least two weeks prior to the start of the Challenge. A nursing instructor will be assigned to administer the challenge exam. The student pay's the registration fees for the course prior to administration of the challenge exam, and any other associated fees. Students who are successful in challenging a course are admitted to the next course on a seat availability basis.

Enrollment in the next course in the program sequence requires meeting all course prerequisites of the courses preceding the successfully challenged course. Example: entering NURS 3/LVN 123 following successful challenge of NURS 2/LVN 122 requires the student pass NURS 1/LVN 121, LVN 110A and LVN 110B and all other prerequisites as noted in the current College Catalog.

Students who receive a failing grade in a nursing course at College of the Redwoods or any other nursing program/school may not challenge the failed course to re-enter or enter the RN/LVN Nursing Program. Readmission/transfer policies must be followed.

Failing a challenge exam constitutes a course failure and constitutes one program attempt. The student will only be allowed to return one additional time for a program attempt on a space available basis. Students are reminded that whatever grade is earned on the challenge exam (including a failing grade) is entered on the permanent college transcript.

Military Personnel Admission

Challenge/Advanced Placement into the Nursing Program for Military Personnel

Policy

In compliance with Senate Bill 466, Military Personnel and Veterans may be eligible for advanced placement into College of the Redwoods Associate Degree Nursing Program. Three pathways have been established to assist with obtaining nursing credit for previous education and experience for the Basic Medical Technician Corpsman or Army Medical Specialist, Basic Medical Technician Corpsman with an active California LVN license, and the Independent Duty Corpsman or Army Healthcare Specialist.

Military Personnel and Veterans must meet the following to receive credit for nursing courses:

1. Military records and transcripts must be reviewed by a counselor.
2. The applicant must have a DD214 showing completion of military coursework and service/discharge under honorable conditions or current active honorable service required (letter from supervisor).
3. Applicants must meet all general entrance requirements of the Associate Degree Nursing Program, including completion of designated prerequisites.
4. Students must pass the applicable written challenge exams with 75% or higher and obtain a satisfactory level of achievement on skills competency.
5. Military Challenge students will not be admitted if they have previously failed a nursing course at another nursing school.
6. Acceptance of Military Challenge students into the Associate Degree Nursing Program is contingent upon seat availability.

Procedure

1. Interested candidates must request an appointment with the Director of Nursing and Health Occupations at least eight weeks prior to the application period to discuss eligibility requirements for the Associate Degree Nursing Program.
2. Applicants who may be eligible for advanced placement include those individuals who have satisfactorily completed military education and work experience within the last five years.
3. Applicants applying for credit by exam or transfer credit must submit the following materials verifying education and experience.
 - a. Official transcripts from all colleges attended, course descriptions and/or course syllabi from appropriate education program(s) demonstrating satisfactory completion of coursework and clinical experience.
 - b. Documentation of work experience.
4. Evaluation of the experience(s) or courses will be performed by the nursing director, content expert(s), and lead instructor at the very least.

5. After a review of the applicant's documentation and experience, and upon determination that the applicant has met the educational and experience requirements, as well as the additional nursing program requirements, the student will be required to take and pass challenge examinations.
6. Written and skills competency examinations for placement or challenge must be completed eight weeks prior to admission to the program.
7. Based on results of the challenge exams, pathway placement will be deferred to the discretion of the Director of the Nursing Program and Admissions committee.

Note:

The student cannot be enrolled in the course to be challenged. The student should allow sufficient time to complete the challenge process. In the event that the student does not successfully complete the challenge process, the student must apply to enroll in said course to progress through the program.

Eligible candidates will be provided with the course Syllabus/Syllabi. A nursing instructor will be assigned to administer the challenge exam. The student pay's the registration fees for the course prior to administration of the challenge exam. Students who are successful in challenging a course are admitted to the next course on a seat availability basis.

Enrollment in the next course in the program sequence requires meeting all course prerequisites of the courses preceding the successfully challenged course. Example: entering NURS 3 following successful challenge of NURS 2 requires the student pass NURS 1 and all other prerequisites as noted in the current College Catalog.

Students who receive a failing grade in a nursing course at College of the Redwoods or any other nursing program/school may not challenge the course to re-enter or enter the RN Nursing Program. Readmission/transfer policies must be followed.

Failing a challenge exam constitutes a course failure and constitutes one program attempt. The student will only be allowed to return one additional time for a program attempt on a seat available basis.

Students are reminded that whatever grade is earned on the challenge exam (including a failing grade) is entered on the permanent college transcript.

The challenge examination for each nursing course will consist of:

The student takes an NLCEX-format written exam of course content and must obtain at least 75% to pass. Note: Nursing courses are blended, meaning they consist of several areas of nursing such as pediatrics + obstetrics or medical/surgical + psychiatric nursing.

The student must take and pass the med math exam associated with the course being challenged.

Students will be required to show their work.

Simple calculators may be used. Cell phones or advanced calculators may not be used.

The questions will reflect medication calculations that students in the course being challenged are required to perform.

Answers must contain the appropriate unit of measure (ml/hr., units/hr., etc.).

The student must demonstrate competency in patient care and/or the skills required in the syllabus for the challenged course. A nursing faculty member who teaches the challenged course will evaluate these. A patient care (clinical) evaluation would be administered in the skills laboratory and may include simulation.

Three pathways have been established to assist with obtaining nursing credit for previous education and experience.

Pathway I- Including but not limited to Basic Medical Technician (Navy Hospital Corpsman) or United States Air Force Basic Medical Service Technician or Army Medical Specialist.

Applicants eligible for pathway 1 must successfully pass the challenge exams for the first semester courses, which include:

NURS 1

- Course Final
- Med Math Exam
- Skills competency (all skills normally tested in NURS 1)
- Simulation + clinical documentation + written demonstration of use of the nursing process (plan of care/concept map)

Candidates must also meet the same eligibility requirements for admission into the ADN program as other applicants, including completion of prerequisites.

