Nursing and Health Sciences Student Handbook
2023-2024

The provisions in this handbook are based on Hartnell College policies and services and are subject to change. Material cited in the Nursing and Health Sciences Student Handbook does not constitute an irrevocable contract between an applicant or student and the college. Hartnell College is not responsible for misrepresentations that result from updates after publication or from errors occurring in the preparation of this handbook. Interested parties are encouraged to use the links provided for detailed information.

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CONGRATULATIONS AND WELCOME

Congratulations on your participation in the Hartnell College Nursing and Health Sciences programs. We applaud your academic efforts, value your personal attributes, and ask you to commit to becoming an extraordinary healthcare professional.

Hartnell Nursing and Health Sciences has a significant vision: we strive to be "an influential resource for the health and well-being of the community." We are value-based. Experiences in the classroom, community, and at the bedside incorporate our five core values: *Comportment, Competence, Caring, Collaboration, and Curiosity*. If we are to achieve our vision and demonstrate our 5Cs, we must embrace excellence and accountability for advancing the art and science of healthcare professions.

The NHS Handbook and the NHS Policy and Procedure Manual include information you need to be successful. The NHS team wrote the documents with safety in mind for everyone: you, the faculty, clinical and community partners, your families, and the individuals for whom you provide care.

Your academic journey will not be easy or predictable, given the uncertainties related to the pandemic. Changes in course scheduling and student displacements from clinical sites will occur. Please understand that some things are not in our control. Flexibility is key.

Together, we need resilience, perseverance, and resolve to do what is necessary to achieve mutual goals. You have an essential role in contributing to the health and well-being of our community. Advocate for public health by adhering to and promoting vaccinations and the CDC guidelines to mitigate the spread of the pandemic. Your actions matter.

Our Hartnell College faculty and graduates are exemplary. We ask you to commit to the same high standards that they have. Together, we will advance health and wellness initiatives and remain an influential resource for members of our community.

Continued success!

Debra Kaczmar PhD, RN, CNE
Dean of Academic Affairs, Nursing and Health Sciences

NURSING AND HEALTH SCIENCES FACULTY AND ADMINISTRATIVE STAFF
Hartnell College
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To ensure a quality educational plan, students are advised to contact the Hartnell College counseling office at 831.755.6820 for an appointment with an academic counselor experienced in NHS programs.

CLINICAL AGENCIES AND PARTNERSHIPS

Partner	Street Address	City/State	Phone
Alliance on Aging, Inc.	247 Main Street	Salinas, CA 93901	831.655.1334
Alsana, An Eating Recovery Community	10 Harris Ct Ste C6	Monterey, CA 93940	831.822.8938
American Medical Response West	PO Box 1953	Marina, CA 93933	831.718.9558
Central Coast Visiting Nurse Association and Hospice, Inc.	5 Lower Ragsdale Drive Suite 102	Monterey, CA 93940	831.375.9882
Children's Health of Northern California Pediatric Hospital	3777 S. Bascom Ave	Campbell, CA 95008	408.558.3640
Clinica de Salud del Valle de Salinas	Admin.: 440 Airport Blvd	Salinas, CA 93905	831.757.6237
Coastal Kids Home Care	427 Pajaro Street	Salinas, CA 93901	800.214.5439
Community Hospital of the Monterey Peninsula	3625 Holman Highway	Monterey, CA 93940	831.625.4811
CHOMP Cardiopulmonary Wellness & Sleep Center	93625 Holman Highway	Monterey, CA 93940	831.625.4811
Community Human Services (Genesis House)	2560 Garden Rd, Suite 201	Monterey, CA 93942	831.658.3811
Cottage Hospital Santa Barbara	400 W Pueblo St.	Santa Barbara, CA 93105	805.682.7111
Dignity Health	1700 Tribute Rd., Suite 100	Sacramento, CA	916.733.6340
Dorothy's Hospitality Center	30 Soledad Street	Salinas, CA 93901	831.424.1102
Early Development Services	1274 Broadway Ave	Seaside, CA 93955	831.393.2246
Eden Valley Care Center	612 Main Street	Soledad, CA 93960	831.678.2462
El Camino Hospital	2500 Grant Road	Mountain View, CA 94040	650.940.7000
French Hospital Medical Center	1911 Johnson Avenue	San Luis Obispo, CA 93401	805.543.5353
HC Child Development Center	411 Central Ave	Salinas, CA 93901	831.755.6945
Interim, Inc.	P.O. Box 3222	Monterey, CA 93940	831.649.4522
La Casa Adult Day Health	909 Blanco Circle B	Salinas, CA 93901	831.393.2246
Lincare	901 Harkins Road, Suite E	Salinas, CA 93901	831.757.1060
Marian Medical Center	1400 E. Church Street	Santa Maria, CA 93454	805.739.3000
Mee Memorial Hospital	300 Canal Street	King City, CA 93930	831.385.6000
MoGo Urgent Care	2020 Del Monte Ave, Ste B	Monterey, CA 93940	831.622.6930
Monterey County Health Dept.	1270 Natividad Road	Salinas, CA 93906	831.755.4500
Mum's the Word	P.O. Box 1872	Monterey, CA 93942	831.238.0655
Natividad Medical Center	1441 Constitution Blvd	Salinas, CA 93912	831.755.4111
Pacific Coast Post Acute	720 East Romie Lane	Salinas, CA 93901	831.424.8072
Protransport-1	720 Portal Street	Cotati, CA 94931	707.793.1061
Salinas City Elem. School District	840 South Main Street	Salinas, CA 93901	831.753.5600
Salinas Valley Health	450 East Romie Lane	Salinas, CA 93901	831.757.4333
Salinas Valley Medical Clinics	505 E. Romie Lane	Salinas, CA 93901	831.757.2058
Salinas Valley Post Acute/ W. Gardens	637 E. Romie Lane	Salinas, CA 93901	831.424.0687
Santa Clara Valley Medical Center	751 S Bascom Ave	San Jose CA 95128	408.885.5000
Sierra Vista Regional Medical Center	1010 Murray Avenue	San Luis Obispo, CA 93405	805.546.7600
St. Louise Regional Hospital	9400 No Name Uno	Gilroy, CA 95020	408.848.2000
Stanford Health Care/ Stanford Medical Center	300 Pasteur Dr.	Stanford, CA, 94305	650.723.4000
Sun Street Center	11 Peach Drive	Salinas, CA 93901	831.753.5144
VA Medical Center -Palo Alto	3801 Miranda Ave	Palo Alto, CA 94304	650.493.5000

VITAS	201 South Biscayne Blvd.	Miami, Florida, 33131	305.374.4143
Watsonville Community Hospital	75 Nielson St	Watsonville, CA 95076	831.724.4741
WIC Nutrition Program	632 East Alisal Street	Salinas, CA 93905	831.393.3251
Windsor, The Ridge Rehab. Center	350 Iris Drive	Salinas, CA 93905	831.449.1515
Windsor Skyline	348 Iris Drive	Salinas, CA 93905	831.449.5496
Wonder Wood Ranch	8100 Wild Horse Rd	Prunedale, CA 93907	831.235.2234
YMCA	600 Camino El Estero	Monterey, CA 93940	831.373.4167

META-MAJOR: HEALTH SCIENCES

Meta-Majors are collections of academic majors (degrees and certificates) within a career area with related courses. Identifying with a Meta-Major helps students guide their education pathway. Nursing and Health Sciences is a subset of the Health Sciences Meta-Major. Students interested in health-related careers can review the Health Sciences webpages and then choose a major and degree based on interests, knowledge, skills, and abilities.

The Meta-Majors Program Mapper for Health Sciences includes the various degrees, certificates, and awards available at Hartnell College. Term-by-term course mapping helps students choose the correct courses effectively and efficiently toward completion. The Program Mapper includes descriptions of potential careers and occupations, job growth predictions, and the average expected salary ranges. After exploring and selecting the Health Sciences Meta-Major, students should schedule an appointment with the Nursing and Health Sciences academic counselor to create an Individualized Educational Plan.

NHS MISSION, VISION, AND VALUES

MISSION

The mission of Nursing and Health Sciences is to facilitate an interprofessional learning environment in which students become safe, accountable, and culturally responsive healthcare professionals. Faculty and students embrace excellence and model ethical leadership, while advancing the art and science in healthcare. Faculty and students adopt an attitude of inquiry. Ideas are generated, assumptions are questioned, and the art of investigation is prized.

VISION

Nursing and Health Sciences will be an influential resource in health education and promotion for the residents of the Salinas Valley.

VALUES

Nursing and Health Sciences facilitates the development of healthcare professionals who embody and demonstrate core values of comportment, competence, caring, collaboration, and curiosity:

Comportment

Comportment involves the internalization of the core values of professional practice (Halstead, 2018). Comportment is actualized by the integration of "values and actions and may be measured in the form of professional conduct, appearance, behavior, and collaborative practice" (Clickner & Shirey, 2013, p. 108).

Competence

Competence is an integration of knowledge, skills, abilities, and judgments demonstrating an expected level of performance within a scope of practice. The competent healthcare professional facilitates competent practice and seeks to remove barriers that constrain competent practice. Competence is definable, measurable, and can be evaluated; the professional is responsible and accountable for maintaining competence; competence is situational and dynamic (ANA, 2014; NLN, 2014).

Caring

Caring, as explained by Kalfoss and Owe (2015) and defined in Swanson's Caring Theory (1991), has five caring processes that are common in caring relationships. These five processes are categorized as

- "*Knowing*" represents understanding the client's experience and striving to understand an event as it has meaning in the life of the other.
- "*Being with*" includes being available and emotionally present to the other.
- "*Doing for*" entails competently doing for the other what he or she would do for self, if possible. Caregivers develop a healing environment, preserve dignity, and help the client navigate the healthcare system.
- "*Enabling/Informing*" is facilitating the other's passage through life transitions and unfamiliar events. Caregivers share knowledge to benefit others.
- "*Maintaining belief*" revolves around believing in the client's ability to make the best decisions. Caregivers demonstrate a sustaining faith in the other's capacity to get through an event or transition and face a future with meaning.

Collaboration

Collaboration is the collective effort to attain a shared goal: addressing health needs of individuals and groups and includes initiatives with communities of interest to decrease the impact of the social determinants of health (Schroeder, Malone, McCabe & Lipman, 2018). Collaborative communication requires mutual trust, recognition, and respect among the interprofessional healthcare team, shared decision-making about client care, and open dialogue among parties with an interest in and a concern for healthcare outcomes (ANA, 2015 & NLN, 2014).

Curiosity

Curiosity is necessary to pursue life-long learning. According to Benner et al. (2010), essential skills such as clinical reasoning, the skills of advocacy and inquiry, along with research must be facilitated by professionals who have a good understanding of the nursing profession. Curiosity is the tool of discovery for evidence-based practice.

PHILOSOPHY: NURSING AND HEALTH SCIENCES

The Nursing and Health Sciences philosophy statement aligns with Hartnell College's mission, vision, and core values. The Nursing and Health Sciences philosophy is a compilation of beliefs and values held by the faculty about health promotion, persons, environment, nursing, respiratory care, emergency medical services, healthcare, education, and learning. Guided by the core values of Comportment, Competence, Caring, Collaboration, and Curiosity, the faculty ascribes to a dynamic learning environment, incorporating new ideas, technology, and the foundational elements of safety, quality, and personal accountability.

Nursing and Health Sciences faculty and staff strive for an inclusive academic environment where students, faculty, and staff flourish. Faculty is responsive to the unique needs of each learner. Celebrating the strengths and past experiences of students and faculty fortifies and

enhances the learning environment. Faculty encourages student engagement by using adult education theories and experiential instructional methods, including clinical scenarios, high and low-fidelity simulation, application of theory to clinical practice, interprofessional learning activities, and reflective journaling. Faculty believes that modeling professional behaviors and promoting personal growth transforms students into graduates who are prepared for entry-level positions within their scope of practice and are ready to engage in leadership and lifelong learning. Values guide curriculum development and how faculty interact with students.

Learning is the process by which behavior changes as the individual acquires, retains, and applies knowledge, attitudes, skills, or modes of thought (Billings & Halstead, 2020); the ultimate responsibility for learning rests with the learner. Learning is active, and students construct meaning from experience. Nursing and Health Sciences learners are self-directed adults and pragmatic problem solvers; they propose solutions to real problems.

Teaching facilitates learning and requires mentors who value the learner as a person and understand the individual's learning needs (Billings & Halstead, 2020). Nursing and Health Sciences faculty creates learning environments that support engagement; learners are empowered by cognitive, constructivist, adult-learning, and authentic learning approaches.

Ethically, each healthcare professional builds the cognitive, psychomotor, and affective skills required to demonstrate competence in practice. Students adhere to ethical and professional standards that define safe and effective professional practice; competence alone is not enough to provide optimal care. They learn to adapt care to meet the individual's needs, values, and preferences because the "person" is a biopsychosocial system, seeking meaning and purpose while interacting with the environment. Students integrate innovative, evidence-based practice into clinical practice and use information and technology to manage data necessary for decision-making. Quality improvement measures mitigate errors and improve safety.

American Nurses Association (2015). *Code of ethics for nurses with interpretive statements.* Retrieved from ANA code of ethics

Benner, P., Sutphen, M., Leonard, V., & Day L. (2010). *Educating nurses: A call for radical transformation.* San Francisco, CA: Jossey-Bass.

Billings, D. M., & Halstead, J. A. (2020). *Teaching in nursing: A guide for faculty* (6th ed). Saint Louis, MO: Elsevier.

Clickner, D. A., & Shirey, M. R. (2013). Professional comportment: The missing element in nursing practice. *Nursing Forum, 48*(2), 106-113. doi:10.1111/nuf.12014

Halstead, J. (2018). *NLN core competencies for nurse educators: A decade of influence.* Philadelphia, PA: Elsevier/Wolters Kluwer.

Interprofessional Education Collaborative Expert Panel. (2016). *Core competencies for interprofessional collaborative practice: Report of an expert panel*. Washington, D.C.: Interprofessional Education Collaborative. Retrieved from IPEC 2016 update

Kalfoss, M. and Owe, J. (2015). Empirical verification of Swanson's Caring Processes found in nursing actions: Systematic Review. *Open Journal of Nursing*, 5, 976-986. doi: 10.4236/ojn.2015.511104.

National League for Nursing (2020). *Nursing education competencies.* Retrieved from https://www.nln.org/education/nursing-education-competencies.

National League for Nursing (2012). *Outcomes and competencies for graduates of practical/vocational, diploma, associate degree, baccalaureate, masters, practice doctorate, and research doctorate programs in nursing.* New York: National League for Nursing. Retrieved from Outcomes and Competencies

National League for Nursing (2014). *NLN practical/vocational curriculum framework: Guiding principles. Retrieved from* https://www.nln.org/docs/default-source/uploadedfiles/default-document-library/nln-practical-nursing-framework-guidelin

es-final.pdf?sfvrsn=6cd9df0d_0

Schroeder, K., Malone, S. K., McCabe, E., & Lipman, T. (2018). Addressing the social determinants of health: A call to action for school nurses. *The Journal of School Nursing*, *34*(3), 182–191. doi: 10.1177/1059840517750733

INTERPROFESSIONAL CORE COMPETENCIES

Interprofessional core competencies include four domains, essential values for healthcare professionals:

1. *Values/ethics for interprofessional practice*: Work with individuals of other professions to maintain a climate of mutual respect and shared values (IPEC, 2016)
2. *Roles/responsibilities*: Use the knowledge of one's own role and those of other professions to appropriately assess and address the healthcare needs of the clients and populations served. Of patients and to promote and advance the health of populations (IPEC, 2016).
3. *Interprofessional communication:* Communicate with clients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and the treatment of disease. (IPEC, 2016)
4. *Teams and teamwork*: Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan and deliver client/population-centered care that is safe, timely, efficient, effective, and equitable (IPEC, 2016; Schroeder, Malone, McCabe, & Lipman, 2018).

Interprofessional Education Collaborative. (2016). *Core competencies for interprofessional collaborative practice: 2016 update.* Washington, DC: Interprofessional Education Collaborative.

ASSOCIATE OF SCIENCE DEGREE IN REGISTERED NURSING

Degree Type: AS
Degree Name: Associate of Science, Registered Nursing

In 2018, Hartnell College, West Hills College, Cal. State-East Bay, and San Jose State University participated in the "Reframing Nursing Education Project" sponsored by the Kaiser-Permanente Fund for Health Education and Health Impact. The project's goal was to reframe nursing education to better prepare nurses for work in an expanded number of settings, both in and beyond acute care. Hartnell College's 5-C curriculum was implemented and approved by the CaBRN in the fall of 2020. The curriculum focuses on wellness and illness prevention and requires technology, data-informed decisions, and clinical judgment. The low-unit course of study was showcased nationally at the 2020 Organization of Associate Degree in Nursing Annual Conference and statewide at the 2021 California Organization for Education in Nursing meeting.

5C ASN CURRICULUM FOUNDATIONS

Hartnell College Associate of Science Degree in Nursing (ASN) faculty embraces the core values of comportment, competence, caring, collaboration, and curiosity. The unifying theme of the curriculum is the Nursing Process. The five core values, the Nursing Process, and metaparadigms of nursing (person, environment, health, and nursing), are the foundation for the curriculum.

The Nursing Process: Five Steps to Organize and Deliver Nursing Care

The first five standards of professional nursing practice of the American Nurses Association (2015) are expressed as the steps of the nursing process:

Assessment

> The nurse uses a systematic method to collect and code data about an individual as the first step in delivering nursing care. Assessment data includes physiological, psychological, sociocultural, spiritual, economic, and life-style information. For example, a nurse's assessment of an individual in pain includes physical causes and behavioral responses to pain. The individual's response to pain might include an inability to get out of bed, refusal to eat, withdrawal, expressed anger, or a request for pain medication.

Diagnosis

> The nursing diagnosis is the nurse's clinical judgment about the individual's response to actual or potential health conditions or needs and the basis for the nurse's plan of care. For example, the nursing diagnosis may reflect that the individual is in pain manifested by anxiety, inadequate nutrition, and immobility, or that the pain has the potential to cause complications, such as respiratory infection secondary to immobilization.

Outcomes/Planning

> Based on assessment and diagnosis, the nurse sets measurable and achievable short- and long-range goals—or desired outcomes—for each person. An example of a short-term goal is moving from bed to chair at least three times per day to improve mobility. An example of a long-term goal is attainment of independent mobility within one month. Outcomes and goals are communicated and incorporated in the plan of care.

Implementation

> Nursing care is implemented according to the plan of care. Continuity of care for the individual receiving hospital or community-based healthcare services must be assured.

Evaluation

> The individual's subjective and objective data are used to gauge the effectiveness of nursing care and are evaluated continually. The plan of care is modified as needed.

Metaparadigms of Nursing

The Metaparadigms of Nursing are components of the conceptual framework for Hartnell's ASN:

Person is a biopsychosocial adaptive system that seeks meaning and purpose, interacts with the environment, and is the recipient of care.

Environment is the internal or external surroundings that affect the person. It includes the biological, spiritual, social, cultural, political, economic, and systems-based factors that influence existence, development, and health of individuals, families, and communities.

Health is the degree of wellness, or well-being, that the person experiences. It is a dynamic state of being in which the developmental and behavioral potential of the individual, family, and/or community needs to be realized. Each has a right to quality healthcare and has a responsibility to participate in health maintenance according to each person's capabilities.

Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, facilitation of healing, alleviation of suffering through the diagnosis

and treatment of human response, and advocacy in the care of individual families, groups, communities, and populations. (ANA, 2015).

American Nurses Association. (2015). *Nursing: Scope and standards of practice* (3rd ed.). Silver Spring, MD: American Nurses Association.

American Nurses Association, Inc. (2017). *The nursing process*. Retrieved from https://www.nursingworld.org/practice-policy/workforce/what-is-nursing/the-nursing-process/

End of Program Student Learning Outcomes (EOPSLOs)

Upon successful completion of the Hartnell College Associate of Science Degree, Nursing, a student will be able to

1. incorporate leadership, management, and legal-ethical principles to guide practice as a professional nurse. (I. COMPORTMENT)
2. apply increasingly complex nursing judgment and theoretical concepts when providing safe nursing care to diverse individuals across the lifespan in a variety of settings. (II. COMPETENCE)
3. integrate caring into relationships and nursing interventions that positively influence health outcomes and demonstrate sensitivity to the values of others. (III. CARING)
4. communicate and collaborate with members of the interprofessional healthcare team to coordinate care and optimize health outcomes. (IV. COLLABORATION)
5. model a spirit of inquiry when examining data, challenging the status quo, questioning underlying assumptions, and offering new insights to improve quality of care. (V. CURIOSITY)

When formulating the EOPSLOs, faculty considered regulatory imperatives; national licensure examination topics; national accreditation and professional standards; best practices in nursing education; local stakeholder input; Hartnell College's vision, mission, and values; and current/projected trends in healthcare.

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The EOPSLOs align with Hartnell College's Institutional Student Learning Outcomes (ISLOs):

Nursing ASN Program: EOPSLO	HC: Institutional Student Learning Outcome
I. Incorporate leadership, management, and legal-ethical principles to guide practice as a professional nurse.	**Personal Growth:** Students will demonstrate ethical decision making, goal setting, and positive lifestyle choices.
II. Apply increasingly complex clinical judgment and theoretical concepts when providing safe nursing care to diverse individuals across the lifespan in a variety of settings.	**Inquiry and Reason**: Students will use analytical, creative, and critical thinking to evaluate ideas, predict outcomes and form conclusions and solutions.
III. Integrate caring into relationships and nursing interventions that demonstrate sensitivity to the values of others.	**Global Engagement:** Students will demonstrate global citizenship via knowledge of and interaction with civic participation, diverse cultures and people, and social justice advocacy.
IV. Communicate and collaborate with members of the interprofessional healthcare team to coordinate care and optimize health outcomes.	**Communication:** Students will effectively communicate to varied audiences via spoken, written, visual and other forms of communication.
V. Model a spirit of inquiry when examining data, challenging the status quo, questioning underlying assumptions, and offering new insights to improve quality of care.	**Information Competency**: Students will define information needs, utilizing appropriate technology and resources to access information efficiently and effectively, evaluate information critically, and use information ethically.
There is no specific ASN EOPSLO that correlates with Aesthetic Analysis and Application. Students meet this outcome in pre-requisite humanities courses and in their personal interactions.	**Aesthetic Analysis and Application:** Students will analyze, conceptualize, evaluate, and/or synthesize creative and artistic expressions applied via contents such as cultures and disciplines.

Course Leveling and Student Learning Outcomes

Course content and course student learning outcomes (CSLO) increase in complexity as semesters progress and represent the expected attainment of the five EOPSLOs. Course outcomes increase in complexity according to theoretical content and clinical requirements.

Leveled by Semesters

The curriculum levels and course sequencing prepare students to transition the knowledge and skills from a beginning level to integration of all previously acquired knowledge, skills, and competencies at the program's culmination. The sequencing allows the student to advance in terms of the complexity of the health problem (health promotion and basic care needs, stable conditions, complex conditions, and multi-system failure), the focus of care (client, client and family, the community as a client, multiple clients), and the complexity of care management (single client, client with family members, numerous clients, team leadership, and coordination of care). The courses are arranged into four levels in four semesters as follows:

- **Level 1/Semester 1**: Foundational knowledge of health, illness, and professional concepts, clinical judgment, and pharmacological principles needed to care for clients across the lifespan in a variety of settings. This level includes instruction in nursing assessment and basic psychomotor skills.

- **Level 2/Semester 2:** Continued development of clinical judgment, theoretical knowledge, and technical knowledge in the provision of nursing care of individuals and families with stable conditions across the lifespan in acute care and community settings.
- **Level 3/Semester 3:** Application of clinical judgment, theoretical knowledge, and technical knowledge in the provision of nursing care to individuals and families with complex physiological and psychological conditions in acute care and community settings.
- **Level 4/Semester 4:** Integration of all theoretical knowledge and technical knowledge in the provision of nursing care at an advanced level to prepare for practice as a Registered Nurse. Students care for individuals with potential or actual multi-system failure and assume the roles of team leader and care coordinator.

