

# **Nursing and Health Sciences Policy and Procedure Manual 2021-2022**



**HARTNELL COLLEGE**

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

# TABLE OF CONTENTS

|   |    |
|---|----|
| 1A: CONTENT EXPERT: NURSING .....   | 3  |
| 1B: CONTENT EXPERT: RESPIRATORY CARE PRACTITIONER .....                             | 4  |
| 2A: ADMISSION TO NURSING AND RESPIRATORY CARE PROGRAMS.....                         | 6  |
| 2B: REINSTATEMENT: GOOD STANDING/ELECTIVE WITHDRAWAL.....                           | 8  |
| 2C: REINSTATEMENT: UNSATISFACTORY STANDING: WITHDRAWAL/DISMISSAL .....              | 10 |
| 2D: ADMISSION: TRANSFER and Advanced PLACEMENT: NURSING PROGRAMS .....              | 12 |
| 2E: ADMISSIONS: TRANSFER AND PLACEMENT: RESPIRATORY CARE PRACTITIONER PROGRAM ..... | 15 |
| 2F: SELECTION CRITERIA FOR ADMISSION: ASSOCIATE DEGREE IN NURSING PROGRAM .....     | 17 |
| 2G: SELECTION CRITERIA FOR ADMISSION: VOCATIONAL NURSING PROGRAM .....              | 20 |
| 2H: SELECTION CRITERIA FOR ADMISSION: RESPIRATORY CARE PRACTITIONER PROGRAM.....    | 22 |
| 3: ATTENDANCE .....   | 25 |
| 4A: CLINICAL PLACEMENT: FACULTY .....   | 28 |
| 4B: CLINICAL PLACEMENT: STUDENTS.....   | 29 |
| 4C: CLINICAL FACULTY: STUDENT RATIO .....   | 31 |
| 5: FACULTY ORIENTATION AND REMEDIATION.....   | 33 |
| 6: CONFLICT RESOLUTION PROCESS .....  | 33 |
| 7A: DRESS CODE: FACULTY AND STAFF.....  | 34 |
| 7B: DRESS CODE: STUDENTS .....  | 36 |
| 8: STUDENT IMPAIRMENT .....   | 39 |
| 9: GRADING CRITERIA .....   | 47 |
| 10: MEDICATION ADMINISTRATION .....   | 51 |
| 11A: EXAMINATION DEVELOPMENT AND REVIEW.....  | 55 |
| 11B: EXAMINATION ADMINISTRATION .....   | 62 |
| 12: HIGH FIDELITY SIMULATION .....  | 66 |
| 13: CONFIDENTIALITY AND PROFESSIONALISM.....  | 68 |
| 14: GRADUATION AND PINNING.....   | 71 |
| 15: GIFTS FROM STUDENTS .....   | 74 |
| 16: INVASIVE PROCEDURES .....   | 75 |
| 17: USE OF ATI IN NURSING CURRICULUM.....   | 5  |

## 1A: CONTENT EXPERT: NURSING

### PURPOSE

To assure timely and relevant curriculum review, and to recognize faculty members as content experts.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS with Hartnell College Administrative and Board Policies
  - 3. Assign qualified faculty (content experts) for content review.
- B. NHS Faculty
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Identify qualified faculty (content experts) for content review.
  - 3. Participate in curriculum revision and function as a member of the curriculum committee.
- C. Content Experts
  - 1. Complete 30 hours of scholarship and clinical experience in area assigned. Submit proof of completion to dean each August for submission to BRN.
  - 2. Review curriculum content in assigned area(s).
  - 3. Annually update learning materials and content in area of expertise.
  - 4. Act as consultants to the faculty on content area(s).
  - 5. Function as members of the nursing curriculum committee.

---

## POLICY

### I. POLICY STATEMENT

The faculty and staff of NHS ensure the timely and relevant curriculum program review. Qualified faculty review, revise, and recommend curricular changes within a specialty content area. ADN specialty areas include medical/surgical, mental health, obstetrics, pediatrics, and geriatrics.

### II. PROCEDURE

- A. Curriculum review occurs throughout the academic year and discussed at Curriculum Committee meetings.
- B. The content expert reviews and revises nursing courses to assure (1) currency of content, (2) appropriateness of content, and (3) logical progression of subject matter.
- C. The content expert is cognizant of changing trends in the assigned content area through professional journals, workshops, courses, employment, and clinical experiences.
- D. The content expert acts as a consultant to the faculty and uses evidence-based data.
- E. Minutes for curriculum meetings include all actions, recommendations, and revisions.
- F. Changes to the curriculum are reviewed and approved by the appropriate academic committees and regulatory bodies.