Pathway II- Basic Medical Technician Corpsman (Navy Hospital Medic or Air Force Basic Medical Technician Corpsman) with an active California LVN license (Licensed Vocational Nurse) either through challenge (BVNPT Method 4) or successful completion of an LVN program.

- a) May apply to the Paramedic/LVN-RN Career Mobility Track.
- b) Admission to the program is on a seat available basis as for any Paramedic/LVN to RN student.
- c) The transition course (NURS 20) requires demonstration of theory and clinical competency.
- d) All ADN prerequisites must be completed prior to admission, as per admission policies.

Pathway III- Independent Duty Corpsman/Advanced Army Medic/Advanced Airforce Medic

- a) Credit given for first year of the Associate Degree Registered Nursing program.
- b) Completion of Smart Transcript review to determine course credits or challenge opportunities based on College/Department policies.
 - a. Completion of ADN prerequisite coursework per College/Department policy is required.
 - b. Transcripts will be evaluated for Anatomy, Physiology, Microbiology, Communication, English, and natural and social science coursework (these courses must be completed in order to take the NCLEX).
- c) If transcript review determines all prerequisites have been met, the individual will be placed on the waitlist for Paramedic/LVN – RN Career Mobility Track.
 - a. Admission to the program is on a seat available basis as any Paramedic/LVN to RN student.
- d) The transition course (NURS 20) requires demonstration of theory and clinical competency.

TRANSFER CREDIT

Transfer credit is available for successfully completed equivalent course work taken at other regionally accredited institutions. Student advisors/counselors, faculty, and the Director of Nursing and Health Occupations work together to determine transferable credits.

Students who have attended or wish to transfer from another approved nursing program will be considered as space is available and if no more than one failure or withdrawal in a nursing course occurred at the previous nursing school. Space for transfer students is very limited. Students wishing to transfer must meet program requirements and submit: an application, official transcripts, and course syllabi of courses completed at the other nursing school. In addition, students must submit a letter of recommendation from the director of any previous nursing program utilizing the official Health Occupations “Letter of Reference” which includes an authorization to release information. Students who have failed or been dismissed from other programs due to unsafe, unethical, or unprofessional behaviors may petition for individual case review.

Transfer students must meet College residency and graduation requirements to receive an Associate Degree or Certificate. Students who transfer into a nursing program with nursing courses taken from other colleges or universities must ensure that course substitution forms have been approved by the Director of Nursing and Health Occupations and are on file with Enrollment Services prior to graduation. If the required forms are not on file with Enrollment Services, graduation cannot occur.

Credits for transfer cannot be older than two years. If it has been more than two years since the course(s) being transferred was passed, the course can be challenged through credit by examination.

All credits from a foreign college or university must be evaluated by a foreign transcript evaluation service (AERC or IERF). The evaluation received from these agencies must show the letter grade received for each course and distinguish between lower and upper division.

A student will be advanced placed into a nursing course **only** if they have satisfactorily completed the prerequisites for that course with a grade of “C” or better. See college catalog for prerequisites for individual nursing courses.

GRADUATION AUDIT

Students are encouraged to seek course-related advisement from nursing faculty and education requirements from the dedicated nursing advisor. **To ensure that all the nursing degree requirements will be met at the time of graduation, students must have a Student Education Plan (SEP) on file in Student Services/Counseling prior to starting the program.**

In addition, students are required to update their Academic Evaluation in Web Advisor (My Educational Plan) each semester starting with NURS 1 to ensure graduation requirements can be met. Students cannot graduate with a Certificate or an A.S. degree or take the NCLEX exam until all course and degree/certificate requirements are complete. The Director of Nursing and Health Occupations is also available to students for advising questions that cannot be answered by college counselors and nursing faculty.

STUDENT CLINICAL SCHEDULE ACCOUNTABILITY

Clinical assignments are made by nursing faculty to meet student learning needs. It is the student's responsibility to make necessary arrangements so work schedules, transportation needs, family responsibilities, etc., do not conflict with completion of well researched, well written clinical assignments. Assignments should show growth in the student's ability to make connections between patient data collected and the trajectory of the patient's health and recovery.

COMMUNICATIONS

Official name changes are made through the Admissions and Records office. The Health Occupations Dept. is also notified, and office file amended. Email, or postal address and/or phone number must also be communicated to the Health Occupations Dept. Information should also be updated in WebAdvisor. Each student must provide to each clinical instructor a current telephone number where they can be reached directly or by message following clinical experiences.

SOCIAL AND ELECTRONIC MEDIA

The social and electronic media policy is based upon state and federal legislation and best practices for the use of this technology. Students are expected to be knowledgeable of and adhere to all current legislation including the Health Information Portability and Accountability Act (HIPAA). Inappropriate use of social media may violate state and federal laws established to protect patients, their privacy and confidentiality. Violations may result in civil and/or criminal penalties, personal liability for defamation, harassment and/or invasion of privacy. Postings on the Internet are discoverable by law even when they are deleted.