Leveled, End of Program Student Learning Outcomes

The student's ability to meet expected levels of competency is measured by defined, leveled EOPSLOs and the associated list of competencies (course objectives). Competencies are the measurable behaviors that the student demonstrates as understanding and knowledge advance.

Leveled End of Program Student Learning Outcomes by Semester

EOPSLO	Level 1/Sem 1	Level 2/Sem 2	Level 3/Sem 3	Level 4/Sem 4
I. COMPORTMENT	Identify and use legal-ethical, leadership, and management principles that focus on professional role acquisition.	Illustrate nursing actions consistent legal-ethical, leadership, and management principles in a variety of settings.	Demonstrate the ability to manage the care of multiple clients and the community "as a client," using legal-ethical principles.	Incorporate leadership, management, and legal-ethical principles to guide practice as a professional nurse.
II. COMPETENCE	Begin to use clinical judgment with a focus on health promotion and foundational concepts when providing safe nursing care to diverse individuals across the lifespan.	Explain the use of clinical judgment and theoretical concepts when providing safe nursing care for diverse individuals and families with stable conditions.	Demonstrate clinical judgment and analysis of theoretical concepts when providing safe nursing care to diverse individuals with complex physiological and psychological conditions.	Apply increasingly complex clinical judgment and theoretical concepts when providing safe nursing care to diverse individuals across the lifespan in a variety of settings.

III. CARING	Discover caring behaviors by being sensitive to the client's preferences based on gender, developmental stage/age, functional ability, family dynamics, health literacy, language, ethnicity/culture, and spiritual practices.	Express caring behaviors and sensitivity to the values of others when planning and implementing nursing care for diverse individuals and families.	Demonstrate caring and sensitivity when providing nursing care to clients with complex physiological and/or psychological conditions.	Integrate caring into relationships and nursing interventions that demonstrate sensitivity to the values of others.
IV. COLLABORATION	Identify and begin to establish collaborative relationships with clients and interprofessional healthcare team members.	Establish collaborative relationships through effective communication with members of interprofessional healthcare teams.	Use collaborative relationships with interprofessional healthcare team members to provide health-illness care across and within health care systems.	Communicate and collaborate with members of the interprofessional healthcare team to coordinate care and optimize health outcomes.
V. CURIOSITY	Relate a spirit of inquiry to examining data, challenging the status quo, and asking questions about underlying assumptions.	Express a spirit of inquiry when examining data, challenging the status quo, and questioning underlying assumptions while caring for diverse individuals and families.	Use a spirit of inquiry to examine data, challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for individuals with complex physiological and psychological conditions.	Model a spirit of inquiry when examining data, challenging the status quo, questioning underlying assumptions, and offering new insights to improve quality of care

ASN Concept-based Curriculum

The Hartnell College Associate of Science Degree in Nursing program uses a concept-based curriculum.

A concept is an organizing principle, or classification of information. A concept may be simple or complex in scope. Concepts can be considered building blocks for the curriculum, or the foundations of nursing theory. By gaining a deeper understanding of a core set of concepts, a student can recognize and understand similarities and recurring characteristics, which can be applied more effectively than memorized facts. Exemplars are examples of how a particular concept can be applied to a contextualized client situation." (Giddens, 2021, p. x.).

A concept-based curriculum promotes deep learning that is more generalizable and less context specific, thus allowing for application of knowledge to multiple settings across the lifespan and across the spectrum of health and illness (Brussow et al., 2019). Another advantage of a concept-based curriculum is less repetition of content. For example, the concept gas exchange

and its exemplar respiratory distress can be presented once using clients of different ages.

The nursing concepts are clustered in one of the 5Cs. Faculty identified and defined specific concepts that comprise the essentials of entry-level registered nursing practice. Concepts are threaded throughout the curriculum in a manner that facilitates acquisition of competencies, ultimately leading to student achievement of expected end-of-program outcomes.

Brussow, J.A., Roberts, K., Scaruto, M. Sommer, S., & Mills.C. (2019). Concept-based curricula: A national study of critical concepts. *Nurse Educator. 44*(1), 15-19. doi:10.1097/NNE.0000000000000515

Giddens, J.F. (2021). *Concepts for nursing practice* (3rd edition). St. Louis, MO: Elsevier.

ASN Program Concepts Arranged According to Each Core Value

I. Comportment	Ethics Health Law & Policies Leadership-Management Professional Identity
II. Competence	Clinical Judgment Safety Addiction Fluid and Electrolytes/Acid-base Balance Cognition Digestion Elimination Gas Exchange Grief and Loss/End of Life Hormonal Regulation Immunity/Cellular Regulation Infection/Inflammation Intracranial Regulation Mobility Mood and Affect Nutrition Pain Perfusion Psychosis Sensory Perception Sexuality/Reproduction Stress and Coping Tissue Integrity
	Culture and Spirituality Development Family Dynamics Functional Ability

IV. Collaboration	Health Care Organizations Economics Communication Collaboration & Core Coordination Health Promotion Health Care Disparities
V. Curiosity	Informatics Evidenced Based Practice Health Care Quality

COURSE SEQUENCING: ASSOCIATE OF SCIENCE DEGREE IN NURSING

Requisite Courses for Associate of Science Degree in Registered Nursing			
Semester 1			
Required Major Course	NRN 110	Foundations for Success for Registered Nursing Student	1
Required Major Course	NRN 46	Health Promotion & Foundational Health Concepts Across the Lifespan	6.5
Required Major Course	NRN 47	Social Determinants of Health	1.5
Required Major Course	NRN 48	Nursing Assessment and Interventions	1
Required Major Course	NRN 49	Introduction to Pharmacology and Medication Administration	1.5
		Subtotal Semester 1	11.5
Semester 2			
Required Major Course	NRN 56	Nursing Theory II	8
Required Major Course	NRN 57	Nursing Interventions and Scenarios	.5
Required Major Course	NRN 58	Application of Pharmacology Across the Lifespan	.5
		Subtotal Semester 2	9
Semester 3			
Required Major Course	NRN 66	Care of Clients with Complex Physiological and Psychological Conditions	8
		Subtotal Semester 3	8
Semester 4			
Required Major Course	NRN 76	Care of Clients with Potential or Actual Multi-system Failure	7
Required Major Course	NRN 77	Role Transition and Care Coordination Seminar	1
		Subtotal Semester 4	8
		Major Course Total Units	**36.5**

Required General Ed. Prerequisite and Major Courses			
Required General Course	BIO 5	Human Anatomy	4
Required General Course	NRN 70	Growth and Development across the Lifespan for the Healthcare Professional	3
Required General Course	SOC 1	Intro to Sociology	3
Required General Course	ENG 1A	College Composition and Reading	3
Required General Course	MAT 126	Quantitative Reasoning for Personal and Professional Life	4
Required General Course	COM 3	Survey of Human Communication	3
		General course subtotal	20
Required Major Course	BIO 6	Introductory Physiology	3
Required Major Course	BIO 6L	Physiology Laboratory	2
Required Major Course	BIO 27	Principles of Microbiology	4
Required Major Course	CHEM 22	The Science of Chemistry	4
		Major course subtotal	13
		Preadmission General and Major Course Total Units	**33**

Course descriptions are found in the 2023-2024 HC Catalog

VOCATIONAL NURSING

Degree Type: Certificate of Achievement
Degree Name: Certificate of Achievement, Vocational Nursing
or
Degree Type: Associate of Science
Degree Name: Associate of Science Degree, Vocational Nursing

Success in the Vocational Nursing Program requires applied theoretical knowledge, nursing skills proficiency, and professional comportment. The California Board of Vocational Nurses and Psychiatric Technicians (BVNPT) has approved the Hartnell College VN Program since 1954. In 2017, the vocational nursing program became the first in California to earn national accreditation from the Accreditation Commission for Education in Nursing (ACEN).

In 2019, a post-high school direct admission option was piloted. The purpose of the pilot program was to establish an engaging, supportive first-semester cohort experience for potential vocational nursing students taking prerequisite courses: English-1A, Math-123, Psychology-2, and Biology-11. Direct-admission students must achieve a 2.5 GPA to progress to vocational nursing courses.

5C VN CURRICULUM FOUNDATIONS

Nursing is an art and applied science that requires intellectual, interpersonal, and technical skills to assist clients in achieving optimum levels of wellness. Hartnell College vocational nursing faculty embraces the five core values: Comportment, Competence, Caring, Collaboration, and Curiosity.

The vocational nursing program of study has a scaffolded content framework, beginning with the introduction of basic nursing care and ending with leadership and management principles. Nursing theory, clinical judgment, skill development, cultural and ethical awareness, and clinical practice are integrated throughout the curriculum. Human flourishing, professional identity, the spirit of inquiry, and nursing judgment are incorporated. Safety, collaboration, professional development, and relationship-centered care align with current workforce trends (NLN, 2020).

The unifying theme of Hartnell's Associate of Science Degree in Vocational Nursing academic program is the Nursing Process, which the faculty adopted as the problem-solving guide to vocational nursing practice. Foundational pillars for the curriculum include the 5C core values, the Nursing Process, the National League for Nursing Outcomes and Competencies for Graduates of Vocational Nurses, the California vocational nurse scope of practice, and standards of nursing practice. The vocational nurse assists the registered nurse in applying the nursing process to provide nursing care within their scope of practice.

Assessment

    As the first step in delivering nursing care, the vocational nurse collects holistic assessment

data from multiple sources and communicates the data to appropriate healthcare providers. Assessment includes physiological, psychological, sociocultural, spiritual, economic, and life-style data. For example, a nurse's assessment of a person in psychological distress includes physical causes contributing to the distress, the person's interpretation of the situation, and the person's ability to respond based on the person's social capital.

Diagnosis

The nursing diagnosis is the person's clinical judgment about the person's response to actual or potential health conditions or needs. For example, the nursing diagnosis might reflect that an individual's pain is related to other problems such as anxiety, immobility, or conflict within the family. The nursing diagnosis is the basis for the plan of care. The vocational nurse collaborates with the healthcare team when determining nursing diagnoses and contributes to the plan of care within the LVN scope of practice.

Outcomes/Planning

Based on the assessment and diagnosis, the vocational nurse collaborates with the registered nurse, physician, therapists, and other members of the health care team to set measurable and achievable short- and long-range goals/desired outcomes for each person. An example of a short-term goal might be "maintain adequate nutrition by eating small, frequent meals for the next seven days." An example of long-term goals is "attain adequate nutrition as evidenced by a 10-pound weight gain in three months." Vocational nurses collaborate with members of the healthcare team to organize and incorporate assessment data to plan/revise patient care and actions based on established nursing diagnoses, nursing protocols, and assessment and evaluation data.

Implementation

The vocational nurse implements nursing care, at the direction of a registered nurse, physician, or dentist through performance of nursing interventions or directs aspects of care, as appropriate, to unlicensed assistive personnel.

Evaluation

The vocational nurse assists the healthcare provider by monitoring and recording a patient's status over time and reporting any deviations from the plan.

NLN Role-specific Competencies for Vocational Nurses

The six integrating concepts are the following:
- **Safety:** Safety is the foundation upon which all other aspects of quality care are built (NLN, 2010, p. 25). A nurse, who practices safely minimizes risk of harm to patients and providers through both system effectiveness and individual performance. Safe practice includes the individual's purposeful use of knowledge to provide safe care in a deliberate, skillful, and informed way.
- **Quality:** Quality is the degree to which health services to individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge (IOM, 2001). Quality is operationalized from an individual, unit and systems perspective (Halstead, 2018).
- **Team/Collaboration:** Team/collaboration refers to fostering open communication,

mutual respect, and shared decision-making to achieve quality patient care (NLN, 2014).

● **Relationship-Centered Care:** Core to nursing practice, relationship-centered care includes caring. It integrates and reflects respect for the dignity and uniqueness of others, valuing diversity, integrity, mutual trust, civility, self-determination, and regard for personal preferences and desires (NLN, 2010).

● **Systems-Based Care:** Nurses practice in systems of care to achieve health care goals. Nurses must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care of optimal value.

● **Personal/Professional Development:** This refers to the individual's formation within a set of recognized responsibilities. It includes the notion of good practice, boundaries of practice, and professional identity formation (NLN, 2010; Halstead, 2018). It also includes knowledge and attitudes derived from self-understanding and empathy, ethical questions and choices that are gleaned from a situation, awareness of patient needs, and other contextual knowledge.

Cronenwett, L., Sherwood, F., Barnsteiner, J., Disch, J., Johnson, J., Mitchell, P., et.al. (2007). *Quality and safety education for nurses.* Nursing Outlook, 55(3), 122-131.

Halstead, J. (2018). *NLN core competencies for nurse educators: A decade of influence.* Philadelphia, PA: Elsevier/Wolters Kluwer.

National League for Nursing. (2010). *Outcomes and Competencies for Graduates of Practical/Vocational, Diploma, Associate Degree, Baccalaureate, Master's, Practice Doctorate, and Research Doctorate Programs in Nursing.* New York: National League for Nursing (2014).

National League for Nursing (2014). *NLN practical/vocational curriculum framework: Guiding principles.* Retrieved from *https://www.nln.org/docs/default-source/uploadedfiles/default-document-library/nln-practical-nursing-framework-guidelines-final.pdf?sfvrsn=6cd9df0d_0*

End of Program Student Learning Outcomes (EOPSLOs)

Upon successful completion of the vocational nursing program, the student should be able to:

I. COMPORTMENT: Embody the role of the vocational nurse as a member of the health care team who is committed to providing highest standards of care, aligned with legal and ethical principles.

II. COMPETENCE: Demonstrate clinical judgment when providing safe care and promoting the health of persons and their families across the lifespan.

III. CARING: Promote the human dignity, integrity, self-determination, and personal growth of diverse persons.

IV. COLLABORATION: Optimize health outcomes through effective communication, mutual respect, and shared decision-making with the client, family, and health care team in the context of health care systems.

V. CURIOSITY: Question the basis for nursing actions considering research, evidence, existing practice, and client preferences to improve the quality of care.

The Vocational Nursing EOPSLOs align with these five core values and the Hartnell College's

Institutional Student Learning Outcomes (ISLOs):

Nursing VN Program Core Values	HC: Institutional Student Learning Outcome
I. Articulate the role of the vocational nurse as a member of the health care team, committed to provide safe, quality care for diverse persons and their families.	**Personal Growth:** Students will demonstrate ethical decision making, goal setting, and positive lifestyle choices.
II. Provide rationale for judgments used in the provision of safe, quality care and for decisions that promote the health of persons.	**Inquiry and Reason**: Students will use analytical, creative, and critical thinking to evaluate ideas, predict outcomes and form conclusions and solutions.
III. Promote the human dignity, integrity, self-determination, and personal growth of persons, oneself, and members of the health care team.	**Global Engagement:** Students will demonstrate global citizenship via knowledge of and interaction with civic participation, diverse cultures and people, and social justice advocacy.
IV. Achieve quality care through effective communication, mutual respect, and shared decision making with the health care team.	**Communication:** Students will effectively communicate to varied audiences via spoken, written, visual and other forms of communication.
V. Question the basis for nursing actions, considering research, evidence, tradition, and personal preferences.	**Information Competency**: Students will define information needs, utilizing appropriate technology and resources to access information efficiently and effectively, evaluate information critically, and use information ethically.
There is no specific VN EOPSLO that correlates with Aesthetic Analysis and Application. Students meet this outcome in pre-requisite humanities courses.	**Aesthetic Analysis and Application:** Students will analyze, conceptualize, evaluate, and/or synthesize creative and artistic expressions applied via contents such as cultures and disciplines.

VN Course Leveling and Outcomes

Courses are designed for each semester level. Each course has outcomes that represent the expected culmination of course learning experiences and support the attainment of the five EOPSLOs. Course outcomes are adapted for each course according to the complexity of theoretical content and clinical requirements.

Level by Semesters
The curriculum levels and course sequencing progress students from beginner knowledge and skills in semester one to integration of previously acquired knowledge, skills, and competencies in semester three. Students advance through the course sequence that scaffolds the complexity of care delivery and management. Courses are arranged in three levels offered in sequential semesters as follows:
- **Level 1/Semester 1**: Level 1/Semester 1: Foundational knowledge of health, illness, and professional concepts, clinical judgment, and pharmacological principles needed to care for clients across the lifespan in a variety of settings. This level includes instruction in nursing assessment and basic psychomotor skills.
- **Level 2/Semester 2:** Level 2/Semester 2: Continued development of clinical judgment, theoretical knowledge, and technical knowledge in the provision of nursing care to individuals and families with stable conditions across the lifespan in acute care and community settings.
- **Level 3/Semester 3:** Application of clinical judgment, theoretical knowledge, and

technical knowledge in the provision of nursing care to individuals and families with physiological and psychological conditions in acute care and community settings. Integration of all theoretical knowledge and technical knowledge in the provision of nursing care as a novice vocational nurse. Students act as a team leader under the supervision of a licensed professional and assist with care coordination.

Leveled, End of Program Student Learning Outcomes

The student's ability to meet expected levels of competency will be measured by defined, leveled EOPSLOs and their associated list of competencies (course objectives). These competencies are the measurable behaviors that the students demonstrate as their understanding and knowledge advances.

EOPSLO	Level 1	Level 2	Level 3
COMPORTMENT	Describe and practice the role of the vocational nurse in accordance with legal, ethical and professional principles.	Perform the role of the vocational nurse as a member of the health care team, consistent with legal, ethical and professional principles.	Embody the role of the vocational nurse as a member of the health care team who is committed to providing the highest standards of care, aligned with legal and ethical principles.
COMPETENCE	Describe and practice clinical decision-making that is needed to provide basic care and comfort.	Demonstrate beginning clinical judgment when providing safe care and promoting the health of persons and their families across the lifespan	Demonstrate clinical judgment when providing safe care and promoting the health of persons and their families across the lifespan.
CARING	Recognize caring behaviors that contribute to human dignity, integrity, self-determination, and personal growth of diverse individuals, with a focus on the client's needs.	Use caring behaviors that support human dignity, integrity, self-determination, and personal growth of diverse persons, including clients and family members.	Promote the human dignity, integrity, self-determination, and personal growth of diverse persons.
COLLABORATION	Practice effective communication, mutual respect, and shared decision-making with healthcare team members when providing nursing care.	Demonstrate effective communication, mutual respect, and shared decision-making with the client, family, healthcare team when providing nursing care in a variety of healthcare settings.	Optimize health outcomes through effective communication, mutual respect, and shared decision-making with the client, family, and health care team in the context of health care systems.
CURIOSITY	Identify evidence, client preference, and/or traditional practice as the basis for nursing actions.	Compare research and evidence to traditional practices and client preferences when determining the basis for nursing actions.	Question the basis for nursing actions considering research, evidence, existing practice, and client preferences to improve the quality of care.

VN CONCEPT-BASED CURRICULUM

Nursing is an art and applied science that requires intellectual, interpersonal, and technical skills to assist clients in achieving optimum levels of wellness. Hartnell College vocational nursing faculty embraces the five core values: Comportment, Competence, Caring, Collaboration, and Curiosity.

The Hartnell College Vocational Nursing program uses a concept-based curriculum. A concept is an organizing principle, or classification of information. Concepts may be simple or complex in scope and can be considered building blocks for the curriculum, or the foundations of nursing theory. A student can recognize and understand similarities and recurring characteristics by gaining a deeper understanding of a core set of concepts. Students apply concepts more effectively than memorized facts. Exemplars are examples of how a particular concept applies to a contextualized client situation." (Giddens, 2021, p. x.).

A concept-based curriculum promotes deep learning that is more generalizable and less context-specific, thus allowing for the application of knowledge to multiple settings across the lifespan and across the spectrum of health and illness (Brussow et al., 2019). Another advantage of a concept-based curriculum is less repetition of content. For example, the concept "fluid and electrolytes" and its exemplar "fluid loss" can be presented once using clients of different ages.

Faculty clustered the nursing concepts around each of the five core values. They identified and defined specific concepts that comprise the essentials of entry-level vocational nursing practice. The concepts are threaded throughout the curriculum to facilitate the acquisition of competencies, ultimately leading to student achievement of expected end-of-program outcomes.

Brussow, J.A., Roberts, K., Scaruto, M. Sommer, S., & Mills. C. (2019). Concept-based curricula: A national study of critical concepts. *Nurse Educator. 44*(1), 15-19. doi:10.1097/NNE.0000000000000515

Giddens, J.F. (2021). *Concepts for nursing practice* (3rd edition). St. Louis, MO: Elsevier.

VN Program Concepts Arranged According to Each Core Value

I. Comportment	Ethics Health Law & Policies Leadership-Management Professional Identity
II. Competence	Clinical Judgment Safety Addiction Fluid and Electrolytes/Acid-base Balance Cognition Elimination Gas Exchange Hormonal Regulation Immunity/Cellular Regulation

	Infection/Inflammation Intracranial Regulation Mobility Mood and Affect Nutrition Pain Perfusion Psychosis Sensory Perception Sexuality/Reproduction Stress and Coping Tissue Integrity
III. Caring	Culture and Spirituality Development Family Dynamics Functional Ability
IV. Collaboration	Health Care Organizations Economics Communication Collaboration & Care Coordination Health Promotion Health Disparities
V. Curiosity	Informatics Evidenced Based Practice Health Care Quality

COURSE SEQUENCING: AS DEGREE, VOCATIONAL NURSING

Required General Ed. Prerequisite Courses for Vocational Nursing Program			
Required General Ed.	ENG-1A or ENG-1AX	College Composition and Reading/Multicultural Perspectives.	3 (4)
Required General Ed.	MAT-126	Intermediate Algebra	4
Required General Ed.	HES-120[1]	American Heart Association Basic Life Support for HealthCare Professionals	(0.5)
Required General Ed.	BIO-11*	Introductory Human Anatomy & Physiology	4
Required General Ed.	PSY-2*	General Psychology	3
Required General Ed.	LIB-6 or	Information Competency in Social Science *or* Communication and Analytic Thinking course	1 (3)
Required General Ed.	ETH 4 *or* 56	Ethnic Group course	3
Required General Ed.		Humanities Group Course	3
		Pre-admission General Education and Major Course Total	21 units

Requisite Major Courses for AS, Vocational Nursing			
Semester 1			
Required Major Course	NUTR-51 * *or* NUTR-1	Essentials of Nutrition *or* Nutrition	3
Required Major Course	NVN/NRN 70 *or*	Growth and Development Across the Lifespan *or* Developmental Psychology: Lifespan	3

	PSY 25		
Required Major Course	NVN 110	Foundations for Success for Vocational Nursing Students	1
Required Major Course	NVN-119	Vocational Nursing Theory I: Fundamentals	4
Required Major Course	NVN-119.1	Vocational Nursing Clinical I: Fundamentals	4
Required Major Course	NVN-130 A	Basic Pharmacology A	1
		Subtotal Semester 1	16 units
Semester 2			
Required Major Course	NVN 121	Vocational Nursing Theory II: Health Promotion and Maintenance Across the Lifespan	6.5
Required Major Course	NVN 121.1	Vocational Nursing Clinical II: Health Promotion and Maintenance Across the Lifespan	6.5
Required Major Course	NVN 130 B	Basic Pharmacology B	1
		Subtotal Semester 2	14 units
Semester 3			
Required Major Course	NVN 123	Vocational Nursing Theory III: Coordination of Care	6.5
Required Major Course	NVN 123.1	Vocational Nursing Clinical III: Coordination of Care	6.5
Required Major Course	NVN 130 C	Basic Pharmacology C	1
		Subtotal Semester 3	14 units
		Degree Total	**65 units**

*Prerequisite and requisite courses marked with an asterisk must be completed within five (5) years of entering the vocational nursing program per California Code of Regulations, Title 16: Professional Regulations, Division 25: Board of Vocational Nursing and Psychiatric Technicians of the State of California.

[1] AHA BLS Healthcare Professional card must be current throughout the program. Not required to apply. Must be completed prior to NVN 119.