Original: 06/26/12

Reviewed/Revised: 04/13; 05/13; 05/14; 06/14; 06/18; 04/19; 10/20

Approved: 05/13; 06/14; 07/14, 3/15, 9/15, 10/16

## **1B: CONTENT EXPERT: RESPIRATORY CARE PRACTITIONER**

### **PURPOSE**

To assure timely and relevant curriculum review, and to recognize faculty members as content experts.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS with Hartnell College Administrative and Board Policies
  - 3. Assign qualified faculty (content experts) for content review.
- B. NHS Faculty
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Identify qualified faculty (content experts) for content review.
  - 3. Participate in curriculum revision and function as a member of the curriculum committee.
- C. Content Experts
  - 1. Review curriculum content in assigned area(s).
  - 2. Act as consultants to the faculty on content area(s).
  - 3. Function as members of the RCP curriculum committee.

---

## **POLICY**

### **I. POLICY STATEMENT**

The faculty and staff of the Hartnell College Respiratory Care Practitioner (RCP) Program ensure the RCP curriculum is current and relevant through regular review. A qualified content expert reviews and recommends curricular changes within the specialty. A qualified faculty (content expert) is identified for the following areas as required by the Commission of Accreditation for Respiratory Care (CoARC):

- A. Adult
- B. Geriatric
- C. Newborn
- D. Pediatric
- E. Health promotion, education, and disease management
- F. Principles of healthcare reimbursement
- G. Principles of evaluating scientific literature
- H. Medical ethics
- I. Provision of healthcare services to patients with transmissible diseases
- J. Provision of services and management of patients with special needs
- K. Community respiratory health
- L. Medical emergencies
- M. Legal and ethical aspects of respiratory care practice

### **II. PROCEDURE**

- A. RCP curriculum meetings are held during the academic year for curriculum review and revision.
- B. The content expert reviews course content to assure (1) currency of content; (2) appropriateness of content; and (3) logical progression of subject matter.

- C. The content expert is cognizant of changing trends in assigned content area through professional journals, workshops, courses, employment, and clinical experiences.
- D. The content expert acts as a consultant to the faculty and uses evidence-based data.
- E. Minutes for RCP curriculum meetings contain all actions, recommendations, and revisions.
- F. Appropriate academic committees and regulatory bodies review and approve changes to the curriculum.

Original: 06/26/12

Reviewed/Revised: 04/13; 05/13; 05/14; 06/14; 06/18; 4/19;10/20

Approved: 05/13; 06/14; 07/14, 3/15, 9/15, 10/16 9/19

## **2A: ADMISSION TO NURSING AND RESPIRATORY CARE PROGRAMS**

### **PURPOSE**

To establish guidelines for admission to Hartnell College's Associate Degree in Nursing, Vocational Nursing, and Respiratory Care Practitioner programs of study.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Annually review and revise all application materials.
  - 4. Coordinate standardized testing for admission, if required.
  - 5. Review submission materials and approve qualified applicants.
  - 6. Notify students of admission status.
- B. NHS Faculty
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Participate in admission and selection as assigned.
  - 3. Participate in New Student Orientation meeting(s).
- C. NHS Staff
  - 1. Annually revise application materials as directed.
  - 2. Review submitted applications and related materials.
  - 3. Maintain student files in accordance with security and confidentiality regulations.
- D. Students
  - 1. Read and seek clarification of:
    - a. Hartnell College Catalog and Hartnell academic policies and procedures.
    - b. NHS Student Handbook and Policies and Procedure Manual.
    - c. Hartnell College NHS admission requirements.

---

## **POLICY**

### **I. POLICY STATEMENT**

Hartnell College provides the leadership and resources necessary to ensure that students are equitably treated during the admission process and have equal access to quality education. Students are afforded the opportunity to pursue admission to the Hartnell College Nursing and Health Sciences programs of study.

### **II. PROCEDURE**

- A. The ADN and RCP programs have a four-semester curriculum, admitting a new class each fall semester. The VN program has a three-semester curriculum, admitting a new class each spring semester.
- B. Admission requirements must be completed before applying for admission to the ADN, VN, or RCP program.
- C. Applicants are responsible for obtaining the most recent application policy and procedure information. Current requirements and procedures for application are found on the NHS website (<http://www.hartnell.edu/NHS>) and in the NHS, Health Professions Pathway, and academic counseling offices.

D. Applicant Responsibilities

1. Meet with a Hartnell College NHS counselor to review appropriate prerequisites and screening requirements for admission.
2. Apply for admission to Hartnell College, if not currently enrolled as a student.
3. Complete the online application packet posted on the Hartnell College NHS web site. (<http://www.hartnell.edu/NHS>)
4. Submit required documentation by the deadline. Late or incomplete applications are not accepted.
5. Notify the NHS administrative personnel of changes in address, email, and telephone numbers.

E. Application Documents

1. Transcripts: Only official transcripts are accepted. The transcripts must be unopened and possess the official seal of the college's registrar.
2. One official Hartnell College transcript.
3. Two official transcripts from every college attended.
4. VN: One official high school transcript, GED report, or proficiency report. The ADN and RCP programs do not require proof of high school completion.
5. Foreign transcript: evaluation by an outside credential evaluator is required. Evaluation must be done before a *Request for Course-to-Course Evaluation Form* can be completed by a NHS academic counselor.
6. *Request for Course-to-Course Evaluation Form* for coursework taken at other colleges or institutions. The form is completed by a Hartnell College NHS counselor.