Use of Social and Electronic Media:

- Students must adhere to all applicable rules, regulations and legislation concerning patient privacy during their clinical (i.e., HIPAA) rotation. Students will not take or post images or information regarding clinical facilities, staff, patients, patients' family or friends, any patient body organs, fluids, wounds, dressings, medical equipment, or human patient simulators.
- Audio and visual images from the classroom, clinical setting, skills lab and simulation may not be posted on social or electronic media. Disclosure of exam items before, during or after the exam or sharing school papers for the purpose of plagiarism are considered information that should not be shared in any format.
- Electronic social networking (i.e., "Facebook," "Twitter", email, text, etc.) is not permissible during scheduled class or clinical time.
- Posting comments on social media sites, the learning management system (Canvas), and/or other online venues about other students, faculty or staff at College of the Redwoods which may constitute "cyberbullying" or lateral violence is against the social media use policy. If it's negative, belittling, mocking or intimidating, or can be construed in such a manner, do not post it.
- Students who choose to communicate electronically via social networking sites are held responsible for the content they post.
- All students are required to read the National Council of State Boards of Nursing (NCSBN) publication, "White Paper: A Nurse's Guide to the Use of Social Media," on their website: https://www.ncsbn.org/Social_Media.pdf
- Recording by any method is by permission of the instructor only.
- Recordings of any kind may not be transmitted or sold.
- Photograph and video recording by students isn't allowed in class or clinical.
- Use of electronic devices during class or clinical (i.e., cell phones, iPads, laptop computers) is by the permission of the instructor only and/or facility policy.
- Cell phones are not to be utilized in patient care areas unless they are the official cell phone of the facility and are utilized for the purpose of patient care.
- Do not present yourself as an official representative or spokesperson for the College of the Redwoods nursing program.

Consequences for inappropriate use, actions, and/or behaviors related to the use of social and electronic media include, but are not limited to:

- Violation of any of the above guidelines for any reason and regardless of intention may be grounds for dismissal from the clinical facility and/or the nursing program.
- Students who violate these guidelines may not be eligible to re-enter the nursing program.

CEREMONIES AND OUTSIDE ACTIVITIES

- Ceremonies: Students are encouraged to attend commencement (college graduation) and nursing pinning ceremonies.
- Outside Activities: Each year, there are many outside-of-class activities in which students may participate. Such events may include blood drive, health fair, career fair, high school visits, blood pressure screening, and others. Note that NURS 4 in the ADN program contains an additional mandatory community requirement.

STUDENT INVOLVEMENT IN FACULTY MEETINGS

Student representatives are elected each semester to represent their class in nursing faculty meetings and nursing committee meetings. Meeting dates and times are announced at the beginning of each semester.

MED MATH EXAMINATIONS

Students are required to pass Medication Calculation Exams by stated dates in course syllabi in order to successfully complete select nursing courses. See course syllabi for testing and grading policies. Only simple calculators may be used.

PROGRAM EVALUATIONS

Student input is vital to maintaining high quality program(s) that are current, user friendly and support student success. To this end, in-progress and graduate follow-up survey instruments are utilized to evaluate the program, curriculum, faculty, and clinical facilities. Students are strongly encouraged to complete these evaluations.

STUDENT ATTENDANCE

Nursing students are expected to attend all sessions of each class lecture via zoom, participate in discussion boards and clinical for which they are enrolled. Additionally, regular attendance demonstrates professional behavior and responsibility.

Students are responsible for all missed content and assignments. Religious observances may be accommodated, if possible, and only if course/clinical outcomes can be met.

Positive attendance courses are regulated through attendance tracking. Students are asked to mark on a calendar the days they did not attend class. Attendance tracking is related to state funding and performed at the end of the term.

CONFERZOOM INSTRUCTION RULES AND GUIDELINES

- Have your computer or device set up prior to the start of class, moving from one room to another is distracting for others learning.
- Stay muted so that background noises are not affecting others ability to hear and concentrate.
- Students must be sitting or standing, no one should be lying in their bed or on the couch.
- Students must be dressed for class, night ware is unacceptable.
- Use the chat box as much as possible.
- Raise your “hand” icon when wanting to be the next speaker.

CLINICAL ATTENDANCE

1. To be eligible for the NCLEX-RN and NCLEX-PN exam, students must complete all clinical hours as approved by the Board of Registered Nursing and Board of Vocational Nursing and Psychiatric Technicians. Therefore, missed clinical days must be made up. This includes cancelled clinical days. Make-up assignments are determined on a case-by-case basis. Patterns of absence may result in program dismissal.
2. Clinical includes skills lab, workshops, simulation, conferences and clinical agency learning.
3. In the case of absence, students must contact (call/text) the clinical instructor AND the facility (as appropriate), at least one hour prior to the beginning of the clinical day. Do not email faculty to inform them of your absence. The same rules and regulations for calling in sick used in the workplace apply to the school setting. Messages from other students are not accepted.
4. Students who are a “no call, no show” will be subject to a Faculty-Student Conference and possible program dismissal.
5. Lateness results in unmet clinical objectives, skills learning, and/or interruptions in patient care. Students are considered late if they arrive after the designated start time at the designated

location. All instances of lateness will result in a Statement of Concern. Patterns of lateness will result in a Student-Faculty conference. Three (3) episodes of clinical lateness will be counted as one (1) absence and results in a required make-up.

6. Policies, computer access, safety issues and clinical expectations are unique to each clinical setting. Therefore, attendance on the first clinical day (orientation) and any other orientation requirements for each rotation is mandatory. Failure to attend clinical orientation may result in inability to practice at the clinical site and become ineligible to remain in the program. Each experience will be handled on a case-by-case basis, depending on the course, agency contracts, and clinical requirement
7. Students are not to leave the clinical facility/site during clinical hours. This includes leaving the clinical site prior to the end of the clinical day. Disciplinary action (Statement of Concern; Faculty/Student Conference) is provided to the student if they leave the clinical site without notifying the clinical instructor.

When a student is called away on a family emergency they are expected to contact their clinical instructor immediately, the student would also report off to the nurse assigned to the patient so that care is not interrupted? When a student leaves early for any reason, the remaining clinical hours will need to be made up.

FACULTY ABSENCE

Faculty work to find coverage if theory and/or clinical absence is anticipated ahead of time or makes every effort to find a substitute faculty in the case of an unanticipated absence. If no substitute is available, a make-up clinical day will be scheduled, or alternate clinically based written assignment will be made.