COURSE SEQUENCING: VN CERTIFICATE OF ACHIEVEMENT

Required Prerequisite for Vocational Nursing Program			
Required Prerequisite	ENG-1A or ENG-1AX	College Composition and Reading/Multicultural Perspectives.	3 (4)
Required Prerequisite	MAT-121# or MAT-106	Elementary Algebra Integrated Mathematics	(5) 3
Required Prerequisite	HES-120[1]	American Heart Association Basic Life Support for Health Care Professionals	(0.5)
Required Prerequisite	BIO-11*	Introductory Human Anatomy & Physiology *or* BIO-5* Human Anatomy *and* BIO-6* Introductory Physiology *and* BIO-6L* – Physiology Lab	4 (4) (3) (2)
Required Prerequisite	PSY-2*	General Psychology	3
		Subtotal Preadmission	13 units
Semester 1			
Required Major Course	NUTR-51 * *or* NUTR-1	Essentials of Nutrition *or* Nutrition	3 (3)
Required Major Course	NVN/NRN 70* *or* PSY 25	Growth and Development Across the Lifespan *or* Developmental Psychology: Lifespan	3 (3)
Required Major Course	NVN 110	Foundations for Success for Vocational Nursing Students	1
Required Major Course	NVN-119	Vocational Nursing Theory I: Fundamentals	4
Required Major Course	NVN-119.1	Vocational Nursing Clinical I: Fundamentals	4
Required Major Course	NVN-130 A	Basic Pharmacology A	1
		Subtotal Semester 1	16 units
Semester 2			
Required Major Course	NVN 121	Vocational Nursing Theory II: Health Promotion and Maintenance Across the Lifespan	6.5
Required Major Course	NVN 121.1	Vocational Nursing Clinical II: Health Promotion and Maintenance Across the Lifespan	6.5
Required Major Course	NVN 130 B	Basic Pharmacology B	1
		Subtotal Semester 2	14 units
Semester 3			
Required Major Course	NVN 123	Vocational Nursing Theory III: Coordination of Care	6.5
Required Major Course	NVN 123.1	Vocational Nursing Clinical III: Coordination of Care	6.5
Required Major Course	NVN 130 C	Basic Pharmacology C	1
		Subtotal Semester 3	14 units
		Certificate of Achievement Total	**57 units**

*Prerequisite and requisite courses marked with an asterisk must be completed within five (5) years of entering the vocational nursing program per California Code of Regulations, Title 16: Professional Regulations, Division 25: Board of Vocational Nursing and Psychiatric Technicians of the State of California.
¹AHA BLS Healthcare Professional card must be current throughout the program. Not required to apply. Must be completed prior to NVN 119.
Mat-121 and -106 are no longer offered. Students must take higher level courses.

RESPIRATORY CARE

Degree Type: AS
Degree Name: Associate of Science, Respiratory Care

The Associate of Science in Respiratory Care prepares students to work as registered respiratory therapists (RRTs) in acute and community-based healthcare settings such as hospitals, long-term care facilities, home care, and clinics. Registered respiratory therapists help people of all ages with various cardiopulmonary disorders. Responsibilities of an RRT include:
- Evaluating and interpreting clinical and laboratory data to recommend treatment.
- Consulting with members of the healthcare team.
- Educating patients and families.
- Responding to emergencies.
- Managing individuals on life support.

The four-semester course of study consists of classroom, high-fidelity simulation, skills laboratory, seminar, and clinical experiences. Clinical experiences occur in Monterey, Santa Clara, San Luis Obispo, and Santa Barbara counties. Upon completion of program requirements, graduates are eligible to take the National Board of Respiratory Care (NBRC) Registry Examination. The program holds continuing accreditation status from the Commission on Accreditation for Respiratory Care (CoARC)

In 2019, the American Association for Respiratory Care (AARC) published support to advance educational requirements for respiratory therapists. The recommendation to make a bachelor's degree the entry into practice degree was based on the understanding that the respiratory therapist's role has advanced significantly: growth in scope of practice, complexity of clinical skills, and diversity of care sites (CSRC, 2021). In 2020, more than 60% of directors of respiratory care academic programs in California agreed with the leaders of the AARC, CoARC, and National Board of Respiratory Care, who recommended that entry into practice should be at the baccalaureate level (Centers of Excellence for Labor Market Research, 2021). If the recommendation passes, the entry-into-practice degree requirement will change from associate to bachelor's for new respiratory care practitioners beginning in 2030.

In spring 2023, Hartnell College was approved by the California Community College Chancellor's Office (CCCCO) to offer a Bachelor of Science, Respiratory Care (BSRC) degree. When the Hartnell College substantive change proposals to CoARC and Accreditation Commission for Colleges and Junior Colleges are approved, Hartnell College will offer an affordable BSRC degree advancement program in the high priority, high salary respiratory care discipline. Establishing the BSRC program before 2030 will position Hartnell as a leader in California, providing necessary education in advance of anticipated needs.

California Society for Respiratory Care (CSRC). (2021). Education requirements for respiratory care practitioners. Retrieved from
    https://www.csrc.org/assets/docs/Final%20CSRC%20Position%20Statement%20Minimal%20Education%20Requirements.pdf
Centers of Excellence for Labor Market Research (2021). Program endorsement brief: 1210.00/respiratory care/therapy. Retrieved from
    https://www.regionalcte.org/storage/lmi/519--1210.00_Respiratory%20Care_SantaMonica_April21_Salvador%20Santana.pdf

RCP CURRICULUM FRAMEWORK

The program utilizes a competency-based education framework modeled after the competencies established by the American Association for Respiratory Care (AARC) task force in 2010. The task force identified the skills, knowledge, and competencies necessary for respiratory therapists (RTs) to provide optimal care (Barnes et al., 2010). The competencies are grouped into seven major areas that include:

1. Diagnostics
2. Disease Management
3. Evidence-based medicine and respiratory care protocols
4. Patient Assessment
5. Leadership
6. Emergency and Critical Care
7. Therapeutics

In addition to gaining competence in the seven major domains expected of respiratory care graduates, "all health professionals should be educated to deliver patient-centered care as members of an interdisciplinary team, emphasizing evidence-based practice, quality improvement approaches, and informatics" (Institute of Medicine, 2003, p. 3). Five core competencies for all health professionals were identified by the Institute of Medicine (IOM) in 2003. RCP students demonstrate the following interprofessional competencies:

1. **Provide patient-centered care**. Identify, respect, and care about people. Differences, values, preferences, and expressed needs; relieve pain and suffering; coordinate continuous care; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of health lifestyles, including a focus on population health
2. **Work in interdisciplinary teams**. Cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable
3. **Employ evidence-based practice**. Integrate best research with clinical expertise and patient values for optimum care, and participate in learning and research activities to the extent feasible
4. **Apply quality improvement**. Identify errors and hazards in care; understand and implement basic safety design principles, such as standardization and simplification; continually understand and measure quality of care in terms of structure, process, and outcomes in relation to patient and community needs; and design and test interventions to change processes and systems of care, with the objective of improving quality
5. **Utilize informatics**. Communicate, manage knowledge, mitigate error, and support

decision making using information technology (IOM, 2003, p. 45-46)

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DEFINITIONS

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Competence

The full array of knowledge, skills, attitudes, and other characteristics (KSAOs) for completing a task or course of study or performing a job, rather than simply knowledge alone (Calhoun, Wrobel, & Finnegan, 2011, p. 152).

Competencies

Written statements describing the measurable set of specific knowledge, skills, and affective behaviors expected of graduates (CoARC, 2012, p. 10).

Interprofessional Competencies

Integrated enactment of knowledge, skills, and values/attributes that define working together across the professions, with other healthcare workers, and with patients, along with families and communities, as appropriate to improve health outcomes in specific care contexts (IEC Expert Panel, 2011).

Barnes, T.A., Gale, D. D., Kacmarek, R. M., & Kageler, W. V. (2010). Competencies needed by graduate respiratory therapists in 2015 and beyond. *Respiratory Care*, 55(5), 601-616.

Calhoun, G., Wrobel, C. A., & Finnegan, J. R. (2011). Current state in U.S. public health competency-based graduate education. *Public Health Reviews, 33*, 148-167.

CoARC (2012). *Competency based education: A review of policies and implications for respiratory care education*. Bedford, TX: Commission on Accreditation for Respiratory Care.

IEC Expert Pane. (2011). *Core competencies for interprofessional collaborative practice: Report of an expert panel*. Washington, DC: Interprofessional Education Collaborative.

Institute of Medicine. (2003). *Health professions education: A bridge to quality*. Washington, DC: The National Academies Press.

Richards, J., & Rogers, T. (2001). *Approaches and methods in language teachings*. New York: Cambridge University Press.

<div align="center">

PROGRAM OUTCOMES

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The Hartnell College Respiratory Care Program provides skilled graduates to the healthcare community who have obtained their professional license (RCP) and registered respiratory therapy (RRT) credentials. The goal is to prepare graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains of respiratory care practice as performed by registered respiratory therapists (RRTs).

Upon successful completion of the Respiratory Care (RCP) program a student will
1. Comprehend, apply, and evaluate information necessary to practice as a respiratory care practitioner(cognitive) as evidenced by their ability to
    a. evaluate data to assess the appropriateness of prescribed respiratory care.
    b. participate in the development and modification of respiratory care plans in a variety of settings.
    c. provide patient, family, and community education.
2. Perform the skills competently as a respiratory care practitioner (psychomotor) as

evidenced by their ability to

    a. apply problem-solving strategies in the patient care setting.

    b. Perform respiratory therapeutic and diagnostic procedures interventions in a timely manner consistent with patient safety and infection control standards.

3. Practice professional attitudes and behavior (affective) as evidenced by their ability to

    a. demonstrate ethical and professional behaviors.

    b. demonstrate effective oral and written communication skills.

    c. interact effectively with other members of the healthcare team.

    d. Communicate effectively in diverse groups while respecting beliefs and values of all persons.

RESPIRATORY CARE PRACTITIONER COURSE SEQUENCING

Requisite Courses for Associate Degree of Science, Respiratory Care Practitioner			
Semester 1			
Required Major Course	RCP 110	Foundations for Success	1.5
Required Major Course	RCP 50	Respiratory Care Responsibilities	1.5
Required Major Course	RCP 51	Pharmacology and Medication Administration	3
Required Major Course	RCP 52	Cardiopulmonary Anatomy and Physiology	2
Required Major Course	RCP 53	Foundational Skills	1
Required Major Course	RCP 54	Supervised Practice: Foundations	0.5
Required Majoor Course	RCP 110	Foundations for Success	1.5
		Subtotal Semester 1	9.5 units
Semester 2			
Required Major Course	RCP 60	Diagnostic Studies and Respiratory Care	3
Required Major Course	RCP 61	Respiratory Therapeutics	3
Required Major Course	RCP 62	Cardiopulmonary Pathophysiology	2
Required Major Course	RCP 63	Beginning Clinical Experience	4
	RCP 64	Supervised Practice: Beginning	0.5
		Subtotal Semester 2	12.5 units
Semester 3			
Required Major Course	RCP 70	Neonatal and Pediatric Respiratory Care	2
Required Major Course	RCP 71	Basic Mechanical Ventilation	3
Required Major Course	RCP 72	Neurologic and Traumatic Conditions	2
Required Major Course	RCP 73	Intermediate Clinical Experience	4
	RCP 74	Supervised Practice: Intermediate	0.5
		Subtotal Semester 3	11.5 units
Semester 4			
Required Major Course	RCP 80	Advanced Life Support	1.5
Required Major Course	RCP 81	Advanced Mechanical Ventilation	3
Required Major Course	RCP 82	Clinical Reasoning Seminar	2
Required Major Course	RCP 83	Advanced Clinical Experience	4
Required Major Course	RCP 84	Supervised Practice: Advanced	0.5
		Subtotal Semester 4	11 units
		Major Course Total	**44.5 units**

Course Descriptions are in the HC Catalog and on the Nursing and Health Sciences website.

EMERGENCY MEDICAL TECHNICIAN AND HEALTH SCIENCES

Degree Type: Certificate of Achievement
Degree Name: Certificate of Achievement, Emergency Medical Technician **or**
Certificate of Completion: EMT-53

MISSION STATEMENT

The Hartnell College Emergency Medical Technician (EMT) certification prepares individuals to render pre-hospital basic life support at the scene of an emergency, during transport of the sick and injured, and during inter-facility transfer within an organized emergency medical system.

Classroom, learning laboratories, and clinical settings provide opportunities to gain proficiency in theoretical knowledge and in application of basic life support skills required to function as an EMT. Upon completion of EMT-53 course requirements, students are issued a Course Completion Certificate that is required for EMT certification through the California Emergency Medical Services Agency.

Students interested in a more comprehensive academic program enroll in the EMT: Certificate of Achievement (EMTCA) option, which is designed to meet the needs of current students and in-service EMT professionals interested in career advancement and those seeking to advance their EMT knowledge. The EMTCA curriculum is structured to ensure gradual, systematic, and comprehensive attainment of the practical knowledge, skills, and abilities desired by both private and public organizations. Also, the EMTCA provides an excellent foundation for pursuing paramedic and related degree programs. The EMTCA includes the EMT-Basic: National Standard Curriculum.

EMT DEPARTMENT OF TRANSPORTATION CURRICULUM STATEMENT

The Hartnell College EMT Training Program uses The National EMS Education Standards which outline the minimal competencies for entry-level EMS clinicians to perform their roles as outlined in the 2019 and 2021* updated National EMS Scope of Practice Model. which includes learning objectives, skills protocols, and treatment guidelines. The curriculum is met by the use of Brady's 14th edition Emergency Care Textbook (2020) and workbook, and related materials. Instructors utilize the Brady 14th edition Emergency Care Instructor Resources Guide (2020).

EMT PROGRAM POLICIES AND GUIDELINES

A field EMT is self-reliant, motivated, and works as a team member when providing care to the ill or injured. To achieve competence and keep pace with content delivery, students study at least two hours for every classroom hour. Students are encouraged to incorporate the team approach to learning by establishing study groups.

Starting in fall 2023, EMT students can choose between taking the EMT course (EMT-53) or combining the course with others to earn a Certificate of Achievement. The EMT-basic course curriculum is highly demanding, requiring students to demonstrate competency in cognitive, psychomotor, and affective domains. Students must work well with other students, instructional staff, pre-hospital/clinical personnel, and patients. During this course, the student works hard and experiences academic and situational challenges.

Students must come prepared for lectures and skills classes by studying the topics before the lecture and practicing skills outside the classroom. Students prepare academically for work in which they are responsible for the lives and well-being of individuals, crew partners, and themselves. It is the responsibility of the instructors to provide a classroom environment intended to help students gain proficiency and confidence in the knowledge and skills required to succeed as an EMT. After successfully completing the EMT-basic course and the National Registry of Emergency Medical Technicians (NREMT) cognitive examination, the student is considered a "safe beginner" in the challenging field of pre-hospital emergency care.

Attendance

The EMT curriculum is taught to standards set by the State of California. A minimum number of academic hours is required. Certain lectures are mandatory. Compulsory requirements allow for no more than eight (16) hours of absence during the entire course. More than eight (16) hours of absence results in the student being ineligible for the NREMT Cognitive examination. Attendance is taken at the beginning and end of each class. Students who leave during the class are marked absent for that class period. It is the responsibility of the student to adjust personal circumstances and work schedules to meet the minimum State and Hartnell College requirements for attendance. There is no tolerance for disruptive behavior or distractions during classroom sessions, clinical observations, or ambulance ride-alongs.

Convictions

Students convicted of crimes must check with the emergency medical service agency to determine eligibility for county certification. The NREMT felony conviction policy is available from the instructor or at NREMT Felony Conviction Policy under general policies. Failure to report convictions results in automatic denial or revocation of certification per state law. Students must consult with the EMT Program Director for further information.

Prior Denial, Suspension, or Revocations of Certification

State law requires the local EMS agency to investigate any prior denial of certification for pre-hospital care in any capacity, and/or suspension, or revocation. Students are encouraged to contact the EMT Program Director for details.

Open Door Policy

Hartnell College and the EMT instructors practice an open-door policy. It is expected that the student anticipates and resolves issues as they arise to the best of one's ability. Should there be a need for further assistance, students may contact the Dean of Academic Affairs, Nursing and Health Sciences directly or through the contact information provided.

AMBULANCE/EMERGENCY ROOM OBSERVATION GENERAL INFORMATION

Student learning outcomes include successful completion of requisite clinical hours and patient contacts to qualify for certification. American Medical Response is the primary 911 ambulance provider in Monterey County and is used for ambulance ride-along experiences. Natividad and Salinas Valley Health are used for emergency room observations. The student must maintain a 70% in the course to participate in these observations. The student must comply with all regulations imposed by clinical partners, including appropriate dress and hygiene. Students who show up unprepared, late, or exhibiting behaviors that might place themselves or others at risk may be sent home by the preceptor.

PROGRAM OUTCOMES: EMT CERTIFICATE OF ACHIEVEMENT

Upon completion of the Emergency Medical Technician - Level 1 certificate, students will
1. Apply scientific knowledge in providing prehospital and emergency medical care.

2. Use effective communication and interpersonal skills with patients and other healthcare workers.
3. Operate within the role of an entry-level provider of care and contributor to the emergency medical service profession.
4. Demonstrate high prehospital and emergency medical practice standards in skill performance and patient advocacy.
5. Provide competent and safe care in a variety of settings to a group of patients with diverse needs across the life span by demonstrating knowledgeable decision-making and judgment based on critical thinking, clinical competence, accountability, and collaboration with the patient and healthcare team
6. To promote the personal and professional growth, health, and success of each student.
7. To promote the concept of lifelong learning, including the pursuit of advanced degrees and advanced practice in the health field.
8. To prepare graduates who are eligible to seek licensure as EMTs and meet emergency medical service professional expectations.

COURSE SEQUENCING CERTIFICATE OF ACHIEVEMENT IN EMT

Requisite Courses for the Certificate of Achievement in EMT			
Required Major Course	HES-80	Medical Terminology	3
Required Major Course	MAT-106*	Integrated Mathematics	3
Required Major Course	ENG-106*	Composition and Reading for CTE	3
Required Major Course	EMT-53	Emergency Medical Technician	9
		Total	18 units

or higher level. (Mat-106 and ENG-106 were discontinued in 2022)

Course descriptions are located in the Hartnell College Course Catalog and on the EMT webpage.

EMT 53 Course Co-requisite
HES-120 AHA Basic Life Support for Healthcare Providers, or another AHA BLS equivalent, is a prerequisite to EMT-53. HES-120 provides a current Basic Life Support (BLS) Provider certification card issued by the American Heart Association.

PUBLIC HEALTH SCIENCE

Degree Type: AS-T
Degree Name: Associate of Science, Public Health Science

According to the American Public Health Association, "public health promotes and protects the health of people and the communities where they live, learn, work and play." (American Public Health Association, 2017). Public health workers conduct scientific research, track disease outbreaks, prevent injuries, improve environmental conditions, and explore health disparities. The public health degree is interdisciplinary in nature. Graduates are prepared for a variety of careers in schools, non-profit organizations, government agencies, hospitals, and wellness programs.

The Associate of Science Degree in Public Health for Transfer is an articulated curricular track for students who wish to transfer to baccalaureate degree programs at a California State University campus in areas such as public health, health science, kinesiology with a health education or a health and wellness promotion concentration, collaborative health and human services with community health option, and related fields.

Hartnell College and CSU, Monterey Bay are collaborating on a 2+2 academic pathway that will result in a Bachelor's of Science Degree in Public Health. Program and course descriptions are in the Hartnell College Catalog and on the Nursing and Health Sciences webpages.

American Public Health Association (2017). What is public health? Retrieved from What is public health?

PROGRAM OUTCOMES

Upon successful completion of the Public Health Science program, a student should be able to

- describe social, political, and economical issues that impact public health and healthcare delivery systems in the United States.
- explain how functional anatomy and physiological regulation affect health and wellness.
- apply basic epidemiological principles used to study patterns of disease and injury among diverse populations.
- explain how social, behavioral, cultural, and environmental factors impact the health status of individuals and populations.
- demonstrate effective communication and problem-solving skills necessary for addressing contemporary public health issues.

 California Community Colleges offer associate degrees for transfer to the CSU. These may include Associate of Arts (AA-T) or Associate of Science (AS-T) degrees. These degrees are designed to provide a clear pathway to a CSU major and baccalaureate degree. California Community College students who are awarded an AA-T or AS-T degree are guaranteed admission with junior standing somewhere in the CSU system and given priority admission consideration to their local CSU campus or to a program that is deemed similar to their community college major. Priority does not guarantee admission to specific majors or campuses. Students who have been awarded an AA-T or AS-T are able to complete their remaining requirements for the 120-unit baccalaureate degree with 60 semester or 90 quarter units.

To earn this degree, students must meet the following requirements:
- Complete 60 CSU-transferable semester units.
- Achieve a minimum grade point average (GPA) of at least 2.0 in all CSU-transferable coursework. While a minimum of 2.0 is required for admission, some majors may require a higher GPA. Please consult with a counselor for more information.

- Complete a minimum of 18 semester units in an "AA-T" or "AS-T" major as detailed in the degree section of the catalog. All courses in the major must be completed with a grade of "C" or better or a "P" if the course is taken on a "pass-no pass" basis (title 5 § 55063).
- Certify completion of the California State University General Education-Breadth pattern (CSU GE Breadth) (see page 80 of the Hartnell College Catalog for more information)
- No additional local Associate degree requirements are applied.

COURSE SEQUENCING: PUBLIC HEALTH SCIENCE

REQUIRED MAJOR COURSES	Course No.	Course Title	Units
Required Major Course	BIO-10	General Biology	4
Required Major Course	BIO-5	Human Anatomy with lab	4
Required Major Course	BIO-6, 6L	Human Physiology and lab	5
Required Major Course	CHM-22 *or* CHM-1A	The Science of Chemistry General Chemistry I	4 (5)
Required Major Course	HED-2	Individual Health	3
Required Major Course	HES-1	Introduction to Public Health	3
Required Major Course	MAT-13	Elementary Statistics	5
Required Major Course	PSY-2	General Psychology	3
		SUBTOTAL UNITS	**(31-32)**
REQUIRED MAJOR ELECTIVES (Select 1)	Course No.	Course Title	Units
Required Major Elective	ECO-1	Principles of Macroeconomics	3
Required Major Elective	ECO-5	Principles of Microeconomics	3
Required Major Elective	HES-2	Health and Social Justice	3
Required Major Elective	HES-3	Drugs, Health, and Society	3
Required Major Elective	FCS-23	Nutrition	3
Required Major Elective	PSY-15	Human Sexuality	3
Required Major Elective	SOC-1	Introduction to Sociology	3
		SUBTOTAL UNITS	**3**

REQUIRED GENERAL EDUCATION COURSES
(Students can double count General Education courses with major courses.)

Choose either A. **CSU-GE** or B. **IGETC** for the General Education pattern	
Minimum units to meet **CSU-GE** breadth certification requirements (39 units)	39
Minimum units to meet **IGETC** (**34 – 37.00 units**) certification requirements	34-37
Public Health Science Required Major Courses and Electives	34-35
Electives (Courses numbered 1-99) required when degree units plus GE units total fewer than 60.0	2-9
TOTAL	**60.0**

Students planning to transfer should follow the requirements of the four-year university. Information on course equivalencies and major preparation requirements for the UC and CSU systems are available online at Assist Online Student-Please consult with a Hartnell College counselor. For more information see Transfer Information System.

NHS ELECTIVE COURSES

Student Success Courses: The nursing and respiratory care programs offer student success

courses each semester with objectives that align with the current coursework. These courses are designed for students interested in reinforcing content presented during the semester. The registered nursing program offers supervised skills practice courses.

Elective Courses	Units
NRN 225-228: Success Strategies for Registered Nursing Students (per semester)	0.5
NVN 226-227: Success Strategies for Vocational Nursing (per semester)	0.5
NRN 50.41-50.44: Supervised Registered Nursing Skills Practice (per semester)	0.5
RCP 225-228: Success Strategies for Respiratory Care Practitioners (per semester)	0.5

Course descriptions are located in the [Hartnell College Catalog](#).

INTERPROFESSIONAL EDUCATION

Students in Nursing and Health Sciences learn in an interprofessional environment. Faculty construct opportunities for students to learn theory and practice clinical skills together. The goal of interprofessional practice and education is to foster care collaboration that optimizes patient outcomes (Rutherford-hemming & Lioce, 2018). Five core interprofessional competencies for health professionals include the following (IOM, 2003):

- **Provide patient-centered care**. Identify, respect, and care about patients. Differences, values, preferences, and expressed needs; relieve pain and suffering; coordinate continuous care; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of health lifestyles, including a focus on population health.
- **Work in interdisciplinary teams**. Cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable.
- **Employ evidence-based practice**. Integrate best research with clinical expertise and patient values for optimum care and participate in learning and research activities to the extent feasible.
- **Apply quality improvement**. Identify errors and hazards in care; understand and implement basic safety design principles, such as standardization and simplification; continually understand and measure quality of care in terms of structure, process, and outcomes in relation to patient and community needs; and design and test interventions to change processes and systems of care, with the objective of improving quality.
- **Utilize informatics**. Communicate, manage knowledge, mitigate error, and support decision making using information technology.

Institute of Medicine. (2003). *Health professions education: A bridge to quality*. Washington, D.C: The National Academies Press.

Rutherford-hemming, T., & Lioce, L. (2018). State of interprofessional education in nursing: A systematic review. *Nurse Educator, 43*(1), 9-13. doi: 10.1097/nne.0000000000000405

HARTNELL COLLEGE HEALTH PROFESSIONS PATHWAY PARTNERSHIP

Established in 2010, The Salinas Valley Health Professions Pathway (SVHPP) represented an intentional and strategic collaboration among Hartnell College and K-12 schools, higher education, alternative education, healthcare employers, workforce investment board, philanthropy, academic supports, Boys & Men of Color (BMoC) advocates and social emotional capacity building partners. A goal of the partnership was to increase and sustain the number of locally grown and locally prepared health care professionals that supply regional health workforce needs and that contribute to strengthening the Salinas Valley's economic engine.

In 2018, Pathway efforts narrowed to first-generation-to-college students and parents interested in college for themselves and for their children. A comprehensive parent organizing structure/platform was led by the Pathway Parent Organizer, a member of the East Salinas Building Healthy Communities (BHC) Educational Equity Committee and the Padres Unidos Committee, a parent-led committee with the vision of transforming the school system into a healthy and equitable place. The Parent Organizer has undergone ongoing training and capacity building through a "train-the- trainers" *promotoras* model led by Center for Community Action.

With consultation with Hartnell College leaders and partnership with BHC and the Center for Community Advocacy (CCA), the Pathway Parent Organizer serves as a liaison between K-12 parents and Hartnell College to ensure meaningful and strategic actions to build parent capacity with a policy or systems change outcome. The Parent Organizer advocates for equity in social determinants of health and education by helping pathway parents navigate the educational system so they can become better advocates for their children interested in healthcare careers.

In 2020, a two-month, four-class *promotoras* program was offered to approximately 20 parents. Hartnell College representatives presented information on topics such as expectations for college students and their families, financial aid, student and parent support services, college readiness, scholarships, registration processes, and dual enrollment. The *promotoras* program for parents will resume in fall 2023.

CODES OF ACADEMIC AND CLINICAL CONDUCT

Academic Integrity and Dishonesty

Academic integrity is an essential component of professional behavior for the health care professional. Students are expected to possess a sense of responsible professional behavior and to be accountable for their actions. Academic work submitted by students must be the result of their own thought, research, or self- expression. For purposes of these policies, academic work is defined as, but not limited to exams and quizzes, regardless of format; clinical care assignments; projects; scholarly papers; and classroom presentations. Students are required to cite references using American Psychological Association formatting.

Nursing and Health Sciences policies are in accordance with the "Standards of Student Conduct Policies" as set forth in the Hartnell College Board Policy (BP5500) and administrative procedures AP 5500, AP 5520, Academic Policies, 2023-24 HC Catalog, and new student orientation. Copies of Academic Policies (AP) and Board Policies (BP) (5000 series) are available at Hartnell CCD Governing Policies & Administrative Procedures (new and revised) .

- AP5500 Standards of Student Conduct
- AP5520 Student Discipline
- AP5530 Student Rights, Grievances, and Complaints
- AP/BP 5140 Disabled Students Programs and Services
- AP/BP 5300 Student Equity

Faculty, students, and administrative staff share the responsibility of ensuring the honesty and fairness of the intellectual environment at Hartnell College. This statement on academic integrity applies to NHS students at Hartnell College. All students are expected to adhere to the highest standards of ethical behavior expected of healthcare professionals.

The purpose of the NHS Academic Integrity statement is threefold:
- To clarify NHS's expectations regarding students' academic behavior.
- To provide specific definitions of dishonest conduct proposed by the Hartnell College Academic Senate (2019) and ways to avoid dishonest conduct. The definitions and examples are illustrative, not exhaustive.
- To outline disciplinary actions in accordance with Hartnell College AP 5520, AP 5500, and Education Code §76037, and NHS Policies and Procedures.

ACADEMIC DISHONESTY: DEFINITIONS

Academic dishonesty in course and non-course activities is defined as an act of obtaining or attempting to present academic work through fraudulent or deceptive means in order to obtain credit for this work. Academic dishonesty includes but is not limited to cheating; fabrication; fraud, misrepresentation, and lying; plagiarism; multiple submissions; and facilitating academic dishonesty.

Cheating

Failure to observe the expressed procedures of an academic exercise. Cheating includes but is not limited to the following:
- Unauthorized use of commercial "research" services such as term paper mills.
- Providing information to others without the instructor's permission or allowing the opportunity for others to obtain information that provides the recipient with an advantage on an exam or assignment.
- Unauthorized communication with fellow students during a quiz or exam.
- Copying material, in part or in whole, from another student's quiz or exam.
- Permitting another student to copy from a quiz or exam.
- Permitting another person to take a quiz, exam, or similar evaluation in lieu of the

enrolled student.

- Using unauthorized materials, information, or study aids (e.g., textbook, notes, data, images, formula list, dictionary, calculator, etc.) in any academic exercise or exam.
- Sharing information on an academic exercise or exam through electronic devices or any other means of communication without authorization to do so.
- Using collected or measured data in assignments that belong to another student, such as computer or lab exercises, without the instructor's permission.
- Using any electronic device to gain access to, alter, and/or use unauthorized information.
- Altering a graded exam or assignment and requesting that it be re-graded. Submission of altered work after grading shall be considered academically dishonest, including but not limited to changing answers after an exam or assignment has been returned or submitting another's exam as one's own to gain credit.
- Attempting to hinder the academic work of another student.
- Discussing answers or ideas relating to the answers on a test or other examination with students who have not yet taken the test or examination.
- Using an annotated instructor's edition of a textbook without authorization.
- Obtaining, making, or distributing copies of a test, examination, or other course material without the instructor's permission.
- Using notes, cheat sheets, or other devices considered inappropriate under the prescribed testing condition.
- Collaborating with another or others in work to be presented without the instructor's permission.
- Falsifying records, laboratory work, or other course data.
- Knowingly and intentionally assisting another student in any of the above.

Falsifying or Fabricating

Falsification or invention of any information in an academic exercise. Falsification includes but is not limited to the following:

- Fabricating or altering data to support research.
- Presenting results from research that was not performed—submitting material for lab assignments, class projects, or other assignments which is wholly or partially falsified, invented, or otherwise does not represent work accomplished or undertaken by the student.
- Crediting source material that was not directly used during the research project.
- Falsification, alteration, or misrepresentation of official or unofficial records or documents including but not limited to clinical data, academic transcripts, letters of recommendation, and admissions applications or related documents.

Fraud, Misrepresentation, and Lying

Intentionally making an untrue statement or deceiving. Fraud, misrepresentation, and lying include but are not limited to the following:

- Providing an excuse for an absence, tardiness, or late assignment with the intent to deceive the instructor, staff or the District.

- Checking into a district class, lab, center or other district resource with the intent to deceive the instructor, staff, or the District.
- Checking in or checking out of a district class or resource for another student.
- Using another student's district identification card for use in a class, lab, center, or other district resource.
- Intentionally misrepresenting the content, meaning, or context of source material, clinical data, or scientific data.

Plagiarizing

The presentation of another's words, images or ideas as if they were the student's own. Plagiarism includes but is not limited to

- stealing the written, oral, artistic, or original works or efforts of others and presenting them as one's own.
- the submission of material, whether in part or whole, authored by another person or
- source (e.g., the internet, book, journal, etc.), whether that material is paraphrased, translated or copied verbatim or in near-verbatim form without properly acknowledging the source. (It is the student's responsibility to cite all sources.)
- the submission of material edited, in part or whole, by another person that results in the loss of the student's original voice or ideas (i.e., while an editor or tutor may advise a student, the final submitted materials must be the work of the student, not that of the editor or tutor).
- translating all or any part of material from another language and presenting it as if it were the student's own original work.
- unauthorized use of another person's data in completing any exercise.

Resubmitting Work

Resubmission of a work with identical or similar content that has already received credit in a high school or another college course. Multiple submissions include but are not limited to the following:

- Resubmission of work with identical or similar content from a past course in a current course without written consent of the present instructor.
- Submission of work with identical or similar content in concurrent courses without written consent of all instructors involved.
- Resubmission of work with identical or similar content from the past section of the same course without written consent of the present instructor.

Facilitating Academic Dishonesty

Assisting another to commit an act of academic dishonesty. Facilitating academic dishonesty includes but is not limited to the following:

- Taking a quiz, exam, or similar evaluation in place of another person.
- Allowing one student to copy from another.
- Attending a course posing as another student who is officially registered for that course.
- Providing material or other information (e.g., a solution to homework, a project or other assignments, a copy/screenshot of an exam, exam key, or any test information) to another

student with knowledge that such assistance could be used to violate any other sections of this procedure.

● Distribution or use of notes or recordings based on college classes without the express written permission of the instructor for purposes other than individual or group study; this includes, but is not limited to, providing materials for distribution by services publishing class notes. (This restriction on unauthorized use applies to all information distributed or in any way displayed for use in relation to the class, whether obtained in class, via email, on the internet, or via any other media.)

UPHOLDING ACADEMIC INTEGRITY

Everyone is responsible for upholding academic integrity. Culpability is not diminished when the student claims not to know the policy or procedure.

Student Responsibility:
Students observing others violating this policy are strongly encouraged to report the misconduct to the instructor, complete a [Report an Incident or Concern](#), or address the student(s) directly.

To avoid cheating or unauthorized collaboration, fabrication, or fraud, a student should never

● use, copy or paraphrase the results of another person's work and represent that work as his/her own, of the circumstances.

● refer to, study from, or copy archival files (e.g., old tests, homework, or client assignments) that were not approved by the instructor.

● copy another's work or to permit another student to copy his/her work.

● submit work as a collaborative effort if he/she did not contribute a fair share of the effort.

● falsify official or unofficial records related to academic status, clinical requirements, client data, or admission materials.

● intentionally misrepresent self or others.

● intentionally omit or withhold information.

To avoid even the suspicion of plagiarism, a student must always

● enclose every quotation in quotation marks and acknowledge its source.

● cite the source of every summary, paraphrase, abstraction or adaptation of material originally prepared by another person and any factual data that is not considered common knowledge. Include the name of author, title of work, publication information and page reference.

● acknowledge material obtained from lectures, interviews, or other oral communication by citing the source (name of the speaker, the occasion, the place, and the date).

● cite material from the internet as if it were from a traditionally published source. Follow the APA citation style or requirements of the instructor for whom the work is produced.

● consider submitting work to "Turnitin" for a plagiarism review.

Faculty Responsibility

Instructors are strongly encouraged to report incidents of student academic misconduct in a timely and consistent manner as outlined in College policies. Proctors and student teaching assistants are expected to report instances of student misconduct to their supervising instructors. Instructors are expected to respond to student concerns about academic dishonesty in their courses.

Instructor Disciplinary Action When Cheating/ Plagiarism Occurs
When a student is charged with plagiarism or cheating related to a class and the instructor has reasonable proof or documentation or if the student admits the violation, the instructor may select one or more of the following options:

1. Issue an oral or written notification and warn the student that further acts of this sort will result in additional disciplinary action.
2. Issue a "NP" or a failing grade ("F") for the assignment in question
3. Issue a lowered course grade.

Incidents of academic dishonesty and sanctions should be promptly reported to the Behavioral Intervention Team or to the Director of Student Affairs. The Director of Student Affairs will determine whether to initiate disciplinary action (Ed. Code § 76037, AP 5520). The student has a right to appeal any of these disciplinary actions and a right to have the case reviewed by a Hearing Board. If the student wishes to appeal, s/he should contact the Director of Student Affairs within five working days of notification of the disciplinary action.

ETHICAL BEHAVIOR

Students are expected to demonstrate ethical behavior as specified in the ANA Code for Nurses, National Association for Practical Nurse Education and Service, National Registry of Emergency Medical Technicians, and the American Association for Respiratory Care (AARC) position statement of ethics and professional conduct. These codes serve as guides to the ethical principles that should govern his/her professional practice, conduct, and relationships.

CODE OF ETHICS FOR NURSES

The Code of Ethics for Nurses with Interpretive Statements, is as follows:

1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and acts consistent with the obligation to promote health and to provide optimal care.
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain

competence, and continue personal and professional growth.

6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality healthcare.

7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.

8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

American Nurses Association (2015), *Code of ethics for nurses with interpretive statements.* Washington, D.C.: American Nurses Publishing. Retrieved from [Code of Ethics for Nursing](#)

CODE OF ACADEMIC AND CLINICAL CONDUCT FOR NURSING STUDENTS

Hartnell nursing faculty believes that ethical principles are a necessary guide to professional development. The statements in the National Student Nurses' Association, Inc. (NSNA) Code of Academic and Clinical Conduct provides guidance as the nursing student develops a personal ethical foundation and need not be limited strictly to the academic or clinical environment.

Nursing students are responsible to society; they must learn the academic theory and clinical skills needed to provide nursing care. The variety of acute and community-based practice settings present unique challenges and responsibilities. The Code of Academic and Clinical Conduct is based on the student's understanding that providing nursing care as a student requires the student to uphold the trust granted by clients and society. Conduct includes the following:

1. Maintain the highest standard of personal and professional conduct.
2. Actively promote and encourage the highest level of ethics within nursing education, the profession of nursing, and the student nurses' association.
3. Uphold and respect all Bylaws, policies, and responsibilities relating to the student nurses' association at all levels of membership, reserving the right to propose changes and to critique rules and laws.
4. Strive for excellence in all aspects of collaboration, decision making, leadership, and management at all levels of the student nurses' association.
5. Use only legal, ethical, and human rights standards in all association decisions and activities in accordance with NSNA's Core Values.
6. Ensure the proper use of all association funds and resources in accordance with the fiduciary responsibilities set forth in NSNA Bylaws, policies and state/federal law.
7. Ensure impartiality and prevent conflicts of interest, neither provide nor accept personal compensation to or from another individual while serving as members of student nurses' associations.
8. Maintain the confidentiality of privileged information entrusted or known to me by

virtue of an elected or official position in the student nurses' association.

9. Affirm and support diversity and inclusion by refusing to engage in or condone unjust discrimination because of race, sex, sexual orientation, gender identity, age, citizenship, religion, national origin, disability, illness, legal status, or personal attributes.

10. Uphold integrity in personal, professional, and academic life by refraining from and reporting any form of dishonesty, using proper established channels of communication and reporting as set by the policies of the organization in question.

11. Always communicate internal and external association statements in a truthful and accurate manner by ensuring that there is accuracy in the data and information used by the student nurses' association.

12. Cooperate in every reasonable and proper way with association volunteers and staff by working with them to advocate for student rights and responsibilities and the advancement of the profession of nursing.

13. Use every opportunity to improve faculty and student understanding of the role of the student nurses' association.

14. Use every opportunity to raise awareness of the student nurses' association mission, values, purpose, and goals at the school, state and national chapter level as defined in bylaws and policies.

First adopted by the 1999 House of Delegates, Pittsburgh, PA. Amended by the House of Delegates at the NSNA Annual Convention on April 7, 2017, in Dallas, TX. Retrieved from National Student Nurses' Association, Inc. Code of Academic and Clinical Conduct [Code of Academic and Clinical Conduct](#)

CODE OF ETHICS FOR THE LICENSED PRACTICAL/VOCATIONAL NURSE

Nursing Practice Standards for the Licensed Practical/ Vocational Nurse were updated in 2021 and can be found at [Code of Ethics for Licensed Practical/Vocational Nurses (1991) | Ethics Codes Collection.](#) The National Association of Practical Nurse Education and Service, Inc. (NAPNES) lists the legal and ethical standards is as follows:

The Licensed Practical and Licensed Vocational Nurses shall assume the following:
1. Consider as a basic obligation the conservation of life and the prevention of disease;
2. Promote and protect the physical, mental, emotional, and spiritual health of the patient and his/her family;
3. Fulfill all duties faithfully and efficiently;
4. Function within established legal guidelines;
5. Accept personal responsibility for his/her acts, and seek to merit the respect and confidence of all members of the health team;
6. Hold in confidence all matters coming to his/her knowledge, in the practice of his/her profession, and in no way at no time violate this confidence;
7. Give conscientious service and to charge just remuneration;
8. Learn and respect the religious and cultural beliefs of his/her patient and of all people;
9. Meet the obligation to the patient by keeping abreast of current trends in health care through reading and continuing education; and

10. As a citizen of the United States of America, uphold the laws of the land and seek to promote legislation that will meet the health needs of its people.

AMERICAN ASSOCIATION OF RESPIRATORY CARE STATEMENT OF ETHICS AND PROFESSIONAL CONDUCT

Students are expected to demonstrate ethical behavior as specified in the American Association for Respiratory Care (AARC) position statement of ethics and professional conduct described below. The AARC established the statement of ethics and professional conduct in December 1994 and was last revised in 2015. Respiratory therapists shall

1. demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals.
2. Promote and practice evidence-based medicine.
3. seek continuing educational opportunities to improve and maintain their professional competence and document their participation accurately.
4. perform only those procedures or functions in which they are individually competent, and which are within their scope of accepted and responsible practice.
5. respect and protect the legal and personal rights of patients, including the right to privacy, informed consent and refusal of treatment.
6. divulge no protected information regarding any patient or family unless disclosure is required for the responsible performance of duty authorized by the patient and/or family, or required by law.
7. provide care without discrimination on any basis, with respect for the rights and dignity of all individuals.
8. promote disease prevention and wellness.
9. refuse to participate in illegal or unethical acts.
10. refuse to conceal and will report, the illegal, unethical, fraudulent, or incompetent acts of others.
11. follow sound scientific procedures and ethical principles in research
12. comply with state or federal laws which govern and relate to their practice.
13. avoid any form of conduct that is fraudulent or creates a conflict of interest, and shall follow the principles of ethical business behavior.
14. promote healthcare delivery through improvement of the access, efficacy, and cost of patient care.
15. encourage and promote appropriate stewardship of resources.
16. work to achieve and maintain respectful, functional, beneficial relationships and communication with all health professionals. It is the position of the AARC that there is no place in a professional practice environment for lateral violence and bullying among respiratory therapists or between healthcare professionals.

American Association of Respiratory Care. (2015). *AARC Statement of Ethics and Professional Conduct*. Irvine, TX: American Association for Respiratory Care. Retrieved from: AARC Statement of Ethics and Professional Conduct

CODE OF ETHICS FOR EMERGENCY MEDICAL TECHNICIANS

Professional status as an Emergency Medical Services (EMS) Practitioner is maintained and enriched by the willingness of the individual practitioner to accept and fulfill obligations to society, other medical professionals, and the EMS profession. As an EMS practitioner, I solemnly pledge myself to the following code of professional ethics:

- To conserve life, alleviate suffering, promote health, do no harm, and encourage the quality and equal availability of emergency medical care.
- To provide services based on human need, with compassion and respect for human dignity, unrestricted by consideration of nationality, race, creed, color, or status; to not judge the merits of the patient's request for service, nor allow the patient's socioeconomic status to influence our demeanor or the care that we provide.
- To not use professional knowledge and skills in any enterprise detrimental to the public's well- being.
- To respect and hold in confidence all information of a confidential nature obtained in the course of professional service unless required by law to divulge such information.
- To use social media in a responsible and professional manner that does not discredit, dishonor, or embarrass an EMS organization, co-workers, other health care practitioners, patients, individuals or the community at large.
- To maintain professional competence, striving always for clinical excellence in the delivery of patient care.
- To assume responsibility in upholding standards of professional practice and education.
- To assume responsibility for individual professional actions and judgment, both in dependent and independent emergency functions, and to know and uphold the laws which affect the practice of EMS.
- To be aware of and participate in matters of legislation and regulation affecting EMS.
- To work cooperatively with EMS associates and other allied healthcare professionals in the best interest of our patients.
- To refuse participation in unethical procedures, and assume the responsibility to expose incompetence or unethical conduct of others to the appropriate authority in a proper and professional manner.

Originally written by: Charles B.Gillespie, M.D., and adopted by the National Association of Emergency Medical Technicians, 1978. Revised and adopted by the National Association of Emergency Medical Technicians, June 14, 2013. *Code of Ethics and EMT Oath*

ETHICAL RESPONSIBILITIES FOR NURSING AND HEALTH SCIENCE STUDENTS

It is expected that a student will act similarly to a reasonably prudent healthcare professional under the same circumstances, based on the level of education and experience the student has at that point in time. Students provide the same level of care as graduate respiratory therapists, nurses, or emergency medical technicians for the assigned skill and use knowledge at the theoretical level at which they are prepared. Students do not act under the professional license of instructors, staff, or clinical preceptors.

Clinical instructors or preceptors assign clients based on the students' level of academic preparation and learning objectives. Instructors assume students are safe and competent to implement specific clinical skills once students pass the clinical competencies in an on-campus clinical setting. Students are accountable for their own actions and should advocate for safety.

Students are assigned clinical hours. It is the student's responsibility to be on time and equipped for the clinical experience. During clinical prep time, students obtain client information, prepare clinical paperwork, perform assigned duties, and begin the plan of care. Additional research might be necessary to provide safe care.

For the safety of all individuals, students are expected to prepare for clinical experiences. Students inadequately prepared to provide client care or considered a risk to self or others are dismissed from the clinical environment, resulting in an absence, which in extreme cases results in academic failure. The decision of a faculty of record or licensed professional to remove the student from a learning environment is reviewed as soon as possible. Determination of unsafe behavior is made using relevant data, Hartnell College resources, and consultation from the State regulatory boards. The student removed from a learning environment is directed not to return to classes pending completion of the review procedure. When possible, alternative assignments are provided during the review period.

Disciplinary action follows Hartnell College's policies and procedures. Safe client care is the primary responsibility of students, faculty, and clinical facility staff. Any behavior that potentially places any individual in jeopardy is dealt with immediately. The current Hartnell College administrative policies, NHS Student Handbook, and the NHS Policy and Procedure Manual should be referenced for information on student impairment and codes of conduct.

PARTICIPATORY GOVERNANCE

Student participation in the advancement of NHS is encouraged and supported by the faculty. Student officers of the NHS club conduct regular meetings. Elections may take place yearly or in each semester as determined by the students. A faculty member serves as an advisor. Meeting agendas and dates are determined by the student leadership team. Officers include president, vice president, treasurer, and secretary. Each class may elect additional members to the leadership team as necessary. Faculty members serve as advisors.

Student representation is strongly encouraged for the following committees:
- **Nursing and Health Sciences Departmental Committee**: Class representatives participate in departmental decision-making. Membership: all faculty and elected students from each academic program.
- **Policy and Procedure Committee:** Students participate in the creation, review, and revision of NHS policies and procedures. Meetings are coordinated by the faculty chair

and occur regularly throughout the academic year. Membership: Faculty chair, faculty, and student representatives from each academic program.