GRADING SCALE

A grade of "C" or better is required for progression in and completion of the nursing program. A minimal average of seventy-five (75) percent is required for a passing grade of "C." In the nursing program, the following letter grade symbols and GPA will be awarded for the attainment of the following numerical grades:

Grade Symbol	Course Grade (%)	Clinical Component	GPA	Definition
A	95-100	Pass	4.0	Excellent
A-	90-94.4	Pass	3.7	Excellent
B+	87-89.4	Pass	3.3	Good

B	84-86.4	Pass	3.0	Good
B-	81-83.4	Pass	2.7	Good
C+	78-80.4	Pass	2.3	Satisfactory
C	75-77.4	Pass	2.0	Satisfactory
D	65- 74.4	Pass	1.0	Poor – No Progression
F	< 65 or clinical failure	Fail	0.0	Fail. No Progression
W	---		---	Official Withdrawal

CLINICAL EVALUATION

Clinical performance is evaluated by the clinical instructor and is based on the course objectives derived from the program outcomes. The student also evaluates their clinical performance using the same objectives. A clinical evaluation tool is used by the faculty to assign the final clinical grade of pass or fail for the clinical component of each course. A copy of the clinical evaluation tool is in each course syllabus. The clinical evaluation tool is comprised of formative and summative evaluations. The evaluations are in writing, discussed with the student in an individual conference meeting, and signed by both the instructor and the student. The completed evaluation is scanned by the student and uploaded into the course CANVAS site. At the beginning of each semester students will read and review the evaluation tool with the clinical faculty.

Formative Evaluation:

Formative evaluations assess progress and provides direction for learning during the remaining time at the clinical agency. It provides the framework of student self-assessment and instructor feedback to the student including their strengths and positive accomplishments as well as any deficiencies and performance that needs to be improved. It informs the student of his/her progress in meeting clinical objectives, identifies additional learning that may be required, and makes recommendations to improve and/or to meet objectives. See course syllabi/class calendar for frequency and timing of the formative evaluation.

In the formative evaluation, performance is rated as follows:

- Met** **Met** is defined as consistent performance of the objective according to criteria or guidelines given. When errors are made, they are recognized, reported, and corrected.
- NI** **Needs Improvement** is defined as performance that is inconsistent or inadequate and does not yet meet the clinical objective. All **Needs Improvement** areas must be improved by the time of the summative evaluation in order to receive all **Met** ratings.

- NO** **No Opportunity** is used when there was no opportunity to meet the objective.
- Not Met** **Not Met** is defined as performance that clearly does not meet the objective, errors were made and not reported/recognized and/or expected behavior according to guidelines and criteria was not performed at all. Procedures performed with inappropriate supervision.

Summative Evaluation:

Summative evaluation occurs at the end of the rotation to determine if the clinical objectives have been achieved and establishes the grade for clinical practice. Prior to the summative evaluation the student completes the Summative Self-Assessment to identify their strengths and weaknesses. See course syllabi/class calendar for frequency of the summative evaluation. The clinical faculty is responsible for assigning the final summative grade.

In the summative evaluation, performance will be rated as follows:

- Met** **Met** is defined as consistent performance of the objective according to criteria or guidelines given. When errors are made, they are recognized, reported, and corrected.
- NO** **No Opportunity** is used when there was no opportunity to meet the objective.
- Not Met** **Not Met** is defined as performance that clearly does not meet the objective, errors were made and not reported/recognized and/or expected behavior according to guidelines and criteria was not performed at all. Procedures performed with inappropriate supervision.

To receive a **Pass** in clinical, **Met** ratings must be achieved for all summative objectives; a **Not Met** rating in one or more summative evaluation objectives will result in a **Fail** clinical grade and failure of the course. In addition to receiving a satisfactory clinical evaluation, the student must achieve a 75% or better in theory to receive a passing grade in a nursing course.

STUDENT HEALTH IN THE CLINICAL SETTING

Injuries which occur in class or clinical are to be reported immediately to the instructor. All accidents/incidents require completion of written reports by the student and instructor. These are required by the health care facility and/or College of the Redwoods.

Reporting Guidelines

Location	In Clinical Setting	In CR Skills	In Other College Setting
Report	To instructor immediately	To instructor or lab coordinator immediately	To instructor immediately
Call Immediately	Julia Morrison, Insurance Coordinator (476-4172) for reporting requirements	Ext. 4172	Ext. 4172
Location	In Clinical Setting	In CR Skills	In Other College Setting
Blood Exposure Use Protocols	Clinical Agency and CR Blood-borne Pathogens Exposure Control Plan	CR Blood-borne Pathogens Exposure Control Plan	CR Blood-borne Pathogens Exposure Control Plan
Injury Use Protocols	Clinical Agency	College of the Redwoods	College of the Redwoods
Provider of Care	Use Agency's Protocols depending on injury severity	Students own health provider	Students own health provider
Payment	CR Worker's Comp	Primary - Student's own insurance Secondary - CR Student Accident Insurance	Primary - Student's own insurance Secondary - CR Student Accident Insurance
Paper Work and Forms (obtain from C/R 476-4172)	Worker's Comp Form DWC-1 Student Injury Report or Sharps Injury Report	Student Accident Insurance Claim form completed by student and instructor Student Injury Report or Sharps Injury Report completed by instructor	Student Accident Insurance Claim form completed by student and instructor Student Injury Report or Sharps Injury Report completed by instructor

CLINICAL LEARNING

Clinical rotations are planned by the faculty to best meet student learning needs. Therefore, special consideration cannot be given to meet student preferences. Clinical rotations will be scheduled throughout the week (weekends and evenings included) and may occur at any time during the 24-hour day in locations that may extend outside of Humboldt /Del Norte counties.

Nursing students must be fully prepared to provide care in the clinical setting. Preparation includes but is not limited to a thorough understanding of the client(s) condition, diagnostic and treatment plan, medications, and nursing care needs. In addition, students must complete required nursing skill lab competencies for specific interventions before performing them for the first time in the clinical setting. Students participate in the delivery of client care in collaboration with the nursing faculty and nursing staff at the clinical facility.