- **Curriculum Committee:** Students assist with course outlines, course content, and program planning. Membership: Faculty chair, all faculty, and student representatives from each academic program.
- **Accreditation and Program Evaluation Committee:** Students assist with the evaluation of textbooks, resources, student learning outcomes, and program outcomes. Membership: Faculty chair, all faculty, and student representatives from each academic program. Students assist with issues related to skills lab and simulation lab experiences. Membership: Faculty chair, assigned faculty, and student representatives from each academic program.
- **Pinning Committee:** Students and faculty plan the Pinning Ceremonies. The committee works within the framework of the pinning policy. Membership: faculty advisors, pinning chair, interested VN, ADN, and RCP students.
- **Community Advisory Boards:** Community members, faculty, and interested students meet one to two times a year to discuss program performance and to generate initiatives to meet community demand. Membership: Dean, faculty, selected students, and representatives from all partnering agencies.

STUDENT RESOURCES AND SUPPORT SERVICES

NHS STUDENT SUCCESS PROGRAM

NHS has student success courses for the benefit and retention of students. Faculty works closely with students to support their specific academic needs. Methods of instruction and learning address cognitive, psychomotor, and affective domains. Assistance with study skills, test taking skills, and academic strategies necessary for success is available. Skills lab practice times and workshops are arranged. A peer led mentorship program has resulted in increased student engagement and confidence. All students are encouraged to take full advantage of success initiatives and programs on campus that exist solely to support student success.

HARTNELL COLLEGE STUDENT SUPPORT SERVICES

Additional services can be found on the HC Student Services webpage.
American Indian Services
Each year, the Bureau of Indian Affairs (BIA) provides grants to help eligible Native American students meet their college costs. To be eligible for the BIA educational grant, students must
- be at least one-fourth American Indian, Eskimo, or Aleut as certified by a tribal group served by the BIA.
- have a completed FAFSA and completed BIA form.
- be enrolled in 12 units or more per semester.

Building B, Main Floor   831.755.6806   Financial Aid

Counseling and Guidance Center

Professional counseling and guidance services are available to all students and prospective students of Hartnell College. Counselors assist students with exploring career, educational, and personal goals and planning a program of studies to fulfill the educational/course requirements to meet these goals. Counselors are available on both an appointment and walk-in basis. Although any counselor may assist NHS students, there are designated Nursing and Health Sciences counselors available.

Building B, First Floor   831.755.6820 Counseling Center

Crisis Counseling Services

Students in distress are encouraged to contact the Crisis Counseling Services before experiencing distress or crisis behaviors. A professional therapist can objectively identify and problem-solve stressful life issues. Sharing feelings with a caring professional can provide validation and guidance for effective coping. Enrolled students receive confidential and free emergency care and may be referred to community support services for intervention. Services are confidential and free for students enrolled in Hartnell College. Students may make an appointment or go directly to the crisis counselor's office.

Building D-123, 124, 126   831.770.7019 Crisis Counseling Services

Cultural Programs

Hartnell College provides support for a wide range of cultural programs. A variety of performing arts activities are presented throughout the year.

Department of Supportive Programs and Services

Hartnell College offers supportive services and instruction for students with physical, visual, hearing, learning, acquired brain injury, developmental, and other disabilities through the Department of Supportive Programs and Services (DSPS). DSPS provides services, instruction and accommodations to facilitate student success in academics and personal development, including academic and vocational counseling, assessment for learning disability, classroom accommodations, educational planning, note-takers, translating/ interpreting in sign language.

Building B-101   831.755.6760 DSPS

EOPS

Extended Opportunity Programs and Services (EOPS) and Cooperative Agencies Resources for Education (CARE) are designed to recruit, retain, graduate, and/or transfer educationally disadvantaged, low income, and underrepresented students including single parents who have chosen to continue their education. Students receive assistance with their admission, registration, financial aid, books, curriculum planning, academic and personal counseling, and other support services from counselors, administrative staff, and a team of well-trained peer advisors.

Building B   831 755.6860 EOPS

Financial Aid Office

Financial Aid assists eligible students in meeting educational costs while attending school. The primary responsibility for meeting college costs rests with the student and his/her family. Hartnell College offers programs to help students with documented financial needs. This office helps with grants, loans, scholarships, and registration fee waivers. Students are encouraged to call or visit the Financial Aid Department for more information.

Building B-121   831.755.6806 [Financial Aid](#)

Guardian Scholars Program

The Guardian Scholars Program (GSP) is committed to helping current and former foster youth students complete their educational goals by providing comprehensive support services. The GSP is dedicated to provide referrals, academic and personal counseling, career guidance, school supplies and textbook assistance, educational and life skills workshops, campus services, and other support services.

Building N-30   831.755.6796 [Guardian Scholars Program](#)

Hartnell College Scholarship Office

The scholarship office assists students seeking scholarship information. Available Scholarships from outside sources are advertised continuously throughout the school year. Scholarship awards are based on academic achievement, financial need, extracurricular activities, or other criteria. Applicants are responsible for carefully reading the scholarship material and providing the required documentation, including letters of recommendation and/or personal statements. Scholarship deadlines and instructions for completion are clearly indicated.

Building B   831.755.6806 [Scholarships](#)

HEP – High-School Equivalency Program

HEP is funded by the US Department of Education, Secondary Education – Office of Migrant Education. HEP is designed to assist migrant and seasonal farm workers and their immediate family members to obtain a HSE and either an Associate Degree, Vocational/Technical Certificate, improve employment, military service, or apprenticeship, Certificate of Skills Acquisition, Certificate of Achievement, or an Associate Degree. Services include

- HSE Curriculum delivered through cohorts
- Supplemental academic support/tutoring
- Academic advising and enrollment assistance for an associate degree
- Career/workplace readiness

Building A-117 831.770.7070 [HEP Program](#)

Job Bank

The Job Bank provides a current on-line listing of on and off campus employment opportunities.

Phone: 831.759.6000 [Hartnell College Job Bank](#)

Library

Library and Resource Center contains resources and services that includes the following services: circulation, computer and media, reference, technical, and the Information Competency Center.

Building A   831.759.6078 [Hartnell College Library and Resource Center](#)

Mathematics Engineering Science Achievement (MESA)

MESA is an academic support program for educationally disadvantaged students who are seeking a bachelor's degree in a science, technology, engineering, or mathematics (STEM) field. Services include computer access, study space, tutoring, personal counseling, field trips, and a textbook loan program. Online applications are available each semester.

Building S-106   831.770.6131 [MESA](#)

Mentoring Programs for Women & Men

Hartnell College offers two formal mentoring and life skills programs: Women's Educational Leadership Initiative (WELI) and Men's Institute for Leadership and Education (MILE) Program. Both programs offer scholarships, mentoring, and leadership training to help men and women succeed academically and personally. Students meet with trained, professional mentors who can offer advice and connections in specific life areas. MILE and WELI participation require an application process in spring of each year. Dreamer (AB540/Undocumented) students are welcomed. Transgender students may self-identify. Students are selected based upon academic achievement in context of adversity, financial need, and leadership potential. Other eligibility requirements may apply.

Building B-204A   831. 755.6723 [WELI and MILE Programs](#)

Mi CASA Services for Dreamers
Mi CASA is a one-stop resource and a safe space for Dreamers. Students can get assistance with AB540 Affidavit and Deferred Action for Childhood Arrivals (DACA), educational planning and counseling, scholarship and financial aid assistance, peer mentoring and social activities, referrals to other campus services through the Dreamer Ally network, and advocacy and support services.

Building B-204A   831. 755.6723 [Dreamers](#)

Office of Student Life
The goals of the Office of Student Life are to improve student life and facilitate communication between students, faculty, and staff.

Building C   831. 755.6734 [Office of Student Life](#)

Transfer and Career Center
The Transfer and Career Center provides guidance in university transfer information, career exploration, and job preparation.

Building C-132   831.759.6007 [Transfer and Career Center](#)

TRIO and Upward Bound
TRIO and Upward Bound are federally funded student retention/transfer pathway programs. They provide fundamental support and motivation to participants in their efforts to successfully complete high school and obtain a college education. TRIO and Upward Bound students participate in a variety of academic year and summer program activities at Hartnell College designed to help them reach their full academic and personal potential. In order to increase the rates at which participants enroll in and graduate from institutions of postsecondary education, our Upward Bound programs provide instruction in math, laboratory science, composition, literature, and foreign language.

Building N-11, D-14   831.759.6086, 831.759.6013 [Trio and Upward Bound](#)

Tutorial Services
Tutorial services are available to all students free of charge. Students wishing to use the tutorial services and students who wish to become tutors are encouraged to apply at the tutorial sign-in desk. Application documents can be downloaded from the website below. Tutorial assistance is available for both day and evening students.

Building A-214   831.755.6738 [Hartnell College Tutorial Center](#)

UndocuScholar Resource Center

Hartnell College is committed to supporting all students regardless of their residency status. We provide specialized services for Dreamer students through the Center for Achievement and Student Advancement (Mi CASA).

Building B 204A   831.755.6723

Veterans' Services

Hartnell College is approved as an institution of higher learning for veterans and veterans' dependents entitled to educational assistance. The Veteran's office staff aids Veterans and dependents in planning educational programs, referrals to community agencies, and facilitate transition from military to student life at Hartnell. Additional services include computers and printing for student use, Veteran's Book Lending, on site tutors, and Veterans Club activities.

Building C-138   831.755.6909 [Veterans Service Center](#)

NHS GENERAL INFORMATION (ALPHABETICAL ORDER)

Absences/Illnesses

It is the responsibility of students to contact the instructor in case of illness. Absence hours from clinical courses are fulfilled with alternative assignments as assigned by the faculty of record when indicated. Students who cannot reach the clinical instructor must call the clinical unit. The student needs to leave the following information:

- Name of student
- Hours of clinical experience
- Name of clinical instructor to whom the message should be given

Basic Life Support for Providers (BLS) Certification

All students must submit a copy of a current valid **American Heart Association Basic Life Support for Providers** card to the NHS administrative assistant upon admission and with each renewal. Failure to maintain required BLS results in ineligibility to attend clinical classes and may result in dismissal from the program.

Campus Safety & Emergency Notification

Life-Threatening Emergency: 911
Non-Life-Threatening Emergency: Campus Safety: 755.6888
Non-Emergencies and parking information: 770.7001 or 770.7003
Facility Emergency Notice: [Emergency Information](#)
The Campus Safety Department is operational 24 hours a day, year-round, and exists to provide safety and security for students, staff, faculty, and visitors. Students are advised to contact campus security for assistance with reporting on-campus crimes and emergencies. Staff members have no police powers. Safety Officers are responsible for a full range of public safety services, including crime reports and enforcement of college safety regulations. Their mobile telephone radio system provides them with the capability of summoning a police officer if one is required. The Campus Safety Department works closely with the Salinas Police Department.

The Salinas Police Department responds to the campus when immediate support is needed. An officer will respond and obtain medical assistance if necessary. The officer will call a specified college contact to the scene. Blue Light posts are located prominently on campus.

Campus Safety Status Information:

To obtain information, call the campus safety and facilities emergency status bulletin telephone number**: 831.796.6222**. From a campus line, simply dial 6222.

Canvas Course Management System

Faculty posts grades and course materials on Canvas, Hartnell College's course management system. It is the student's responsibility to complete the Canvas tutorial and maintain a Hartnell College email address. Log-in directions are outlined at [Canvas Help for Students](#). Students who have trouble logging in should contact the help desk at [IT Support](#) or call 831.755.6789.

Cell Phones

Instructors may require cell phones be turned off in class. Use of a cell phone during assessments (e.g., tests, quizzes, standardized exams) results in a zero for the assessment and may result in disciplinary action (NHS Policy 11B). Use of a cell phone during class or in clinical agencies for personal use unrelated to clinical coursework may result in dismissal from the class or clinical site. Cell phone useage in the clinical setting has been linked with increased distraction, poor decision-making ability, increased problems with infection control, and breaches of security with personal health information (Bartholomew, 2018).

Bartholomew, K. (2018). Not so smart: Cell phone use hurts our patients and profession. *The American Journal of Nursing, 118* (6), 6-11. doi: 10.1097/01.NAJ.0000534826.34492.e9

Childcare

Students with children are expected to make childcare arrangements prior to the beginning of the semester. It is recommended that students have a plan for a sick child and a "back-up" sitter. As a safety precaution, children are not allowed in the NHS on-campus clinical lab areas.

Clinical Courses: Student Expectations

The following are some of the expectations for a clinical experience:
1. Students are expected to provide safe, ethical, and professional care at a level commensurate with their academic level.
2. Students are expected to arrive a few minutes before scheduled clinical times. For further information, please refer to NHS Policy #3 Attendance.
3. An ongoing list of student absences and tardies is kept. Students must complete alternative assignments for all missed hours in each clinical course.
4. Students receive a "Performance Improvement Plan" (PIP) when at risk for failure. The PIP includes the learning objective in question, the student's performance indicator/behavior or the perception by others about the performance, identified deficiency, expected student outcomes, and available resources. The instructor and student generate the PIP with a timeline. Successful completion of the PIP is required to

progress in the academic program.
   a. When indicated, the student cannot return to the clinical setting until the PIP is successfully completed.
   b. Alternate clinical learning experiences are assigned until the PIP is completed.
5. A student who has not met clinical course outcomes receives a failing grade (or No Pass) for the course.
6. Interactions that place an individual at risk are grounds for dismissal.
7. A student demonstrating suspected or actual substance abuse problems or behaviors that are a possible risk to the student or others, or conditions that impair functioning will be removed from the clinical setting immediately. For further information, please refer to #8 Student Impairment Policy in the NHS Policy and Procedure Manual.

Clinical Displacements due to COVID-19

It is highly likely that clinical displacements will continue for the near future. Students and faculty are expected to be flexible and comply with CDC guidelines .

Communication

Individuals in the NHS community (students, staff, and faculty) are expected to conduct themselves in a professional manner always. Professional comportment is a core value. Written and verbal communications are held to professional standards.

Mailboxes
   Faculty have a nonconfidential mailbox rack in the B-O office suite. Students and faculty utilize these files to send memos, return assignments, etc.

E-Mail
   Hartnell College uses standardized email communication for Hartnell College students. Email communication between students and the College is restricted to official Hartnell College email addresses; correspondence using personal email addresses is not allowed. Hartnell College Gmail accounts are issued during the student admission process Application for Admission (hartnell.edu.

   Faculty email addresses are listed on page 10 in NHS Handbook and in the Faculty Staff Directory. Students must demonstrate professional communication standards. Response times are not guaranteed, but instructors strive to respond to student communications as soon as possible. Students are encouraged to check for messages at least three times a week. Course faculty may recommend an even greater frequency.

Computers

Computers for student use are located throughout campus. All files saved to the Hartnell College desktops are purged every 24 hours.
1. Laptops and Tablets
    Personal laptops and tablets are used in the classroom, skills lab, and simulation labs. Most locations on campus have sufficient electrical outlets. NHS can loan laptops to students.

2. Software and Computerized Resources
   Students need software that is compatible with electronic copies of textbooks, interactive resources, online simulated electronic health records. Online standardized practice exams that are used throughout the programs might have additional software requirements.
3. Hotspots
   Students with limited connectivity can request a wi-fi hotspot on the HC IT webpage.

Criminal Background Checks

Once accepted into the program, the completion of a criminal background check is required. Students are provided an access code at the time of orientation. Background checks are honored for the duration of the student's enrollment if there are no breaks in enrollment in an NHS academic program. A break in enrollment is defined as non-attendance for any part of a semester or longer. Criminal background checks must be repeated after breaks in enrollment.

It is the student's responsibility to immediately notify the Dean of Academic Affairs, Nursing and Health Sciences of changes in criminal history that occur after the admission background check. Failure to do so may result in immediate dismissal from the program. Additionally,

1. completion of the criminal background check does not ensure eligibility for licensure or future employment.
2. clinical agencies may establish more stringent standards to meet regulatory requirements for their facility.
3. clinical agencies may conduct or request additional background checks at their discretion.

Students found ineligible for clinical placements based on criminal background checks are unlikely to meet clinical learning objectives. Students are counseled and temporarily suspended pending resolution of a criminal charge.

The California Board of Registered Nursing, Board of Vocational Nursing and Psychiatric Technicians, Respiratory Care Board of California, and National Registry of Emergency Medical Technicians require fingerprinting and extensive background checks for licensure/certification. Students with past legal infractions should consult with the Dean of Academic Affairs, Nursing and Health Sciences at the time of acceptance or when an infraction occurs. The student is responsible for maintaining a portfolio that includes all court documents, records of restitution/payment of fines, and proof that the behavior has not recurred. Letters of recommendation from people who can speak to the issue and attest to the student's character might be required by the licensing agency.

Drug Screening

Students must complete a required 10-panel urine drug screening no sooner than 30 days prior to the first clinical experience. A copy of the results are submitted to NHS. A negative test will suffice for the entire enrollment period unless a clinical agency requires additional testing, there

is a break in enrollment as defined as nonattendance for any part of a semester or longer, or at the request of a faculty member or clinical agency administrator. Positive results may involve additional screening and may exclude a student from admission or advancement. A description of the drug screening procedure is found in the NHS Policy and Procedure #8: Student Impairment.

Emergency Evacuation

Emergency evacuation plans and locations of emergency equipment are posted in each classroom. Students are responsible to review the plans and understand how to access the equipment. In the event of an alarm or safety threat, uniformed Hartnell personnel equipped with two-way radios and maintenance staff receive the alert. Hartnell security personnel have the authority to order either shelter-in-place or immediate building evacuation. During evacuation, students should proceed calmly and quickly to an exterior assembly area as determined by trained staff. All should stay back at least 200 feet from any building until the "all clear" command is issued.

Emergency Preparedness

The first 72 hours of a disaster are often the most difficult, but this period can be less stressful if everyone has extra supplies on hand. The college has a limited amount of emergency supplies, so students and staff should have on campus personal, portable emergency kits, which include snacks, water, and prescription medication. For more information refer to Campus Safety and Security

Employment while a Student

Students must determine the number of hours they can work while meeting the requirements of the academic program. Faculty cannot modify course times, assignments, or clinical experiences because of a student's job. On-campus student employment opportunities can be found on Work on Campus. NHS hires students throughout the year.

Examinations

Testing Guidelines
> Faculty adheres to guidelines established to optimize the testing environment by minimizing distraction and limiting the opportunity for, or appearance of, academic dishonesty. Testing guidelines are written in NHS Policy and Procedures #11A: Examination Development and Review and #11B: Examination Administration. *Proctorio*, or a similar online testing security system, is required for exams that are normally proctored in a face-to-face environment.

Review
> Students can arrange individual or small group exam reviews during instructor office hours. During all exam reviews, students are not allowed to access personal belongings or engage in activities that may compromise exam integrity. Exam review guidelines are written in NHS Policy and Procedure #11a: Examination Development and Review.

Special Testing Accommodations

> Students must request reasonable testing accommodations through the DSP&S. The student is responsible for completing required DSP&S forms for each exam and submitting the requests within the required timeframe. According to college policy, NHS faculty cannot provide testing modifications if the student fails to adhere to DSP&S protocols. Accommodations are managed by DSP&S staff within the DSP&S suite.

Standardized Assessments

> Standardized assessments are a method of evaluation and learning needs. Because standardized assessments and licensure/certification preparation assessments contain content that might not be presented in class, standardized assessments account for a limited percentage of the total points awarded in a class. A full account of standardized assessment protocols is found in NHS Policy & Procedure #9: Grading Criteria.

Financial Responsibility

Hartnell College NHS assumes no responsibility for the personal financial arrangements of students. Financial aid, scholarships, emergency funds, and financial counseling are available. Students should refer to Financial Aid webpage and the HC Catalog.

Fundraising and Solicitation of Donations

Because Hartnell College is a public tax supported institution, the residents of the District, particularly the business and philanthropic sectors, cannot be solicited by students and student clubs, organizations, or affiliated groups representing the College unless authorized by prior written approval by the Hartnell College Vice President of Administrative Services.

The Hartnell NHS club provides the means for fundraising for NHS students. Prior written approval from the Advancement and Development Office is required for each separate fundraising activity or drive. See the complete policy: BP 3910.

Grading Policy

The grading policy in the NHS Policy and Procedure Manual and should be referenced for specific details. A minimum of 70% ("C") must be achieved for all courses to advance to the next semester. Students achieving less than 70% for a major course must repeat all major courses for that semester. Extra credit, curving, and rounding of grades are not authorized. Exam and quiz grades are posted on Canvas in a timely manner.

Immunizations

Hartnell College NHS students and faculty must comply with California law and clinical facility requirements related to immunizations and health screenings. Hartnell College tuberculosis infection screening and immunization schedules are specific to healthcare workers and might exceed what is expected for the general adult population.

Student health records are submitted at the time of enrollment and updated when necessary.

Students validate their immunization and tuberculosis screening status by providing official immunization records and lab reports from healthcare providers. Immunization records, physical exam reports, and American Heart Association BLS cards are downloaded in the students' personal files for easy retrieval when requested by clinical agencies.

Just Culture

Front line health care providers, such as nursing students, respiratory care students and emergency medical technician students, play essential roles in providing for patient safety (Edwards, 2018). A Just Culture is transparent (Edwards, 2018). In a Just Culture, the fear of requital over a clinical error does not exist and encouragement is directed towards improving the system. The emphasis of an occurrence is on 'what' went wrong rather than 'who' is at fault. A Fair and Just Culture occurs when reporting and learning are valued. In a Just Culture, individuals are encouraged and rewarded for providing essential safety-related information (Paradiso & Sweeney, 2019). A Just Culture helps to balance individual and organizational accountability when an error occurs (Paradiso & Sweeney, 2019; Peyrovoi, Nikbakht, & Valiee, 2016).

Healthcare professionals are accountable for learning and understanding what contributed to the error and for correcting behaviors to prevent future incidents. This is done through a review of established policies, procedures, best practices, and professional development. Healthcare professionals have an obligation to look for risks, as well as report errors or hazards (Paradiso & Sweeney, 2019). Oftentimes, healthcare professionals are embarrassed to admit errors that might negatively affect their reputation (Peyrovoi et al., 2016). Paradiso and Sweeney (2019) discussed the importance of providing support and security to healthcare providers when an error occurs while exploring all possible causes, rather than focusing on the person or persons.

Edwards, M. T. (2018). An assessment of the impact of just culture on quality and safety in US hospitals. *American Journal of Medical Quality, 3*3(5), 502–508. doi:10.1177/1062860618768057

Paradiso, L. & Sweeney, N. (2019). Just culture: It's more than policy. *Nursing Management, 50*(6), 38-45. doi: 10.1097/01.NUMA .0000558482.07815.ae

Peyrovi, H., Nikbakht, N. A., & Valiee, S. (2016). Exploration of the barriers of reporting nursing errors in intensive care units: A qualitative study. *Journal of the Intensive Care Society*, *17*(3), 215–221. doi: 10.1177/1751143716638370

License Eligibility

State and professional regulatory bodies determine eligibility requirements for applicants for the initial licensure by examination. Graduation or clearance on the criminal background checks for clinical placement does not ensure eligibility for licensure. Questions regarding clearance should be directed to the Board of Registered Nursing (BRN), Board of Vocational Nursing and Psychiatric Technicians (BVNPT), Respiratory Care Board of California, or the National Registry of Emergency Medical Technicians. The regulatory agencies publish steps to take to determine eligibility for licensure by examination.

The primary objective of the licensing regulatory boards is to ensure consumer protection by determining that individuals possess the knowledge and qualifications necessary to provide

healthcare competently and safely.

Nursing:

Upon completion of a nursing academic program, graduates are eligible to take the licensure exam (NCLEX). Specific NCLEX test information is available from the [National Council of State Boards of Nursing.](#) Eligibility for licensure as an RN or an LVN is the responsibility of each student. Students are referred to the licensing/regulatory agency in the state in which they plan to practice.

Contact Information:

California Board of Registered Nursing

1625 North Market Blvd. Suite 11-217

Sacramento, CA. 95834-1924 (916) 322-3350.

[California Board of Registered Nursing](#)

California Board of Vocational Nursing and Psychiatric Technicians

2535 Capitol Oaks Drive Suite 205

Sacramento, CA 95833 (916) 263-7800.

[California Board of Vocational Nursing and Psychiatric Technicians](#)

Respiratory Care:

Upon completion of the respiratory care academic program, graduates are eligible to take the certification exam from the National Board of Respiratory Care. Specific NBRC test information is available at [The National Board for Respiratory Care.](#) Eligibility for licensure as a respiratory care practitioner is the responsibility of each student. Students are referred to the licensing/regulatory agency in the state in which they plan to practice.

Contact Information:

Respiratory Care Board of California

3750 Rosin Court, Suite 100

Sacramento, CA 95834

Main Telephone: (916) 999-2190; (866) 375-0386.

[Respiratory Care Board of California](#)

Emergency Medical Technician:

Upon completion of the emergency medical technician program, graduates are eligible to take the certification exam from the NREMT. Specific NREMT test information is available from the National Registry for Emergency Medical Technicians at [National Registry for Emergency Medical Technicians.](#) Eligibility for licensure as an emergency medical technician is the responsibility of each student. Students are referred to the regulatory agency in the state in which they plan to practice. The California Emergency Medical Services Authority contact information is as follows:

The Emergency Medical Services Authority

10901 Gold Center Drive, Suite 400, Rancho Cordova, CA 95670

EMSA Main Phone Number: (916) 322-4336 FAX: (916) 322-1441

Paramedic Licensure: (916) 323-9875   Licensure Fax: (916) 324-2875

Medication Administration

After demonstrating competency, students may administer medications to assigned clients according to syllabus guidelines and under the supervision of the clinical instructor or preceptor. Medications are administered in accordance with the clinical facility's published guidelines. Failure to adhere to safe medication administration practice results in a Performance Improvement Plan or academic failure as determined necessary after investigation.

Medication Administration Errors

A medication error is defined as a situation in which one or more of the seven "rights" of medication administration is violated. The seven rights are the following:
1. Right person
2. Right drug
3. Right dosage
4. Right route
5. Right time
6. Right documentation
7. Right of refusal

A student who makes a medication error meets with the clinical instructor, agency staff, and/or Assistant Director of Nursing/Director of Clinical Director of Education. After a thorough analysis of the situation, and collaboration with the Assistant Director or Nursing or Director of Clinical Education and the dean, the instructor initiates a course of action based on procedures required by the agency, standards set in the Hartnell NHS Policy and Procedure Manual, and principles of Just Culture.

Nonadherence with NHS and Academic Program Policies

Nonadherence with the policies and procedures of Hartnell College, Hartnell College Nursing and Health Sciences or clinical affiliates may be grounds for academic failure or dismissal from an academic program.

Notice of Academic Standing

Students earning a 75% or less in a course receive a *Notice of Academic Standing* from the instructor of record. The notice serves as an early alert to the student; it does not predict failure. The *Notice of Academic Standing* includes the student's grade, semester withdrawal date, and resources available for student success. The *Notice of Academic Standing* is signed by the student and placed in the student file. Copies may be sent to the success course instructor.

Parking

On-campus parking is available by paid permit or daily fee. Designated parking spaces for the disabled are available. Students are responsible for parking fees and fines. Off-campus parking at clinical sites is governed by the policy of the respective agency/hospital. As guests of the agency/hospital, students are expected to abide by all parking regulations. Students are

responsible for guest parking fees and fines.

Photocopying and Supplies

Multi-function device machines are located around campus. A fee for service is deducted from the student's CAT Card. Student supplies are not available in the NHS office.

Policy and Procedures: Changes

Policies, practices, and procedures can be found in the Hartnell College NHS Student Handbook and in the NHS Policy and Procedure Manual. Policies are reviewed routinely and are subject to change by the administrators, faculty, and student representatives, as deemed necessary. Students are notified of changes through written, verbal, and email communications. NHS policies are in accordance with the Hartnell College Catalog, Student Handbook, and Board and/or Administrative Policies.

Reinstatement Requirements

A student who withdraws from the program may be readmitted one time only on a "space available basis" with approval of the Dean. Re-entry is not possible after failing a clinical nursing or respiratory course. Information is included in the NHS Policy and Procedure Manual #2B Reinstatement: Good Standing/Elective Withdrawal (LofA) and #2C Reinstatement: Unsatisfactory Standing: Withdrawal/Dismissal.

Standards of Student Conduct

NHS faculty seeks to maintain a learning environment that is conducive to learning and respectful to all members of the campus community. Professional behavior is essential and expected. Failure to adhere to professional student conduct may result in dismissal from an academic setting or the program. Hartnell's Standard of Student Conduct (AP5500) may be downloaded from the Hartnell College website.

Student Files and Records

Essential academic information for students is stored according to privacy and confidentiality standards for five years after the student graduates or withdraws from the program. Permanent records are kept by Admissions and Records.

NHS student files are stored in locked cabinets or encrypted electronic files. Students may request access to their files through the dean. Students must keep their personal/contact information current in case emergency notification is necessary. NHS student files may include, but are not limited to, the following:
1. Application(s)/Transcripts
2. Acceptance of Course Responsibility form
3. High Fidelity Simulation form
4. AHA BLS Provider certification
5. Correspondence to and from the student (case-specific)
6. Clinical evaluation tools

7. Confidentiality form
8. Licensure for vocational-to-registered nurses
9. Performance Improvement Plans
10. Notification of Academic Standing form
11. Student Information sheet
12. Immunization records, physical examination form, and medical releases
13. Disclosure for DSPS

Textbooks and Learning Materials

Textbooks and popular reference books are available in the library and sold at the Hartnell College Bookstore located in the Student Center. Textbooks may be purchased online at Hartnell Bookstore. The Hartnell College Bookstore accepts all major credit cards, CAT Cards, personal checks, financial aid vouchers, debit cards, and cash. Students are advised to purchase the latest edition of required texts complete with electronic resources prior to the start of the semester.

The Hartnell College Bookstore does not stock clinical skill supplies but will special order items such as stethoscopes, sphygmomanometers, lab coats, scissors, examination gloves, laboratory supplies, and the most current reference books and medical dictionaries. Students purchase clinical skill kits from an outside vendor.

Transcripts and Transfer of College Credit

Only Hartnell College academic counselors can complete official transcript reviews. Courses are accepted for transfer when evaluated as equivalent to required courses and if they meet requirements for college graduation. Applicants are strongly encouraged to consult the NHS counselor concerning course transferability prior to enrolling in any course at another institution. For transfer of general education (non-nursing or health science) courses, the applicant must

1. submit an official transcript from the transferring college with a request for transcript evaluation to the admissions office.
2. submit a copy of the official transcript from the transferring college to Hartnell College Admissions and Records and the NHS office.
3. assume the responsibility to validate that courses and credits are reflected accurately on Hartnell College transcripts.

Transportation

Transportation to clinical facilities and community agencies is the responsibility of the student. Clinical rotations are conducted at locations separate from the college campus. Clinical placement assignments may be scheduled at any time within a 24-hour period and on any day of the week. It is not uncommon for a student to visit multiple clinical sites during an off-campus clinical course. When possible, clinical site information is provided. Students must be prepared to pay travel, overnight lodging, and parking fees. Instructors cannot transport students.

Uniforms

Specific uniform requirements, selected by a faculty/student committee, are detailed in the NHS Policy #7B Dress Code: Students. Patches and the lab coat and uniform brand and style number are shared by NHS staff and JT HealthCare Uniforms. Hartnell does not benefit from the sale of uniforms or patches. Students may choose an alternate supplier but not an alternate style.

White lab coats with the ADN, VN, or RCP patch sewn on the left shoulder must be worn over professional clothing. When required, scrubs issued by the clinical agency may be worn in specialty areas. For personal safety, photo identification badges must be clearly visible. Students might be sent home from the clinical setting if the uniform policy is not followed. Students should not wear uniforms in public places.

EMT students wear navy-colored pants and shirts, with a school patch. Students are directed to the syllabus for specific uniform requirements.

Visitors

Children are not allowed in the on-campus skills lab areas unless they are part of a clinical experience. Restrictions are in place for the following reasons:
- Safety: Faculty and staff cannot take responsibility for the safety of minors and visitors in the classrooms.
- Confidentiality: Visitors watching students perform skills may violate students' rights to confidentiality and privacy FERPA.

ON CAMPUS CLINICAL EXPERIENCES: SKILLS AND SIMULATION LABS GENERAL INFORMATION REVIEW

Supervised instruction and demonstration of clinical skills using safety and evidenced-based practices occur in a skills lab environment. Students practice healthcare-associated skills, medication administration concepts, test-taking, and directed learning activities. Evaluation of skill competencies takes place during pre-arranged appointment times. Students utilize their purchased supplies for skills practice. Additional supplies are distributed by on-campus clinical course faculty.

Skills lab areas and equipment are available for use by students and faculty during scheduled classroom instruction, faculty-supervised student practice hours, and simulation sessions. Laptops and computer workstations are available. Students are encouraged to use their own laptops and tablets. Hours of operation are posted in the labs and on Canvas.

Lab Hours Tracking

Students enrolled in NRN-50.41-.44 Supervised Skills classes receive course credit based on attendance. The attendance tracking system is determined by the faculty of record. It is the responsibility of the student to maintain an accurate account of practice hours. RCP, EMT, and

VN students are not required to track practice hours unless directed by faculty.

Equipment, Supplies, and Classrooms

Everyone is responsible for preserving equipment, supplies, and learning environments. Environments must be left clean for full use by others. This includes, but is not limited to, putting away supplies and equipment, wiping down tables, and putting away chairs. Gum, food, and snacks must be enjoyed in areas in non-lab areas. Beverages must be in closed containers.

Many pieces of equipment and mannequins require special handling (e.g. wearing gloves, no soaps, no liquids). Students should ask for assistance. Equipment and supplies are maintained in good working order. Broken or unsafe equipment should be reported immediately to the Clinical Operations Specialist.

Most supplies used for skills practice are included in the student's lab supply kit. There are limited quantities of practice supplies available. Requests for skills lab equipment or competency set-ups must be submitted least two days in advance to the Operational Specialist or the lab instructor.

Individual Assistance

Students desiring individual help from an instructor should make an appointment through Canvas. Non-scheduled one-to-one assistance is dependent on instructor availability.

Simulation Learning Experiences

The "Hartnell College Health Center" (NHS simulation lab) is a place to practice clinical judgment in a setting that closely replicates a healthcare environment. There is a variety of mannequins and task trainers with varying levels of realism. Students participate in interprofessional simulation learning experiences, which include reflection and evaluation. Simulated learning experiences require signed written acknowledgement of confidentiality and use of recording media.

Hartnell College Health Center (Sim lab) Comportment Guidelines

- Demonstrate professional conduct and communication at all times.
- Participate with and observe others during simulation experiences.
- Maintain a respectful and safe learning environment.
- Suspend disbelief. HCHC is considered a clinical setting.
- Practice confidentiality. Experiences cannot be discussed outside of the HCHC.
- Work as a member of a healthcare team. Use effective communication.
- Ask questions and familiarize yourself with equipment before each HCHC experience.
- Speak up. Be a team member. Be accountable; if you see a problem, say something.
- Do not eat, drink, or chew gum in the HCHC at any time under any circumstances.
- Adhere to dress code: lab coat or uniform.

- Follow the basic assumption that all participants are capable, want to do their best, and are want to improve.
- Show the utmost respect for learners: students, staff, and faculty.
- Demonstrate courtesy at all times
- Be curious about all participants' thoughts and comments.
- Give participants (and facilitators) time to think and reflect before answering.

Resource Materials

Textbooks, journals, and equipment are among the resources available for student use in Building-O. Additional materials are in Building A.

OFF-CAMPUS CLINICAL EXPERIENCES INFORMATION (ALPHABETICAL ORDER)

Accident Insurance

Costs related to clinical-related accidents are the responsibility of the student. Student injuries occurring at the clinical facility/agency during assigned clinical time must be reported immediately to the clinical instructor/preceptor. Agency protocols are followed. The injured student must start Hartnell College Workers' Compensation Reporting Process and Forms within 24 hours of the injury.

Health Insurance

Hartnell College does not provide personal health insurance coverage. Students are expected to have personal health insurance.

Health Insurance Portability Accountability Act

The Health Insurance Portability Accountability Act (HIPAA) requires that protected health information is kept private and secure by persons that have access to information. Since students, faculty, instructors, and staff use protected health information as part of the education process, students must complete mandatory annual training on HIPAA regulations prior to entering a clinical setting. Students cannot copy or remove client data with identifying information from the agency. Violation of HIPAA regulations will result in removal from the clinical setting and disciplinary action.

Professional Practice Insurance

Although students are encouraged to carry professional malpractice insurance, NHS cannot require it. Students are encouraged to research individual insurance plans and consult with insurance professionals. Hartnell College is not responsible for malpractice claims against students.

Professional Behavior

Students, while on campus, in clinical settings, or when representing the NHS, must conduct

themselves in a professional manner. Comportment must reflect favorably upon the student, NHS, and Hartnell College. Students are expected to assume responsibility for their actions for which they are held accountable. Behaviors that result in deleterious effects to the academic environment and/or endanger the health or safety of peers, instructors, clients, or other healthcare team members may be grounds for dismissal or academic failure. Unprofessional conduct includes, but is not limited to the following:

1. Verbal or non-verbal language, actions, voice intonations, or insubordination which compromises rapport or working relations with peers, faculty, clients, clients' family members, or healthcare team members.
2. Behavior that may potentially compromise contractual agreements and/or working relations with clinical affiliates, or may potentially constitute violations of legal/ethical standards.
3. Behavior that interferes with or disrupts teaching/learning experiences.
4. Unpreparedness in the clinical environment.
5. Using or being under the influence of any drug or alcohol that may alter judgment and interfere with safe performance in the clinical or classroom setting.
6. Breach of client confidentiality in any form.
7. Violation of the professional behavior standard may result in immediate removal from the clinical site and disciplinary action.

Professional Risks

Interactions with individuals in a healthcare environment carry inherent health and safety risks, including exposure to infectious and communicable diseases. Students receive information to lower risks to self and others. Students are required to use universal and standard precautions. The following are some factors that mitigate the risk for healthcare associated infections:

● Perform hand hygiene procedures, either by washing hands with conventional soap and water, with alcohol-based hand rubs, or as recommended for specific microorganisms.
● Keep current on immunizations.
● Follow agency and school policies for personal illness.
● Utilize standard or transmission precautions in clinical environments.
● Consistently follow infection control procedures according to agency policy & Center for Disease Control (CDC) recommended guidelines.
● Change out of clinical clothing as soon as possible.
● Take caution when handling and disposing of sharps.
● Adhere to agency policy and procedure when exposed to needle sticks or blood and body fluids.
● Be knowledgeable of risk factors and monitor personal viral status (HIV and Hepatitis A, B, C). Students who are HIV or hepatitis positive are responsible for protecting clients and individuals from exposure to the virus.

Chronic HBV Infections

No student is discriminated against because of hepatitis B or C status. All healthcare providers

should practice standard precautions, which are designed to prevent HBV transmission, both from individuals to HCP and from HCP to individuals. Those who have HBV levels 1000 IU/mL or 5000 genomic equivalents/mL or higher should not perform exposure-prone procedures. Ask the Experts Hepatitis B

Human Immunodeficiency Virus (HIV) Infections

There are limited ways in which HIV transmission is a risk to healthcare providers. Please follow the CDC Guidelines for HIV. The HIV Policy Resource Bank includes state and federal laws that protect the confidentiality of HIV-related information, the rights and obligations of people with HIV with respect to disclosure of their HIV status in various settings, and possible legal actions when unauthorized disclosure of HIV-related information occurs.

SAFETY PRACTICES AND POLICIES: ON- AND OFF-CAMPUS LEARNING ENVIRONMENTS

NHS administrators and faculty consider safety as the highest priority in all aspects of professional practice. A safety need may be physical, biological, and/or emotional in nature. Safe practice is an academic outcome of every program.

At no time can a student perform a procedure in a clinical setting without an instructor being present or knowing that the student is about to perform a procedure. For the safety of individuals, no skill can be performed in a clinical setting unless the student has received a passing grade by a lab instructor on the related skill competency.

Clinical responsibilities, including performance of skills previously performed on clients during the student's shift, may be reassigned at the discretion of the instructor. This generally occurs (but is not limited to), a change in a client's condition. It is always imperative that the student and the instructor communicate and collaborate with each other and agency staff.

Skills Lab and Simulation: Faculty encourage student engagement using various instructional methods in the skills lab and in the simulation center. These methodologies include but are not limited to skill practice with low and high-fidelity manikins, clinical scenarios, virtual simulation, interprofessional learning activities, role playing, and incorporating standardized patients to augment learning and teaching.

Adherence to clinical agency policies and procedures is mandatory. Students are responsible for reviewing pertinent documents and completing required agency competencies prior to performing invasive or diagnostic skills.

Increased safety and surveillance may be needed in certain clinical situations. Unsafe clinical practice is characterized by behavior that threatens or violates the physical, biological, or emotional safety of the client, family, students, faculty, staff, or self. The NHS Student

Handbook and Policy and Procedure Manual delineate the *minimum* safety expectations/guidelines in the clinical setting.

DEFINITION OF UNSAFE

To ensure unsafe practice does not occur, the student will practice within the boundaries of the level of clinical training received, the State Practice Act, the guidelines and objectives of NHS, and the rules and regulations of the health care facilities.

Unsafe conduct is that behavior which is likely to cause injury to others by any act, practice, or omission that fails to conform to the accepted standards and which results from conscious disregard for the health and welfare of the others and includes, but is not limited to, the conduct listed as follows:

- Violating the confidentiality, or releasing information or knowledge concerning the client, except where required by law.
- Failing to assess and evaluate a client's status or failing to implement appropriate interventions which might be required to stabilize a client's condition or prevent complications.
- Knowingly or consistently failing to report or document a client's symptoms, responses, progress, medications, and/or treatments; failing to make entries; destroying entries; and/or making false entries in records pertaining to the giving of medications or treatments.
- Failing to follow the policy and procedure for disposal of medications in effect at the facility at which the student is assigned.
- Diverting, in connection with the professional practice, medications, supplies, equipment, or personal items of the client, employer, or any other person or entity.
- Failing to administer medications and/or treatments in a timely, responsible manner.
- Failing to take all precautionary measures necessary to prevent the loss of, or unauthorized appropriation of, medication(s)/equipment.
- Passing or attempting to pass a forged, altered, or falsified prescription.
- Attempting to perform clinical decisions or procedures, or both, in which the student is untrained by experience or education and without appropriate guidance and supervision by a licensed professional or instructor.
- Causing, suffering, permitting, or allowing physical or emotional injury to the client or failure to report the same in accordance with the incident reporting procedure in effect where the student is assigned.
- Expressly delegating care functions or responsibilities to a person who lacks the ability or knowledge to perform the function or responsibility in question.
- Leaving a student assignment without notifying appropriate personnel.
- Failing to report to NHS, within a reasonable time of the occurrence, any violation of duly promulgated rules, regulations, or prescriptions.
- Providing any information for admission that is false, deceptive, or misleading, or failing

to disclose any information that could affect the decision on admission or licensure (felony conviction).
● Failing to meet stated competencies within each course, such that a hazard to a client may occur.
● Falsifying information, written or verbal.
● Reporting to assigned clinical areas under the influence of psychoactive drugs.

STUDENT IMPAIRMENT

In the matter of students impaired by alcoholism, drug abuse, and emotional illness, Hartnell College recognizes that these are diseases and should be treated as such. Impairment may involve the use of over-the-counter prescription(s), illegal or designer drugs, alcohol, or inhaled substances. Mental illness may be any acute or chronic condition that disrupts the thinking, feelings, moods, or functioning. It also affects the ability to cope with the demands of inherent stressors associated with academic rigor and the role of a healthcare provider. Personal and health problems involving these diseases can affect one's academic and clinical performance, and the impaired student is a danger to self and a grave danger to the clients in his or her care. Students can be helped to recover, but it is the responsibility of the student to voluntarily seek diagnosis and treatment for a suspected illness from a healthcare provider. Confidential handling of the diagnosis and treatment of these diseases is essential.

Hartnell instructors are responsible for identifying, addressing, and documenting problematic behavior, impairment, or actual disability. Instructors complete one of Hartnell's Behavior Report Forms online. A student whose behavior presents as a threat to the safety of others or self is removed from the clinical setting. The faculty addresses the behavior with the student and stipulates actions needed to return to the clinical or learning environment (e.g., doctor's note stating the student is safe to return to class/clinical). The instructor immediately notifies the dean and/or appropriate personnel of an incident that threatens or violates the physical, biological, or emotional safety of students, clients, families, peers, or staff members. The team will develop further plans of action in collaboration with the dean, students, and student support providers to make efforts to change behavior to meet course expectations by seeking assistance from faculty and/or healthcare providers. Absences that occur between the time the student is dismissed from the clinical or classroom setting and the review of the Performance Improvement Plan will not count against the student. A verbal and/or written warning of problematic behavior with a Performance Improvement Plan that includes recommendations, timetable, and resources is completed by the instructor and reviewed by the team.

The student is responsible to read and seek clarification of Hartnell College Catalog and academic policies and procedures such as Hartnell College NHS Student Handbook and Policy and Procedure Manual (#8 Student Impairment). The student is responsible for notifying faculty of record if unable to provide safe care for assigned clients in the clinical setting or if unable to meet course objectives because of a disability or impairment. The individual must seek diagnosis

and/or treatment (from a healthcare professional) for any condition that may result in unsafe situations. The student is expected to withdraw with "W" before the deadline to repeat the course if unwilling/unable to change behavior to meet course expectations. If the student fails to withdraw from the course after the last day to withdraw, the student will be dismissed from the academic program.

Students must notify faculty of record if he/she notices behaviors from another student and is encouraged to complete a Hartnell College, Public Care or Behavior Report

Unsafe or unprofessional behavior may also be identified in the classroom, skills lab, and/or simulation learning environments. For further information please refer to the following resources:
- NHS Policy and Procedure Manual - #8 – Student Impairment
- Hartnell Board and Administrative Policy 5500. Retrieved from Hartnell Board and Administrative Policy
- Department of Supportive Programs and Services (DSPS) Behavioral Intervention Team Information. Retrieved from Department of Supportive Programs and Services (DSPS)
- DSPS Behavioral Intervention Team Threat Assessment Rubric Nabita Threat Assessment Tool
- CA BRN Mental Health Ad-hoc Committee Report. CA BRN Mental Health Report CA BRN Enforcement. CA BRN Enforcement Frequently Asked Questions
- CA BRN Intervention Program. CA BRN Intervention Program

Unsafe or unprofessional behavior noted in, but not limited to, the clinical, classroom, skills lab, and/or simulation learning environment may result in the following:
- Immediate removal from the clinical site
- Performance Improvement Plan
- An evaluation conference that includes members of the Hartnell College support services
- Academic failure

SOCIAL MEDIA

Hartnell College and Nursing and Health Sciences faculty have expectations regarding the professional and judicious use of social media. As documented above in "Professional Behavior," students are expected to conduct themselves, while online or using social media, in a manner which is appropriate, professional, and respectful of others. Students should refrain from referencing any matter pertaining to Hartnell College, clinical agencies, and individuals (see NHS Policy & Procedure - #13 Confidentiality and Professionalism). Communication that negatively affects the learning environment is not tolerated. Failure to adhere to the criteria/standards in the Hartnell College or NHS policies might result in disciplinary action or academic failure. More information is available in the Social Media Guidelines for Nurses by the National Council of State Boards of Nursing and by the National Board for Respiratory Care

National Board for Respiratory Care Social Media Policy.

STUDENT HEALTH & SAFETY REQUIREMENTS

Students are permitted to remain enrolled in clinical courses once all health requirements are met. Written verifications are kept on file. Students who are ill or infectious are not permitted in the clinical setting. Health examination requirements include the following:

PHYSICAL EXAMINATION

To be completed prior to the start of the academic program and as indicated.

TUBERCULOSIS

There are two types of testing for Tuberculosis (TB) in health care workers: Initial baseline testing: Two-step testing with a TB skin test or a TB blood test. Serial Tb tests are no longer recommended for healthcare workers but may be required by an agency based on population served. Students are required to meet agency requirements.