Clinical Responsibility/Liability of Instructors and Students

Student nurses are responsible for their own actions and liable for their own acts of negligence committed during the course of clinical experiences. When they perform duties that are within the scope of nursing, such as administering an injection, they are legally held to the same standard of skill and competency as a nurse. Lower standards are not applied to the actions of nursing students. Students do not practice “under” their instructor’s or another nurse’s license. Each nurse and student nurse will be responsible and accountable for providing safe client care (Berman & Snyder, 2012).

- 1) Each instructor and student will be liable for their own actions at all times.
- 2) It is the responsibility of the instructor to:
 - Make student assignments compatible with the expected level of student learning.
 - Direct and supervise the administration of medications and performance of skills in which the student does not have mastery.
- 3) It is the responsibility of the student to:
 - Keep instructor informed of patient status and progress with nursing activities.
 - Inform the instructor prior to assuming care of an assigned client if there is a reason why they feel unprepared to assume that care/assignment.
 - Communicate with the instructor when medications or invasive procedures are needed by the patient, or if the patient is discharged or transferred to another unit.
 - Perform independently only those skills in which the student has received instruction, feels confident to perform, and has been approved by the instructor to perform.

The following list of performance restrictions and limitations was created to assure compliance with regulatory requirements and promote the safety of patients and students. Students are encouraged to observe all procedures and treatments as the patient, staff and situation allow.

- A. Students may not perform the following:
- Administer chemotherapeutic agents
 - Pick up blood from the Lab
 - Prepare and/or administer any emergency medications
 - Conduct point of care testing (urine dipstick, occult blood or blood glucose testing) unless the student has successfully completed hospital certification requirements.
 - Participate in any emergency response beyond that of a first responder (initiate code and BLS) – may observe with instructor permission if assigned to patient.

- Provide care to the following patient populations: Inmates, patients in respiratory isolation requiring individually fitted masks, patients with radiation implants, and rule out/actual COVID-19 diagnosis.
- B. Students may perform the activities listed below only if the following conditions are met; activity is within the student’s scope of practice; performed under the direct supervision of the instructor or, with instructor consent, by a staff member.
- **Preparation and/or Administration of the following:**
 - IV push and piggyback medications
 - TPN Administration
 - Pediatric medications
 - Controlled substances (Narcotics)
 - **Care as it relates to the following:**
 - Central Lines: Medication administration, dressing changes,
 - Implanted Ports: Medication administration once site accessed by staff, site care, dressing changes
 - Trach Care: suctioning, cleaning, oxygen management
 - Epidurals: assessments
 - PCAs: assessments
 - IV starts
 - Application of Electronic Uterine/Fetal Monitoring Equipment

Medication Policy for Nursing Students

Theoretical medication competence includes students’ knowledge base on subjects necessary for safe medication management, such as laws and regulations, pharmacology, pharmacy and medication administration. Students who have better theoretical medication competence are also more self-confident in medication management. The competency for safe medication management will be evaluated each semester. The competency testing will include a medication mathematics exam, a simulated medication administration exercise, and an observed medication administration in the clinical setting. A passing rate on all exams is expected to be between 95-100%.

To develop the required knowledge, skills, and attitudes necessary to improve the quality and safety of medication delivery, application of the nursing process and the tenets of QSEN: Quality and Safety Education for Nurses (QSEN) is embedded in the curriculum for medication delivery.

Below is an application of the QSEN tenets for medication administration which includes patient-centered care, teamwork and collaboration, evidence-based practice, quality improvement, safety, and informatics.

1. **Patient-Centered Care:** Recognize the patient as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs. In alignment with patient-centered care, students will be expected to perform patient assessment for allergies, medication reconciliation, past medical history, and pertinent laboratory values.

2. **Teamwork and Collaboration:** Functions effectively within nursing and inter-professional teams including Health Care Provider, Pharmacist, and RN Faculty/Staff fostering open communication, mutual respect, and shared decision-making to achieve quality outcomes. Students will be expected to clarify roles and accountabilities in situations of potential overlap in team member functioning
3. **Evidence-based Practice (EBP):** The strength and relevance of available evidence influences the choice of standards and interventions in provision of medication administration. The student will be expected to follow and examine policies of medication delivery set forth by College of the Redwoods and clinical agencies for application of current evidence-based practice.
4. **Quality Improvement (QI):** Students will follow CR Medication Procedures/guidelines including use of Medication Administration Pocket card and follow Agency Policies/Procedures. The student will be expected to analyze own practice as well as seek opportunities to improve safe medication administration practice.
5. **Safety:** Demonstrate effective use of technology and standardized practices that support safety and quality such as barcodes, Computer Provider Order Entry, medication pumps, and automatic alerts/alarms. The student will describe processes used in understanding causes of error and allocation of responsibility and accountability.
6. **Informatics:** Use high quality electronic sources of healthcare information. Students are expected to use electronic school resources *Unbound Medicine* phone/computer app and /or Agency provided electronic resources (Drug books will not be used).

Students WILL NOT:

- Administer **ANY** medication without supervision – co-signature required for all meds.
- Administer chemotherapy or any IV medication that is a vaso-active, anticoagulant, or insulin. Students may not set up Patient Controlled Analgesia (PCA).
- Administer medications that are a part of a Standardized Procedure.
- Students **will not** have access to controlled substances. If a patient for whom the student is caring requires a controlled substance, Clinical Faculty or the assigned RN must obtain the controlled substance and the substance must be in the RN's view at all times. With direct supervision by two RN's, the student may co-waste (waste with a 2nd RN while 1st RN is observing), the controlled substance administration. Only an RN may co-sign, indicating that a controlled substance was both wasted and witnessed.
- Note: in order to be in compliance with the Drug Enforcement Administration (DEA) the documentation must show that the Clinical Faculty/ RN has clear chain of custody of the controlled substance at all times.