Tuberculosis testing:
Must always be current during the program.

- A 2-step process is used for the first Tuberculin Skin Test (TST). The first TST is placed and may/may not be read. One week to one month later, the second TST is placed and read within 48-72 hours. The size of reaction to the second TST must be measured in millimeters and recorded. After the initial test, the TST is a one-time procedure and must be repeated annually.
- The following tuberculosis (TB) blood test may be used instead of the TST. It must be repeated annually.

    - QuantiFERON® – TB Gold In-Tube test (QFT–GIT)

    - SPOT® *TB* test (T–Spot)

- A 2-step process is used if the student switches to a TST after receiving a QuantiFERON the year before.

Positive TB test:
- A chest X-Ray is required only if the TB skin test is positive.
- A history of a positive TB skin test requires a report of a negative chest X-ray.
- Students with positive TB skin tests complete a Tuberculosis Questionnaire on admission and annually.
- Students must report symptoms of TB, such as fevers, cough, night sweats, and recent weight loss to the clinical instructor. If positive for any of the above symptoms, a new X-ray is required.

Sosa, L.E., Njie, G.J., Lobato, M.N., et al. (2019). Tuberculosis screening, testing, and treatment of U.S. health care personnel: Recommendations from the National Tuberculosis Controllers Association and CDC. *Morbidity Mortality Weekly Report, 68*:439-43. doi: http://dx.doi.org/10.15585/mmwr.mm6819a3external icon CDC

IMMUNIZATIONS: HCP GUIDELINES FOR STUDENT INOCULATIONS

COVID-19 – One or 2 doses of a coronavirus vaccine administered intramuscularly as determined by the product's administration guidelines. Bivalent booster shots are required by all agencies. Students are considered essential healthcare workers because of the potential for direct or indirect exposure to patients or infectious materials.

Measles/Mumps/Rubella – Two combination-MMR vaccines, given 4 weeks apart, or a measles titer showing proof of antibodies to measles.

Hepatitis B – If previously unvaccinated, 2-dose series of Heplisav-B at 0 and 1 month, or a 3-dose series of either Engerix-B or Recombivax HB at 0, 1, and 6 months. Students who perform tasks that involve exposure to blood or body fluids should be tested for hepatitis B surface antibody (anti-HBs) 1-2 months after dose #2 of Heplisav-B or dose #3 of Engerix-B or Recombivax HB to document immunity.

Influenza – One dose of influenza vaccine annually. The inactivated injectable vaccine is given IM or intradermally. Live attenuated influenza vaccine (LAIV) is given intranasally.

Varicella-zoster (chickenpox) – Two 2 doses of varicella vaccine, 4 weeks apart if no serologic proof of immunity, prior vaccination, or diagnosis/verification of a history of varicella or herpes zoster (shingles) by a healthcare provider.

Tetanus, diphtheria, pertussis – One dose of Tdap if no previous Tdap and to pregnant student healthcare workers with each pregnancy if no previous Tdap. TD boosters every 10 years

Immunization Action Coalition (2022). [Healthcare Personnel Vaccination Recommendations updated 2022](#)

Centers for Disease Control and Prevention. (2021). *COVID-19 vaccination*. Retrieved from
   https://www.cdc.gov/vaccines/covid-19/index.html

BASIC LIFE SUPPORT (BLS) PROVIDER CERTIFICATION

- Must be awarded by the American Heart Association
- Must be current
- Expires after 2 years

CRIMINAL BACKGROUND CLEARANCE

Students must complete Live Scan and background checks. Students with positive Live Scan findings will be contacted by Natividad's Human Resource administrator. Students interested in reviewing Live Scan results are advised to contact Monterey County. Hartnell College does not receive reports. Students will receive copies of their background checks by the contracted vendor.

URINE DRUG SCREEN

A 10-panel drug screen must be completed *no sooner than 30 days before the start of the first clinical rotation.* Staff will provide dates. Students who expect to have a positive urine test for prescribed or recreational drugs are encouraged to complete the screening as early as possible, which will give students time to complete subsequent screenings, if indicated.

AMERICANS WITH DISABILITIES COMPLIANCE STATEMENT

Nursing and Health Sciences provides reasonable accommodations for students with disability needs. The faculty and staff do not discriminate against individuals and comply with the 1990 Americans with Disabilities Act (ADA), the ADA Amendments Act of 2008, and section 504 of the Rehabilitation Act of 1973. In addition, the faculty and staff are sensitive to student rights, including privacy and confidentiality.

Disability is defined as (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 impairment. Disabilities include, but are not limited to physical, visual, hearing, medical and long-term disabilities, mental health disorders (anxiety), attention deficit disorders (ADD), attention deficit/hyperactivity disorders (ADHD), or other learning disabilities.

Individuals requesting reasonable accommodations are required to self-disclose to the Department of Supportive Programs and Services (DSP&S). The student may request an appointment for a learning disability assessment by calling the DSP&S office at 831-755-6760. Additional information is available at DSP&S Students, who require adaptive equipment to perform in acute and/or community-based settings within the technical standards outlined, are accommodated to the extent possible and in accordance with clinical and community agency policies, procedures, and regulations.

For the purposes of NHS, a qualified individual with a disability is one who, with or without reasonable accommodation or modification, meets the requirements as described in the Technical Standards.

TECHNICAL STANDARDS

Hartnell College has a responsibility to educate competent practitioners to care for assigned persons, families and/or communities with critical judgment, broadly based knowledge, and well-honed technical skills. To successfully progress and graduate, students must meet program learning outcomes and technical standards.

Faculty and staff strive to ensure access to facilities, programs, and services to all students, including students with self-disclosed disabilities (as defined by Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act (ADA) of 1990 and the ADA Amendments Act of 2008). Hartnell College provides reasonable accommodations to students on a nondiscriminatory basis consistent with legal requirements as outlined in the Rehabilitation Act of 1973, the Americans with Disabilities Act (ADA) of 1990 and the ADA Amendments Act of 2008. A reasonable accommodation is a modification or adjustment to an instructional activity, equipment, facility, program, or service that enables a qualified student with a disability to have an equal opportunity to fulfill the requirements necessary for graduation. To be eligible for accommodations, a student must have a documented disability of (a) a physical or mental

impairment that substantially limits one or more major life activities of the individual; (b) a record of such impairment; or, (c) be regarded as having such a condition.

Nursing and Health Sciences provides the following description/examples of technical standards to inform prospective and enrolled students of a sampling of technical standards common to nursing, respiratory care, and emergency medical technician curriculum. These technical standards reflect a sample of the performance abilities and characteristics that are necessary to complete requirements for graduation. Standards are not requirements of admission and the examples are not all-inclusive.

- Individuals interested in applying for admission to NHS should review these standards to develop a better understanding of the skills, abilities and behavioral characteristics required to complete the curriculum.
- Key areas for technical standards include having abilities and skills in the areas of: (1) acquiring fundamental knowledge; (2) developing communication skills; (3) interpreting data; (4) integrating knowledge to establish clinical judgment; and, (5) incorporating appropriate professional attitudes and behaviors into nursing practice capabilities.
- To qualify for admission, individuals must be able to meet academic standards and the technical standards, with or without reasonable accommodations. Information regarding services and resources to students with disabilities and/or to request accommodations is obtained from DSP&S.

Require-ments	Standards	Examples
Acquiring fundamental knowledge	● Ability to learn in classroom and educational settings ● Ability to find sources of knowledge and acquire the knowledge ● Ability to be a life-long learner ● Novel and adaptive thinking	● Acquire, conceptualize and use evidence-based information from demonstrations and experiences in the basic and applied sciences, including but not limited to information conveyed through online coursework, lecture, group seminar, small group activities and physical demonstrations ● Develop health care solutions and responses beyond that which is rote or rule-based
Developing communication skills	● Communication abilities for sensitive and effective interactions with patients (persons, families and/or communities) ● Communication abilities for effective interaction with the health care team (patients, their supports, other professional and non-professional team members) ● Sense-making of information gathered from communication ● Social intelligence	● Accurately elicit or interpret information: medical history and other info to adequately and effectively evaluate a client or client's condition ● Accurately convey information and interpretation of information using one or more means of communication (verbal, written, assisted, and/or electronic) to clients and the health care team ● Effectively communicate in teams ● Determine a deeper meaning or significance in what is being expressed ● Connect with others to sense and stimulate reactions and desired interactions

Interpreting data	● Ability to observe patient conditions and responses to health and illness ● Ability to assess and monitor health needs ● Computational thinking ● Cognitive load management	● Obtain and interpret information from assessment maneuvers ● Obtain and interpret information from diagnostic representations of physiologic phenomena during a comprehensive assessment of clients ● Obtain and interpret information from assessment of a client's environment and responses to health across the continuum ● Obtain and interpret for evaluation information about responses to clinical action ● Translate data into abstract concepts and to understand data-based reasoning
Integrating knowledge to establish clinical judgment	● Critical thinking, problem solving and decision-making ability needed to care for persons, families and/or communities across the health continuum and within (or managing or improving) their environments – in one or more environments of care ● Intellectual and conceptual abilities to accomplish the essentials of the academic program ● New-media literacy ● Trans-disciplinary Design mindset	● Accomplish, direct or interpret assessment of persons, families and/or communities and develop, implement and evaluate of plans of care or direct the development, implementation and evaluation of care ● Critically assess and develop content that uses new media forms, and to leverage these media for persuasive communication ● Literacy in and ability to understand concepts across disciplines ● Model knowledge about what is between, across, and beyond disciplines ● Represent and develop work processes for desired outcomes
Incorporating appropriate professional attitudes and behaviors into nursing practice	● Concern for others, integrity, ethical conduct, accountability, interest and motivation ● Acquire interpersonal skills for professional interactions with a diverse population of individuals, families, and communities ● Acquire interpersonal skills for professional interactions with clients, their supports, other health care professionals and team members ● Acquire skills necessary for promoting change necessary for quality health care ● Cross-cultural competency ● Virtual collaboration	● Maintain effective, mature, and sensitive relationships with clients, students, faculty, staff and other professionals under all circumstances ● Make proper judgments regarding safe and quality care ● Function effectively under stress and adapt to changing environments inherent in clinical practice ● Demonstrate professional role in interactions with clients, intra- and inter-professional teams ● Operate in different cultural settings (including disability culture) ● Work productively, drive engagement, and demonstrate presence as a member of a virtual team

United States Department of Justice. (2020). *A guide to disability rights laws*

BOARD OF REGISTERED NURSING

The Hartnell College ASN program is accredited by the Board of Registered Nursing (BRN). Its goals are to maintain excellence and to keep pace with the changing demands of the healthcare industry and community. The nursing curriculum is dynamic and ever-changing.

The BRN is a state governmental agency established by law to protect the public by regulating the practice of registered nurses. The BRN is responsible for implementation and enforcement of the Nursing Practice Act: the regulations related to nursing education, licensure, practice, and discipline. Students are encouraged to contact the BRN for information, assistance, and to report incidents.

Board Members

The nine-member Board is composed of three members of the public, five registered nurses, and a physician. The five registered nurses include three direct-client care nurses, a nurse administrator, and a nurse educator. Seven of the members are appointed by the Governor and two of the public members are appointed by the Legislature. Each member serves a four-year term and can be re-appointed, although the member cannot serve more than two consecutive terms.

BRN Consumer Protection

The BRN performs a variety of activities in its mission to protect consumers, including:

Setting RN Educational Standards: Establishes educational standards for nursing programs
Approving California Nursing Programs: Approximately 120 approved nursing programs meet BRN educational standards.
Evaluating Licensure Applications: Evaluates whether the applicant meets all licensure requirements. To be licensed, the applicant must

- complete educational requirements
- pass a national licensing examination
- be cleared through a background check for conviction of any crime which might make the applicant ineligible for licensure

Issuing and Renewing Licenses: The license must be renewed every two years
Issuing Certificates: The BRN issues certificates to eligible public health nurses, nurse practitioners, nurse anesthetists, nurse midwives, and clinical nurse specialists.
Taking Disciplinary Action: The BRN may take disciplinary action against the nurse's license for a violation of the Nurse Practice Act. Grounds for discipline focus on behaviors that place clients at risk of harm. Disciplinary action is dependent on the nature and severity of the violation and what is necessary to protect the public; the disciplinary action becomes a part of the RN's file and is accessible to the public.
Managing a Diversion Program: The BRN's Diversion Program is an alternative to the discipline process for nurses whose practice may be impaired due to chemical dependency or mental illness. This confidential program protects the public while enabling the nurse to be rehabilitated.
Operating an Online License Verification System: The BRN's online License Verification system allows the consumer to validate the status of a nurse's license to learn if the person is licensed as an RN and if:

- the license is active, inactive, or lapsed
- the nurse has any BRN certificates
- there is any disciplinary action against the license

BRN Regulations

The BRN regulates more than 450,000 California registered nurses providing healthcare services in a variety of settings. Regardless of the title or setting, the registered nurse's practice is governed by the BRN. Titles used in clinical practice include

- nurse anesthetist (CRNA)
- nurse midwife (NMW)
- clinical nurse specialist (CNS)
- nurse practitioner (NP)
- public health nurse (PHN)

Settings where registered nurses practice include

- health departments
- health maintenance organizations
- home health agencies
- schools
- private practice
- hospitals and skilled nursing facilities

The BRN is committed to successfully achieving its mission to protect California's health care consumers and promote quality nursing care. Students can assist by reporting to the BRN

- suspected violations of the Nursing Practice Act, such as RNs practicing in an unsafe or unprofessional manner, or unlicensed persons illegally providing nursing care
- issues that affect the education and practice of California RNs

BRN CONTACT INFORMATION

Board of Registered Nursing (BRN)
P.O. Box 944210, Sacramento, CA 94244-2100
(916) 322-3350
TTY for the Hearing Impaired: (800) 326-2297 CA Board of Registered Nursing

BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS

The Hartnell College Vocational Nursing program is accredited by the Board of Vocational Nursing and Psychiatric Technicians (BVNPT). The mission of the California BVNPT is to protect the public. Public protection is paramount to the BVNPT and its highest priority in exercising its licensing, regulatory and disciplinary functions. Toward this end, the BVNPT ensures that only qualified persons are licensed vocational nurses and psychiatric technicians by enforcing education requirements, standards of practice and by educating consumers of their rights. Students are encouraged to contact the BVNPT for information and assistance.

BVNPT Board Members

The BVNPT is composed of eleven members with a public member majority. There are six public members and five professional members. Nine members are appointed by the Governor, one by the Speaker of the Assembly, and one by the Senate Pro Tempore.

BVNPT Public Protection

The California BVNPT protects the consumer from unprofessional and unsafe licensed vocational nurses (LVNs) and psychiatric technicians (PTs). Public protection is the highest priority of the BVNPT in exercising its licensing, regulatory and disciplinary functions.

BVNPT Consumer Protection

To protect the public, the BVNPT

- establishes the minimum requirements for examination and licensure.
- establishes educational standards for the accreditation of Vocational Nursing (VN) and Psychiatric Technicians (PT) schools in California.
- adopts regulations to clarify the performance, practice and disciplinary standards for its licensees.
- enforces the regulations governing the continued accreditation of VN & PT schools in California.
- enforces the regulations governing LVNs and PTs by taking appropriate disciplinary action against incompetent or unsafe licensees efficiently and effectively.

The Board is responsible for examination and licensure of over 9,500 VN applicants and 1,000 PT applicants annually. The Board contracts with the National Council of State Boards of Nursing, Inc. for the year-round computer-adaptive vocational nurse licensure examination (NCLEX) administered at over 200 test centers nationwide. After an application has been approved, the applicant receives an Authorization to Test. The applicant is then responsible for scheduling an appointment for the NCLEX-PN.

A licensed vocational nurse is an entry-level healthcare provider who is responsible for rendering basic nursing care. A vocational nurse practices under the direction of a physician or registered nurse. The licensee is not an independent practitioner.

BVNPT Curricular Requirements

Licensed vocational nursing programs must consist of 1,530 total instructional hours:

- Theory: 576 hours, which includes 54 hours of pharmacology for nurses
- Clinical: 954 hours

Programs are in community colleges (47%); adult education/high schools (24%); private schools (20%); regional occupational centers (8%); and hospitals (1%).

Employment

There are more than 200,000 licensed vocational nurses in California providing healthcare services in a variety of settings. Regardless of setting, the vocational nurse's practice is governed by the BVNPT.

- Acute Medical/Surgical Hospitals
- Long Term Care, Skilled Nursing Facilities, Home Care Agencies
- Outpatient Clinics and Ambulatory Surgery Centers
- Doctor's Offices
- Dialysis Centers
- Blood Banks

- Psychiatric Hospitals
- Correctional Facilities
- School Districts
- Vocational Nursing Programs

The BVNPT is committed to successfully achieving its mission to protect California's health care consumers and promote quality nursing care. Students can assist by reporting to the BVNPT
- suspected violations of the Nursing Practice Act, such as LVNs practicing in an unsafe or unprofessional manner, or unlicensed persons illegally providing nursing care
- issues that affect the education and practice of California VNs

CONTACT INFORMATION
Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive, Suite 205
Sacramento, CA 95833
(916) 263-7800   CA Board of Vocational Nursing and Psychiatric Technicians

ACCREDITATION COMMISSION FOR EDUCATION IN NURSING, INC.
The Accreditation Commission for Education in Nursing (ACEN) is responsible for the specialized accreditation of nursing education programs (Clinical Doctorate, Master's, Baccalaureate, Associate, Diploma, and Practical programs). The Commission has authority and accountability for carrying out the responsibilities inherent in the application of standards and criteria, accreditation processes, and the affairs, management, policy-making, and general administration of ACEN.

Hartnell College's nursing programs received initial national accreditations in March 2017. The Hartnell ASN program was the 25th ASN program in California to receive ACEN accreditation. In 2017, the Hartnell VN program was the first VN program in California to receive this accreditation. The next continued accreditation site visits are scheduled for fall 2029.

CONTACT INFORMATION
Accreditation Commission for Education in Nursing, Inc.
3343 Peachtree Rd NE #850, Atlanta, GA 30326
(404) 975-5000 ACEN

COMMISSION ON ACCREDITATION FOR RESPIRATORY CARE
The Hartnell College Respiratory Care Practitioner Program holds continued accreditation from the Commission on Accreditation for Respiratory Care (CoARC).   The next CoARC site visit and Self-study Accreditation Report is scheduled in December 2024. The CoARC's mission is to serve the public by ensuring high quality respiratory care education through accreditation services. The respiratory curriculum is dynamic and ever-changing.

The CoARC is a national agency that accredits professional respiratory care degree programs at the associate, baccalaureate, and master's degree level in the United States and internationally. CoARC also accredits professional respiratory care degree programs offering certificates in polysomnography. The Hartnell College RCP program is accountable to the CoARC for the effective delivery and outcomes of its academic program. Public protection is paramount to the CoARC and its highest priority is exercising its regulatory and disciplinary functions. Toward this end, the CoARC ensures that only qualified persons are licensed respiratory therapists by enforcing education requirements and by educating consumers of their rights. Students are encouraged to contact CoARC for information and assistance.

CONTACT INFORMATION

Commission on Accreditation for Respiratory Care
264 Precision Blvd Telford, TN 37690
Phone: (817) 283-2835
Email: webmaster@coarc.com
Website: https://coarc.com/

RESPIRATORY CARE BOARD OF CALIFORNIA

Respiratory Care Practitioners (RCPs) or Respiratory Therapists (RTs) in California are licensed and regulated by the Respiratory Care Board of California (RCB). The RCB is a state governmental agency established by law to protect the public by regulating the practice of respiratory care practitioners. The mandate of the Respiratory Care Board is to protect and serve the consumer by administering and enforcing the Respiratory Care Practice Act and its regulations in the interest of the safe practice of respiratory care. Its mission is to protect and serve the consumer by enforcing the Respiratory Care Practice Act and its regulations, expanding the delivery and availability of services, increasing public awareness of respiratory care as a profession, and supporting the development and education of all respiratory care practitioners. Students are encouraged to contact the RCB for information and assistance.

RCB Public Protection
Public protection is the highest priority of the Board in exercising its licensing, regulatory and disciplinary functions.
To protect the public, the RCB
- establishes the minimum requirements for licensure.
- adopts regulations to clarify the performance, practice and disciplinary standards for its licensees
- enforces the regulations governing the continued education of its licensees.
- enforces the regulations governing RCPs by taking appropriate disciplinary action against incompetent or unsafe licensees efficiently and effectively.

RCB Regulations
The RCB regulates California respiratory care practitioners. More than 29,000 RCP licenses have been issued in the State of California. Regardless of the title or setting, the RCPs practice is governed by the Respiratory Care Board.

Settings where Respiratory Care Practitioners practice include
- health departments and health maintenance organizations
- home health agencies
- schools and private practice
- hospitals and skilled nursing facilities

CONTACT INFORMATION

Respiratory Care Board of California
3750 Rosin Court, Suite 100, Sacramento, CA 95834
Telephone: (916) 999-2190, Fax: (916) 263-7311
E-mail: rcbinfo@dca.ca.gov; Respiratory Care Board of California Contact Information

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NATIONAL REGISTRY OF EMERGENCY MEDICAL TECHNICIANS
PREAMBLE

EMS practitioners, by virtue of their state licensure, certification, or national registration, have unsupervised, intimate, physical and emotional contact with individuals at a time of maximum physical and emotional vulnerability and have unsupervised access to personal property. They are placed in a position of the highest public trust, even above that granted to other public safety professionals and most other healthcare providers. While police officers require warrants to enter private property and are subject to substantial oversight when engaging in "strip searches" or other intrusive practices, EMTs are afforded free access to the homes and intimate body parts of individuals who are extremely vulnerable. Individuals may be unable to defend or protect themselves, voice objections to particular actions, or provide accurate accounts of events at a later time.

Citizens in need of out-of-hospital medical services rely on the EMS System and the existence of state licensure/certification or national certification to assure that those who respond to their calls for aid are worthy of extraordinary trust. It is well accepted in the United States that persons who have been convicted of criminal conduct may not serve as police officers. In light of the high degree of trust conferred upon EMTs by virtue of licensure and certification, EMTs should be held to a similar, if not higher standards. For these reasons, the EMS certifying/licensing agency has a duty to exclude individuals who pose a risk to public health and safety by virtue of conviction of certain crimes.

The National Registry of Emergency Medical Technicians (NREMT) will deny certification or take other appropriate actions in regard to applicants for certification or recertification when a felony conviction has occurred. Decisions affecting eligibility will be based upon the following categories. Applicants may appeal decisions made by the National Registry as outlined in the NREMT Disciplinary Policy

General Denial

Certification of individuals convicted of certain crimes presents an unreasonable risk to public

health and safety. Thus, applications for certification by individuals convicted of the following crimes will be denied in all cases.

- Felonies involving sexual misconduct where the victim's failure to affirmatively consent is an element of the crime, such as forcible rape.
- Felonies involving the sexual or physical abuse of children, the elderly or the infirm, such as sexual misconduct with a child, making or distributing child pornography or using a child in a sexual display, incest involving a child, assault on an elderly or infirm person.
- Any crime in which the victim is an out-of-hospital patient or a patient or resident of a healthcare facility including abuse, neglect, theft from, or financial exploitation of a person entrusted to the care or protection of the applicant.

Presumptive Denial

Applications for certification by individuals in the following categories will be denied except in extraordinary circumstances, and then will be granted only if the applicant establishes by clear and convincing evidence that certification will not jeopardize public health and safety:

- Applications for certification by individuals who have been convicted of any crime and who are currently incarcerated, on work release, on probation or on parole.
- Applications for certification by individuals convicted of crimes in the following categories unless at least five years have passed since the conviction OR five years have passed since release from custodial confinement whichever occurs later:
- Serious crimes of violence against persons, such as assault or battery with a dangerous weapon, aggravated assault and battery, murder or attempted murder, manslaughter except involuntary manslaughter, kidnapping, robbery of any degree; or arson.
- Crimes involving controlled substances or synthetics, including unlawful possession or
- Distribution, or intent to distribute unlawfully, Schedule I through V drugs as defined by the Uniform Controlled Dangerous Substances Act.
- Serious crimes against property, such as grand larceny, burglary, embezzlement or insurance fraud.
- Any other crime involving sexual misconduct.

Discretionary Denial

Applications for certification by individuals convicted of any crimes including DUI, but not including minor traffic violations may be denied after consideration of the following factors:

- The seriousness of the crime.
- Whether the crime relates directly to the skills of out-of-hospital care service and the delivery of patient care.
- Lapse of time since the crime was committed.
- Whether the crime involved violence to, or abuse of, another person.
- Whether the crime involved a minor or a person of diminished capacity.
- Whether the applicant's actions and conduct since the crime occurred are consistent with the holding of a position of public trust.

The National Registry of Emergency Medical Technicians (NREMT)
PO Box 29233
Columbus, OH 43229
Telephone: 1-614-888-4484
Fax: 1-614-888-8920. The National Registry of Emergency Medical Technicians Contact Information

CALIFORNIA EMERGENCY MEDICAL SERVICES AUTHORITY

The EMS Authority is charged with providing leadership in developing and implementing EMS systems throughout California and setting standards for the training and scope of practice of various levels of EMS personnel. The EMS Authority also has responsibility for promoting disaster medical preparedness throughout the state, and, when required, coordinating, and supporting the state's medical response to major disasters. Emergency and disaster medical services in California are rooted in the skills and commitment of the first responders, EMTs, nurses, physicians, and administrators who deliver care to the public and operate the system. For high quality services to be delivered with high efficiency, all aspects of EMS systems must work together, mutually reinforcing and supporting each other for the benefit of the patient. The California EMS Authority, through standard setting, consensus building, and leadership, plays a central role in improving the quality of emergency medical services available for all Californians. Students are encouraged to contact the EMS Authority for information and assistance.

 In California, day-to-day EMS system management is the responsibility of the local and regional EMS agencies. It is principally through these agencies that the EMS Authority works to promote quality EMS services statewide. EMS Authority staff also work closely with many local, state, and federal agencies and private enterprises with emergency and/or disaster medical services roles and responsibilities.

Pre-hospital Emergency Medical Care Personnel Standards
The EMS Authority is mandated by statute to develop and implement regulations that set training standards and the scope of practice for emergency medical personnel, including Emergency Medical Technician (EMT), Advanced EMTs, Paramedics, Mobile Intensive Care Nurses (MICN), Firefighters, Peace Officers and Lifeguards. Pre-hospital emergency medical care personnel standards include the following:

- Development of statewide standards for all prehospital personnel
- Development, adoption, implementation, and maintenance of regulations for each level of personnel
- Resolution of policy issues and development of policies as necessary
- Provision of technical assistance regarding regulations and policies to LEMSAs, pre-hospital care providers including fire agencies and ambulance companies, EMS personnel, persons seeking required training, and training program administrators
- Review and approval of Statewide Public Safety Emergency Medical Responder (EMR),

EMT and Refresher Training Programs
- Maintenance and technical assistance for the statewide Emergency Medical Services Personnel Registry, a database providing the certification and licensure status for all EMS personnel in California.

CONTACT INFORMATION

The Emergency Medical Services Authority
10901 Gold Center Drive, Suite 400, Rancho Cordova, CA
EMSA Main Phone Number: (916) 322-4336
Paramedic Licensure: (916) 323-9875
Licensure Fax: (916) 324-2875

PROFESSIONAL NURSING ORGANIZATIONS

NATIONAL STUDENT NURSES ASSOCIATION

With a membership of approximately 56,000 nationwide, the National Student Nurses' Association mentors the professional development of future registered nurses and facilitates their entrance into the profession by providing educational resources, leadership opportunities, and career guidance. Its programs improve nursing and healthcare through community projects; education; legislative activities; and recruitment and retention of traditional and nontraditional nursing students. National Student Nurses Association

AMERICAN NURSES ASSOCIATION

The ANA is the only full-service professional organization representing the nation's 2.9 million registered nurses through its constituent member nurse associations. ANA advances the nursing profession by fostering high standards of nursing practice, promoting the economic and general welfare of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Congress and regulatory agencies on healthcare issues affecting nurses and the public. ANA

ASSOCIATION OF WOMEN'S HEALTH OBSTETRIC AND NEONATAL NURSES

The guiding principles of the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) strive to shape a diverse work environment. AWHONN promotes opportunity for personal and professional growth and encourages a diverse workforce that compliments that of women, newborns, and their families.

NATIONAL LEAGUE FOR NURSING

Hartnell College Nursing Program is proud to be a member of the National League for Nursing (NLN), a national organization that sets the standard for nursing education. National League for Nursing

ORGANIZATION FOR ASSOCIATE DEGREE NURSING

OADN is the leading advocate for associate degree nursing education and practice and promotes academic progression of graduates in furthering education to reach their maximum professional

potential. OADN collaborates with national nursing organizations to ensure the voice of associate degree nursing remains at the forefront to promote academic progression. [Organization for Associate Degree Nursing](#)

OADN strives to:

- Education: Advance the promotion of best practices in nursing education and academic progression.
- Advocacy: Ensure Associate Degree Nursing's voice in education and health care.
- Leadership: Develop leaders to promote meaningful change.
- Inclusivity: Leverage the diversity of Associate Degree Nursing Education to foster inclusion in health care.
- Collaboration: Promote Associate Degree Nursing quality, education and practice through collaboration with a diverse group of stakeholders. National Association for Practical Nurse Education and Service, Inc.

NATIONAL ASSOCIATION FOR PRACTICAL NURSE EDUCATION AND SERVICES, INC.

The National Association for Practical Nurse Education and Service, Inc. (NAPNES) is the world's oldest LPN/LVN Association. NAPNES is dedicated to promoting and defending the practice, education and regulation of Licensed Practical Nurses (LPN), Licensed Vocational Nurses (LVN), Practical Nursing Educators, Practical Nursing Schools, and Practical Nursing Students. NAPNES has constituent state members throughout the U.S. NAPNES is the organization that is responsible for the legislation that provides for the licensure, and education of practical nursing in the United States. Founded in 1941 NAPNES has become a multi-disciplinary organization that welcomes healthcare providers, students, educators, practical nursing schools, agencies, organizations, lay community and other individuals interested in promoting the professional practice and education of practical nurses.

ADDITIONAL PROFESSIONAL NURSING ORGANIZATIONS

Additional professional organizations can be researched at the following websites:

- California Nurses Association [California Nurses Association Press Releases](#)
- The National Association of Licensed Practical Nurses (NALPN): [The National Association of Licensed Practical Nurses](#)
- National Association for Practical Nurse Education and Service, Inc. (NAPNES): [National Association for Practical Nurse Education and Service](#)
- The National Council of State Boards of Nursing: [The National Council of State Boards of Nursing](#)
- Association of California Nurse Leaders (ACNL): [Association of California Nurse Leaders](#)
- California Organization of Associate Degree Nursing Program Directors: [CA OADN](#)

PROFESSIONAL RESPIRATORY CARE ORGANIZATIONS

AMERICAN ASSOCIATION FOR RESPIRATORY CARE

Since 1947, the American Association for Respiratory Care (AARC) has been committed to enhancing your professionalism as a respiratory care practitioner, improving your performance on the job, and helping you broaden the scope of knowledge essential to your success. With more than 50,000 members nationwide, the AARC is the only professional society for respiratory therapists in hospitals and with home care companies, managers of respiratory and cardiopulmonary services, and educators who provide respiratory care training. [American Association for Respiratory Care](#)

CALIFORNIA SOCIETY FOR RESPIRATORY CARE

The California Society for Respiratory Care (CSRC), as an affiliate of the American Association of Respiratory Care (AARC), is a non-profit professional organization. Its mission is to represent and support members through public and legislative advocacy, educational opportunities, and to continuously strive for excellence in the cardiopulmonary profession. By these means, the CSRC is committed to health, healing, and disease prevention in the California community. [California Society for Respiratory Care](#)

NURSING AND HEALTH SCIENCES FORMS

The following forms are samples only.
Signed copies are downloaded by students into their confidential electronic files and kept on record.

Hartnell College
SAMPLE: STUDENT ACCEPTANCE OF COURSE RESPONSIBILITIES

Healthcare professionals require integrity and adherence to the Nursing, Respiratory, and Emergency Medical Technician Codes of Ethics.

- I understand that I must always maintain client confidentiality. I will not discuss clients or experiences outside of the clinical area or simulation lab. I will not leave identifying information on any client paperwork.

- I understand that I may not give any medications or perform clinical skills without the supervision or expressed consent of the clinical instructor of record.

- I understand that the nursing and respiratory care academic programs include courses that must be taken concurrently. Withdrawal or failure in one of these courses will result in having to retake concurrent courses.

- I have read, reviewed, and understand the contents, objectives, and requirements as stated in each course syllabus and I agree to abide by them.

- I have read, reviewed, and understand the contents in the Hartnell College NHS Student Handbook and Policy & Procedure Manual.

- I understand that failure to adhere to the NHS policies and procedures and to Hartnell College codes of practice and guidelines may result in verbal/written warnings, Performance Improvement Plans, failing grades, or expulsion from my academic program.

Student Name (print) _____

Student Signature _____

Date _____

Academic Program _____

HARTNELLCOLLEGE
NURSING AND HEALTH SCIENCES

SAMPLE: SIMULATION CONDUCT & CONFIDENTIALITY AGREEMENT

Students enrolled in a Nursing and Health Sciences academic program are expected to participate in simulated patient care experiences, or simulations. These are designed to develop clinical and critical thinking skills with the goal of improving client care.

By signing below, you agree to adhere to the following stipulations:

- I will hold the assumption that everyone participating in simulation activities is intelligent and capable, cares about doing their best, and wants to improve

- I will do my utmost to suspend disbelief and engage fully with each simulation scenario

- I acknowledge that, in addition to my assigned group, others may be present during a simulation session, including but not limited to: faculty, staff, student workers, and actors

- When attending simulation sessions, I will behave as would be expected of me in the clinical environment, including but not limited to:
  - Maintaining professional conduct
  - Wearing appropriate attire
  - Collaborating with fellow learners in a respectful, supportive manner

- I will keep all details related to simulation scenarios, regardless of form, strictly confidential, including but not limited to:
  - Any information obtained prior to, during, or when debriefing after a session
  - Any information revealed by another person about a session I did not attend

- I will keep all details of my performance and the performance of others during simulation sessions strictly confidential

- I will report promptly any breaches of confidentiality of which I become aware to a simulation facilitator

Signature _____

Print Name _____

Date _____ Academic Program _____

HARTNELL**COLLEGE**
NURSING AND HEALTH SCIENCES

SAMPLE: AUDIO/VISUAL RECORDING CONSENT & RELEASE

By signing below, you give your consent to the following:

- Video and/or audio capture of simulation sessions that I attend may be broadcast live for viewing by other students within my assigned simulation group for the purposes of observation

- Video and/or audio capture of simulation sessions that I attend may be recorded for the purpose of improving simulation policies and procedures; these recordings may be reviewed by relevant faculty/staff in the Nursing and Health Sciences Department and will be kept for no longer than one year after the date of recording

Signature _____

Print Name _____

Date _____ Academic Program _____

HARTNELLCOLLEGE
NURSING AND HEALTH SCIENCES

SAMPLE: Notice of Academic Standing

Date:
Course:

Student Name:
*Your percentage to date is*_____.

- As of this date, I understand that I am receiving a satisfactory score to successfully pass this course. Continued diligence in finishing assignments and preparing for exams is encouraged.

- As of this date, I understand that I am not receiving a satisfactory score/percentage to successfully pass this course and that I am in danger of failing. I understand that I must receive sufficient points on the remaining graded assignments to meet the 70% minimum to successfully complete this course.

- As of this date, I understand that I am receiving less than 75%. I understand that I must receive sufficient points on the remaining graded assignments to meet the 70% minimum to successfully complete this course.

- I know the date to withdraw from this course with a "W." If I choose not to withdraw, I know that I will earn a "D" or "F" for the course if I earn less than a 70% minimum.

- I am aware of the resources available to me by the course instructors, clinical faculty/professional experts, Hartnell College academic counselors, and Hartnell College's student services. I understand how to access my resources so that I may

formulate an educational plan that best addresses my needs.

Student Signature _____Date _____

Instructor Signature _____Date _____

Original to Student File

SAMPLE: Performance Improvement Plan

Date:

Student Name:

Course:

The named student is not meeting course objectives as described below:

Learning Objective	Performance/Behavior	Identified Deficiency	Expected Student Outcomes	Resources Available
(#)	(Data)	(Data)	(Expected performance)	(Resources specific to performance)

Student's Plan for achieving the outcomes/goals:

Summary:

Signatures: *Signing this form only acknowledges receipt of the form, not agreement or disagreement with the information documented on the form.*

Student/Date _____

Instructor/Date _____

Dean, NHS/Date _____

HARTNELLCOLLEGE
NURSING AND HEALTH SCIENCES

SAMPLE: Exam Item Query Form
Must be submitted within 3 school days after exam has been graded

Student:

Course: Exam Date:

I am challenging the following test item:

Two published resources available to classmates that support the challenge.

_____
_____
_____
_____

1. Text/Syllabus/Professional Journal: Title/Page Number:

_____
_____
_____

2. Text/Syllabus/Professional Journal: Title/Page Number:

_____
_____
_____

: SAMPLE: Authorization for Background Checks, Drug Screening and Dissemination of Results

Hartnell College and Nursing and Health Sciences maintain affiliation agreements with numerous clinical facilities. Each agency agreement is different, but all require health and background screenings that must be completed prior to allowing students to participate in client care activities. Students seeking unconditional acceptance bear the cost of all screenings.

- I understand that if I have had a misdemeanor and/or felony, I must make a private and

  confidential appointment with the Dean of Academic Affairs, Nursing and Health Sciences to disclose necessary information related to my past legal infraction(s) as soon as possible. This is important because I need to know if my legal infraction(s) make me ineligible for admission based on external affiliation requirements. I understand that the results of my Live Scan fingerprinting are the property of Monterey County and are not shared with Hartnell College. A Monterey County administrator at Natividad will contact me, if indicated.

- I understand that, in compliance with the requirements set forth by clinical affiliates of the

  College, I must complete a 10-panel urine drug screen and submit results to NHS. I understand that if my drug screen is positive and cannot be cleared by the physician evaluating the results, I might be denied acceptance because of a condition of clinical placement by an affiliating agency. I understand that the drug screening is repeated if I have a break in enrollment or at any time during my enrollment if there is cause for concern.

- I understand that maintaining health clearances and a current AHA BLS for Providers card are

  contractual requirements with the agencies. I understand that expired clearances disqualify me from attending clinical classes, which might result in a clinical failure caused by an inability to complete clinical course objectives.

- I authorize dissemination of a letter confirming compliance with background check, drug screens,

  and health screens to clinical agency liaisons as deemed necessary. I understand that Hartnell College will provide the actual records to the requesting party if the requesting party is required by federal or state law or regulations to produce background information to which the student records relate.

Printed Name _____ Date _____

Sign._____ ID Number _____Circle: RCP RN VN

SAMPLE: Academic Integrity

Faculty, students, and administrative staff share the responsibility of ensuring the honesty and fairness of the intellectual environment at Hartnell College. This statement on academic integrity applies to NHS students at Hartnell College. All students are expected to adhere to the highest standards of ethical behavior expected of healthcare professionals.

The purpose of the Academic Integrity statement is threefold:
- To clarify NHS's expectations regarding students' academic behavior.
- To provide specific definitions of dishonest conduct proposed by the Hartnell College Academic Senate (2019) and examples of ways to avoid dishonest conduct. The definitions and examples are only illustrative, not exhaustive.
- To outline disciplinary actions in accordance with Hartnell College AP 5520, AP 5500, and Education Code §76037, and NHS Policies and Procedures.

Definitions

Academic dishonesty in course and non-course activities is defined as an act of obtaining or attempting to present academic work through fraudulent or deceptive means in order to obtain credit for this work. Academic dishonesty includes but is not limited to cheating; fabrication; fraud, misrepresentation, and lying; plagiarism; multiple submissions; and facilitating academic dishonesty.

Cheating is defined as the failure to observe the expressed procedures of an academic exercise. Cheating includes but is not limited to the following:

Unauthorized use of commercial "research" services such as term paper mills.

Providing information to others without the instructor's permission or allowing the opportunity for others to obtain information that provides the recipient with an advantage on an exam or assignment.
- Unauthorized communication with fellow students during a quiz or exam.
- Copying material, in part or in whole, from another student's quiz or exam.
- Permitting another student to copy from a quiz or exam.
- Permitting another person to take a quiz, exam, or similar evaluation in lieu of the enrolled student.
- Using unauthorized materials, information, or study aids (e.g., textbook, notes, data, images, formula list, dictionary, calculator, etc.) in any academic exercise or exam.
- Unauthorized collaboration in providing or requesting assistance, such as sharing information on an academic exercise or exam through electronic devices (or any other

means of communication).

- Using another person's collected or measured data in assignments such as computer or lab exercises without the instructor's permission.
- Using any electronic device to gain access to, alter, and/or use unauthorized information.
- Altering a graded exam or assignment and requesting that it be re-graded. Submission of altered work after grading shall be considered academically dishonest, including but not limited to changing answers after an exam or assignment has been returned or submitting another's exam as one's own to gain credit.
- Attempting to hinder the academic work of another student.
- Discussing answers or ideas relating to the answers on a test or other examination with students who have not yet taken the test or examination.
- Unauthorized use of an annotated instructor's edition of a textbook.
- Obtaining, making, or distributing copies of a test, examination, or other course material without the instructor's permission.
- Using notes, cheat sheets, or other devices considered inappropriate under the prescribed testing condition.
- Collaborating with another or others in work to be presented without the instructor's permission.
- Falsifying records, laboratory work, or other course data.
- Knowingly and intentionally assisting another student in any of the above.

Fabrication is defined as falsification or invention of any information in an academic exercise. Falsification includes but is not limited to the following:
- Fabricating or altering data to support research.
- Presenting results from research that was not performed—submitting material for lab assignments, class projects, or other assignments which is wholly or partially falsified, invented, or otherwise does not represent work accomplished or undertaken by the student.
- Crediting source material that was not directly used during the research project.
- Falsification, alteration, or misrepresentation of official or unofficial records or documents including but not limited to clinical data, academic transcripts, letters of recommendation, and admissions applications or related documents.

Fraud, Misrepresentation, and Lying are defined as intentionally making an untrue statement or deceiving. Fraud, misrepresentation, and lying include but are not limited to the following:
- Providing an excuse for an absence, tardiness, or late assignment with the intent to deceive the instructor, staff or the District.
- Checking into a district class, lab, center or other district resource with the intent to deceive the instructor, staff, or the District.
- Checking in or checking out of a district class or resource for another student.
- Using another student's district identification card for use in a class, lab, center, or other

district resource.
- Intentionally misrepresenting the content, meaning, or context of source material, clinical data, or scientific data.

Plagiarism is defined as the presentation of another's words, images or ideas as if they were the student's own. Plagiarism includes but is not limited to
- stealing the written, oral, artistic, or original works or efforts of others and presenting them as one's own.
- the submission of material, whether in part or whole, authored by another person or
- source (e.g., the internet, book, journal, etc.), whether that material is paraphrased, translated or copied verbatim or in near-verbatim form without properly acknowledging the source. (It is the student's responsibility to cite all sources.)
- the submission of material edited, in part or whole, by another person that results in the loss of the student's original voice or ideas (i.e., while an editor or tutor may advise a student, the final submitted materials must be the work of the student, not that of the editor or tutor.)
- translating all or any part of material from another language and presenting it as if it were the student's own original work.
- unauthorized use of another person's data in completing any exercise.

Multiple Submissions is defined as resubmission of a work with identical or similar content that has already received credit in a high school or another college course. Multiple submissions include but are not limited to the following:
- Submission of work with identical or similar content in concurrent courses without written consent of all instructors involved.
- Resubmission of work with identical or similar content from the past section of the same course without written consent of the present instructor.
- Resubmission of work with identical or similar content from a past course in a current course without written consent of the present instructor.

Facilitating Academic Dishonesty is defined as assisting another to commit an act of academic dishonesty. Facilitating academic dishonesty includes but is not limited to the following:
- Taking a quiz, exam, or similar evaluation in place of another person.
- Allowing one student to copy from another.
- Attending a course posing as another student who is officially registered for that course.
- Providing material or other information (e.g., a solution to homework, a project or other assignments, a copy/screenshot of an exam, exam key, or any test information) to another student with knowledge that such assistance could be used to violate any other sections of this procedure.
- Distribution or use of notes or recordings based on college classes without the express written permission of the instructor for purposes other than individual or group study; this

includes, but is not limited to, providing materials for distribution by services publishing class notes. (This restriction on unauthorized use applies to all information distributed or in any way displayed for use in relation to the class, whether obtained in class, via email, on the internet, or via any other media.)

Upholding Academic Integrity
Everyone is responsible for upholding academic integrity. Culpability is not diminished when the student claims not to know the policy or procedure.

Student Responsibility
If a student observes others violating this policy, the student is strongly encouraged to report the misconduct to the instructor, to complete a <u>Behavior Report</u> form, or to address the student(s) directly.

  To avoid cheating or unauthorized collaboration, fabrication, or fraud, a student should never
  - use, copy or paraphrase the results of another person's work and represent that work as his/her own, regardless of the circumstances.
  - refer to, study from, or copy archival files (e.g., old tests, homework, or client assignments) that were not approved by the instructor.
  - copy another's work or to permit another student to copy his/her work.
  - work as a collaborative effort if he/she did not contribute a fair share of the effort.
  - falsify official or unofficial records related to academic status, clinical requirements, client data, or admission materials.
  - intentionally misrepresent self or others

  To avoid even the suspicion of plagiarism, a student must always
  - enclose every quotation in quotation marks and acknowledge its source.
  - cite the source of every summary, paraphrase, abstraction or adaptation of material originally prepared by another person and any factual data that is not considered common knowledge. Include the name of author, title of work, publication information and page reference.
  - acknowledge material obtained from lectures, interviews, or other oral communication by citing the source (name of the speaker, the occasion, the place, and the date).
  - cite material from the internet as if it were from a traditionally published source. Follow the APA citation style or requirements of the instructor for whom the work is produced.

Faculty Responsibility
Instructors are strongly encouraged to report incidents of student academic misconduct to the Dean of Academic Affairs, NHS in a timely manner so that the incident may be handled fairly and consistently. Proctors and student teaching assistants are expected to report instances of student misconduct to their supervising instructors. Instructors are expected to respond to student concerns about academic dishonesty in their courses.

Instructor Disciplinary Action When Cheating/ Plagiarism Occurs

When a student is charged with plagiarism or cheating related to a class and the instructor has reasonable proof or documentation or if the student admits the violation, the instructor may select one or more of the following options:

1. Issue an oral or written notification and warn the student that further acts of this sort will result in additional disciplinary action
2. Issue a "NP" or a failing grade ("F") for the assignment in question
3. Issue a lowered course grade

Incidents of academic dishonesty and sanctions should be promptly reported in writing to the Director of Student Affairs with a copy to the student. The Director of Student Affairs will determine whether to initiate disciplinary action (Ed. Code § 76037, AP 5520). The student has a right to appeal any of these disciplinary actions and the right to have the case reviewed by a hearing board.

- I have read and understand the definitions of academic dishonesty and practices to avoid academic misconduct.

- I understand that I am responsible for upholding academic integrity and ethical responsibilities.

- I understand that I have the right to appeal a charge of academic dishonesty. I know to contact the Director of Student Affairs within five working days of notification of a disciplinary action.

Printed Name _____ Date _____
Signature_____ Circle: RCP RN VN EMT

Nursing and Health Sciences Student Handbook

2023-2024

The provisions in this handbook are based on Hartnell College policies and services and are subject to change. Material cited in the Nursing and Health Sciences Student Handbook does not constitute an irrevocable contract between any applicant or student and the program. Hartnell College is not responsible for misrepresentation that might arise resulting from updates after publication or from errors occurring in the preparation of this handbook. Students are encouraged to use the links provided for detailed information.