Standards

- Students must verify the patient's identification according to agency policy and verify medications against the electronic medication record.
- Safe medication practice includes knowledge of the rights for medication administration including knowledge of medication action, safe dosages for adults, seniors, or children, side effects and special considerations for administration.
- The student documents medications administered and those that are being held in the electronic medication administration record (eMAR) or hard chart.

- Students are required to strictly adhere to patient confidentiality and protect the security of patient records and patient data. Leaving the screen open on the computer in the hallway is a violation of a patients privacy.
- Students are only allowed to access the medication records of patients involved in their care experience.

Error Reporting – Actual or Near Miss

- Reporting errors in a fair and just culture is one in which people learn and improve by openly identifying and examining their weaknesses, and feel supported and safe in doing so. Reporting errors prepares professionals for current and future practice and effectively links classroom and clinical experiences with expectations for competence, compassion, and justice in health care.
- **A near miss in medicine is an event that might have resulted in harm but the problem did not reach the patient because something interfered, either human or technology, with its administration. Near misses may also be referred to as "close calls" or "good catches."**
- All 'near miss' medication events by nursing students requires faculty to complete a College of the Redwoods Medication Error Form for the purpose of identifying areas for improvement in teaching/learning strategies and to keep students, and patients, safe.
- Medication errors that do occur will be reported to RN/Charge RN, Nursing Faculty and the Health Care Provider if indicated. Completion of a Medication Error Form as well as following Agency guidelines for reporting errors is done.

College of the Redwoods Nursing

Student Medication Error/Near Miss Event Reporting Form

A. **Actual medication errors that reach a patient:** follow Agency guidelines for reporting situation. Student/Faculty Conference should follow immediately and contributions to the error will be analyzed.

B. **For Near Miss** – errors that occur in the preparation of medications (knowledge, failure to complete one of the 3 checks, or, inadequate math skills).

1) How did the Near Miss/Medication Error occur?

2) For a Near Miss describe how you would handle the situation if it actually occurred? For an actual medication error list the steps taken following identification of the error.

3) How would the patient be monitored if the medication had been administered or was administered?

4) Emotionally how do you feel after making a medication error or near miss? Where would you turn for support?

5) What steps will you take to prevent a Near Miss/Medication Error from occurring again? Are you familiar with strategies used in healthcare facilities to prevent medication errors? If so, please describe the strategies.

6) Include in your weekly journal what you learned and how you felt regarding an actual or near miss related to medication administration.

GUIDELINES FOR WHEN TO CALL YOUR CLINICAL INSTRUCTOR

Preparing to become a Registered Nurse requires critical thinking and personal accountability. It involves applying knowledge and performing skills in a consistently safe, competent, efficient, and professional manner. It also involves a gradual transition from close instructor observation to a more independent/collaborative level of practice. To assist students in determining when to give patient care without direct instructor observation and when to call the instructor, the following guidelines have been developed.

CALL YOUR INSTRUCTOR FOR ANY OF THE FOLLOWING:

1. When in doubt, call. Always let instructors decide. Don't make that decision for them.
2. Doing something for the first time in the hospital.
3. Giving medications
4. Any time a controlled substance needs to be removed from the narcotics drawer.
5. Doing **any** sterile nursing procedures (e.g., dressing change, catheterization).
6. Doing anything with an I.V. (e.g., changing bags/ tubing, etc.), IV administration, IV push, or IV start.
7. Whenever you have the opportunity to perform an invasive procedure (e.g., N/G tube insertion, enema) or a diagnostic procedure (e.g., collection of sputum for culture), even if you have done it before.
8. You are not perfectly clear on what to do or how to do it (e.g., turning a patient who has had orthopedic surgery, infectious disease...).
9. You need help or have a question after review of Policies/Procedures.
10. If you're assigned patient is discharged or transferred.
11. If a patient condition changes. Notify the assigned staff nurse and instructor immediately.
12. If you are getting behind in your assignment and feel you may not finish on time, let your instructor know ASAP, or if you finish everything and have "nothing to do." It is expected that the student will complete all required patient care.
13. Anything unsafe happens to your patient (e.g., a fall).
14. You are having difficulty with a patient, family member, nursing staff, or any ancillary dept.
15. You injure yourself in any way (e.g., needle puncture, back strain).
16. If you need to leave the hospital or facility before the end of the shift for any reason.
17. Or any other time you feel you need assistance or have questions.

CLINICAL DRESS CODE

Students are required to appear in the clinical facilities in complete uniform unless otherwise designated. Your appearance needs to reflect a sense of self respect, attention to detail and professionalism. Uniforms must be clean, neat, wrinkle-free and professional. Students participating in clinical learning in agencies that do not require specific uniforms must conform to a business casual dress code (no blue jeans, yoga pants or leggings, no cleavage; must wear clean top, pants and shoes).

Uniform	Due to the number of Health Occupations programs specific uniform colors will be provided at student orientation.
Uniform Guidelines	Pants: No jeans. No sweatpants. No leggings Tops: No visible printed messages on t-shirt worn under a scrubtop. No loose tie strings, lace, scoop necks, ruffles or over-sized sleeves. All long sleeves must be able to be pushed back to elbows for hand washing. Tops must be at low hip length – <i>no skin or undergarments showing</i> when moving, bending, squatting or sitting. Any top worn under the scrub top must be solid black or white and may not extend beyond the scrub top hem.
Lab Coat	Zip up sweatshirts are not lab coats. Any lab coat must have the program patch on right sleeve. White lab coats may be required at some clinical facilities
Name Tags/ I.D. Badge (Required):	Photo name badges available from Admissions and Records must be worn at all clinical experiences. Students cannot stay in the clinical setting without a CR name badge. Program faculty will announce any variation in name badge use. Badges issued by St. Joseph Hospital or Mad River Community Hospital must be returned to the clinical instructor on the last day of clinical. Badges are hospital property and course grades could be held up until it is returned.
Program Patches (Required)	The program patch is sewn on the right sleeve of the scrub top and lab coat if using, centered 2-3 inches below the seam line. Program patches must be visible at all times. Patches are available at the local uniform store. Vocational nursing students must also display the “SVN” chevron below the patch.
Shoes:	Must be clean, all white or all black and in good repair. Shoelaces must match shoe color. Sandals or backless shoes without straps are not permitted. Athletic shoes must meet these requirements.
Socks/Stockings:	Stockings must be worn with skirts or dresses (either white or neutral colored.) Socks must be white or black. No colored socks. No leggings which show below skirt, pants, etc.
Belts	If visible, must be white or black.
Fanny Packs	Solid colors only.
Jewelry:	Must be simple and not interfere with work. All jewelry must comply with principles of asepsis and not cause injury to client.
Earrings:	Must be small stud-type or hoops less than 1 inch in diameter; large dangly earrings are inappropriate when a student. No bars or ear cuffs.
Body Piercings	A tiny flat nose pin has usually been accepted. No eyebrow or lip piercings. Must follow clinical agency policy. Clinical agencies have the right to refuse student placement based on agency policy.
Body Art and Tattoos:	Must follow clinical agency policy. Clinical agencies have the right to refuse student placement based on agency policy. Wearing a long sleeve black or white t-shirt under the scrub top should be done when art may be frightening to a confused elder.
Necklaces:	One, single strand. No large pendants.
Bracelets:	None.
Rings:	One ring or wedding set only. Large stones are to be avoided

Hair:	<p>Must follow clinical agency policy. Clinical agencies have the right to refuse student placement based on agency policy.</p> <p>Hair must be clean, well groomed, neatly arranged and well secured. For all sexes, hair that touches or passes the shoulders must be put up or pulled into a pony tail. Color must be genetically possible, i.e., no blue, purple or stripes etc. Beards and mustaches must be clean and neatly trimmed with the rest clean shaven.</p>
Nails:	<p>Finger nails should not extend beyond the finger tips, no artificial nails, no colored, i.e. blue, purple nail polish. Chipped nails harbor bacteria. Only light pink or clear polish is acceptable. No nail jewelry. For the duration of the time you are a student in any of the health occupation areas, this policy is mandated.</p>
Hygiene:	<p>Due to the possible chemical sensitivity in others, it is mandated that students not wear perfumes, aftershave, or scented lotions. Offensive body odor is to be avoided through regular hygiene measures. Personal cleanliness is mandatory in order to maintain asepsis.</p>
Required equipment:	<p>Black ballpoint pen, small note pad, wristwatch with a second hand, and stethoscope. Suggested but not required: Penlight, clamp (Kelley hemostat), and small calculator.</p>

The clinical instructor has the authority to determine compliance with this dress code. A student who does not conform to the dress code will be asked to leave the clinical area, correct it and return. If this isn't possible a clinical absence is given. Student uniforms are only to be worn in the clinical setting and other College sponsored community activities. Individual concerns regarding dress code will be submitted to a faculty committee for review.

Skills Lab is clinical. Therefore, nursing uniforms are to be worn during all Skills Lab learning experiences.

STATEMENT OF CONCERN

A Statement of Concern (SOC) is a faculty response to an incident that is related to student behavior in any learning setting. Examples of behaviors leading to a Statement of Concern include lateness, disruptive behavior, lack of preparation for clinical practice, and unprofessional conduct. Statements of Concern become part of the clinical evaluation and support low ratings on the clinical evaluation form.

Statements of Concern that establish patterns of behavior will lead to a Faculty-Student Conference. Statements of Concern remain in the student file permanently and can be used from semester to semester to establish patterns of behavior and consequences.

FACULTY-STUDENT CONFERENCE

At any time in a semester when student practice indicates that a course and/or clinical failure is a possible outcome, a Faculty-Student Conference will be held with the student. During the conference, behaviors of concern will be reviewed with the student. Conferences are time-

sensitive and high priority. They will be scheduled in the most expeditious manner as possible. If necessary, a follow-up conference will be scheduled.

Faculty-Student Conference documentation will remain in the student file permanently and can be used from semester to semester to establish patterns of behavior.

UNSAFE, UNETHICAL OR UNPROFESSIONAL CONDUCT OR PERFORMANCE

1. If involved, associate faculty are expected to communicate issues of unsafe, unethical and/or unprofessional conduct and/or performance to the teaching team/lead faculty as soon as they occur.
2. The teaching team/lead faculty will determine the proper course of action and will then communicate both the problem and the course of action to the Director of Nursing and Health Occupations.
3. Faculty directly involved will provide documentation. Documentation must be timely and will include a description of the behavior and the status of the patient, if appropriate. The student will also document the event.
4. A Faculty-Student Conference meeting must be held **WITHIN ONE WEEK** of the occurrence with the Director of Nursing, the faculty directly involved, the lead faculty/teaching team and the student (support person may be invited). All attendees will share their perception of the problem. In the event an Associate Faculty is involved, the person is expected to attend the meeting. If not possible, the person is expected to be available by phone conference.
5. The lead faculty/teaching team and Director of Nursing and Health Occupations will then confer and will present their recommendations to the student both verbally and in writing. Recommendations will be communicated to the student within 24 hours.
6. Should the unsafe clinical practice result in a determination of unsatisfactory skills performance, the student will be subject to a skills lab referral and a requirement to demonstrate skill competency in the clinical setting. Failure to comply with the skills lab referral and demonstration of competency in the clinical setting will result in a clinical failure for the course.
7. If student continuation in the program is appropriate, a written contract will be developed to continue to monitor and correct unsafe, unethical, or unprofessional conduct and performance. Continuation in the program is contingent upon follow-through with specific contract directives.
8. Should the student fail to comply with the contract, they will fail the course and will be dismissed from the program.

9. Should the unsafe clinical practice or violation of professional, legal, or ethical conduct result in course failure and program dismissal, the student may petition for individual case review to allow application to either nursing program (two failures or withdrawals will prevent application to same program).

In the case of petition:

- The student will prepare a written document stating his or her case.
- The petition will be subject to full faculty review including the Director of Nursing and Health Occupations.
- The student will be notified of review committee decision within one month of submission.
- A successful petition will result in permission to reapply, with the understanding that continued enrollment is conditional and that a learning contract will be in place each semester.

NURSING STUDENT COMPLAINT PROCEDURE - CHAIN OF COMMAND

If a student has a concern or a problem with an instructor, the student is expected to approach the involved instructor and arrange an appointment to discuss the issue with professionalism. Matters relating to the clinical area should be discussed with that particular clinical instructor and those matters dealing with a specific class session should be discussed with the instructor of the class.

If the problem cannot be resolved, the student is advised to follow the appropriate chain of command which is: Course Lead Faculty to Director of Nursing and Health Occupations. If the problem cannot be resolved at that level, the student may schedule an appointment with the Dean of Safety, Health, and Physical Education who oversees the Health Occupations Dept. If the problem persists, the student is advised to follow the Student Complaint Processes below.

STUDENT COMPLAINTS OTHER THAN ACADEMIC COMPLAINTS OR UNLAWFUL DISCRIMINATION

The Department of Nursing and Health Occupations adheres to College of the Redwoods policy. Please refer to the College of the Redwoods Catalog for this specific policy.

COURSE GRADE CHALLENGE

The Department of Nursing and Health Occupations adheres to College of the Redwoods policy. Please refer to the College of the Redwoods Catalog for this specific policy.

CONTACT INFORMATION: BVNPT AND BRN

BVNPT - Board of Vocational Nursing and Psychiatric Technicians

Students are encouraged to view the Board of Vocational Nursing and Psychiatric Technicians website at www.BVNPT.ca.gov for information. The BVNPT address and telephone are:

2535 Capitol Oaks Drive Suite 205
Sacramento, CA 95833
916-263-7800

BRN - Board of Registered Nursing

Students in the Associate Degree Nursing program are also encouraged to view the Board of Registered Nursing website at www.RN.ca.gov for information. The BRN address and telephone are:

1625 Market Blvd Suite N217
PO Box 944210
Sacramento, CA 95834
916-322-3350

All policies listed in this Handbook are subject to change in the event of extenuating circumstances and or revision; please consult the department web page for the most current policies. Students will be notified of changes in policies that occur during the academic year.

**COLLEGE OF THE REDWOODS
PHYSICIAN'S CLEARANCE**

TO: College of the Redwoods Nursing and Health Occupations

Date:

I certify that _____ has my approval to return

to the nursing program (including clinical activities) at CR
(date).

The student is able to participate in unrestricted functional activities essential to clinical
nursing practice.

Physician's Signature:

Print Physician's Name:

Address:

Phone: (____) _____

**COLLEGE OF THE REDWOODS
PHYSICIAN'S CLEARANCE DURING PREGNANCY**

To: College of the Redwoods Nursing and Health Occupations Date:

_____, a nursing student at College of the Redwoods,
is under my care during her pregnancy. Her expected date of delivery is _____

This student has my approval to participate in all functional activities essential to nursing
practice without any limitation until _____ (date).

Physician's Signature:

Print Physician's Name:

Address:

Phone: (____) _____

**COLLEGE OF THE REDWOODS DEPARTMENT OF NURSING AND HEALTH OCCUPATIONS
STATEMENT OF CONCERN**

Program: ___ RN ___ LVN-RN ___ LVN

Student: _____ Course: _____

Date(s) of Occurrence: _____

1. Area of Concern:

___ Skills Competency ___ Clinical Performance

___ Theoretical Knowledge ___ Other

2. Faculty Observations:

3. Faculty Recommendations:

3. Student Comments:

Faculty signature _____ Date _____

Student signature _____ Date _____

**COLLEGE OF THE REDWOODS DEPARTMENT OF NURSING AND HEALTH OCCUPATIONS
FACULTY-STUDENT CONFERENCE**

Program: ___RN ___LVN-RN ___LVN

Student:_____ Course:_____

Date(s) of Occurrence:_____

1. Area of Concern:

___ Skills Competency ___ Clinical Performance

___ Theoretical Knowledge ___ Other

2. Faculty Observations:

3. Faculty Recommendations:

4. Student Comments:

Faculty signature _____ Date _____

Student signature _____ Date _____

**COLLEGE OF THE REDWOODS DEPARTMENT OF NURSING AND HEALTH OCCUPATIONS
SKILLS LAB REFERRAL**

Date: _____ Student's Name: _____

Referring Faculty Name: _____

The above-named student is referred for remediation of the following clinical deficiency (ies). The student has one week to schedule remediation and initiate activities for improved skill acquisition. The student may not perform skill(s) listed below in the clinical setting until remediation has occurred. The student holds full responsibility for missed clinical learning opportunities secondary to their lack of preparedness for clinical practice.

Skill(s) Identified for remediation:

Objectives for remediation identified by referring faculty, in collaboration with student:

Student Signature: _____ ***Date:*** _____

Recommendations and Evaluation:

Date: _____ Faculty: _____

Redwoods Community College District
Report of Student Injury

Name of Injured: _____ Student ID#: _____

Campus/Dept.: _____

Date and Time of Injury: _____ Date and Time Reported: _____

Exact Campus Location of Injury:

Witnesses:

Describe Injury and Body Parts Involved:

First-aid or Medical Treatment Provided:

Description of Activity at Time of Injury:

What unsafe conditions or Actions Contributed to the Injury:

What Steps Have Been Taken to Prevent Similar Injuries:

Recommendations for Additional Action:

Supervisor's Signature: _____ **Date:** _____

Student's Signature: _____ **Date:** _____