F. Accepted Students

1. Submit the *Acceptance Reply* form to secure student placement. Placement is forfeited if the form is not received by the stated deadline.
2. Attend the mandatory New Student Orientation scheduled during the semester prior to the beginning of the academic program. Placement is forfeited for non-attendance.

G. Denied Students

1. Meet with a Hartnell College NHS counselor to discuss educational opportunities and plans.
2. Meet with Dean or program director to review and retrieve application packet.

H. Deferral

1. Accepted students submit a written request to defer to the dean within two weeks of the beginning of the semester/module.
2. Only one postponement of admission is granted.
3. Applicants unable to enroll at the second offer forfeit admission and are encouraged to reapply during a subsequent admission period.

Original: 5/17/03

Reviewed/Revised: 02/06; 06/08; 05/13; 06/14; 06/18; 06/19; 10/20

Approved: 07/11; 12/13; 06/14; 07/14, 05/15, 09/15, 5/17 9/19

## **2B: REINSTATEMENT: GOOD STANDING/ELECTIVE WITHDRAWAL**

### **PURPOSE**

To establish guidelines for students seeking reinstatement following elective withdrawal from an NHS academic program while in good standing.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually Review the NHS Policies and Procedures Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Review student’s petition for re-admission and documents forwarded by instructor of record.
  - 4. Notify student and instructor of record of reinstatement status.
- B. NHS Faculty
  - 1. Annually review the NHS Policies and Procedures Manual.
  - 2. Participate in the reinstatement processes as indicated.
- C. NHS Staff
  - 1. Annually revise application materials as directed.
  - 2. Review submitted applications and related materials.
  - 3. Maintain student files in accordance with security and confidentiality regulations.
- D. Student
  - 1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. NHS Student Handbook and Policy and Procedure Manual
    - c. Hartnell College and NHS admission requirements.

---

## **POLICY**

### **I. POLICY STATEMENT**

Hartnell College NHS encourages and supports the reinstatement of qualified students who electively withdraw while in good standing (“C” or  $\geq 70\%$ ).

### **II. POLICY**

- A. Definitions
  - 1. Reinstatement: enrollment in the same semester course(s) from which the student withdrew in good standing.
  - 2. Good standing: maintenance of passing grades (“C” or  $\geq 70\%$ ) in all academic core courses at the time of withdrawal. “Good Standing” includes elective withdrawal due to non-academic performance issues, such as family situations, illness, or surgery.
  - 3. Unsatisfactory standing: withdrawal with less than satisfactory clinical performance or with a non-passing grade in a nursing or respiratory care core course [less than “C” ( $< 70\%$ ) or “no credit”]. (See Policy 2C)



4. Reinstatement is on a space available basis. Students who withdraw in good standing are given priority placement over students requesting reinstatement after academic remediation for below 70% or transfer from another institution.
5. Re-enrollment occurs the next time the course from which the student withdrew is offered.

### **III. PROCEDURE**

- A. Students requesting reinstatement following elective withdrawal in good standing
  1. meet with the dean or submit a written request for reinstatement.
  2. submit required application documents, certifications, and/or completed student success plan as generated by the instructor of record.
- B. The written request for reinstatement and copies of all required documentation are submitted prior to the closing date for new student applications or prior to the semester in which the student is requesting reinstatement.
- C. After review of the written request for reinstatement materials and enrollment availability data, the dean notifies the student of acceptance status.

Original: 06/23/03

Reviewed/Revised: 0 2/06; 06/08; 07/11; 5/13; 06/14; 06/18; 6/2019; 4/2021

APPROVED: 07/11; 05/13; 07/14;09/15, 10/16, 9/19

## **2C: REINSTATEMENT: UNSATISFACTORY STANDING: WITHDRAWAL/DISMISSAL**

### **PURPOSE**

To establish guidelines for students requesting reinstatement following withdrawal or dismissal in unsatisfactory standing from a NHS program of study.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  1. Review the NHS policies and procedures annually.
  2. Annually align NHS policies with Hartnell College administrative and board policies.
  3. Review and approve student's reinstatement documents forwarded by instructor of record.
  4. Notify students of reinstatement status.
- B. NHS Faculty/Instructor of Record/Success Coordinator
  1. Review the policies and procedures annually.
  2. With student to generate a student success plan complete with objectives and timelines.
  3. Notify the dean of students' standing at completion of success courses.
- C. NHS Staff
  1. Collect and manage submitted applications and related materials.
  2. Maintain student files in accordance with security and confidentiality regulations.
- D. Student
  1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. NHS Student Handbook and Policy and Procedure Manual.
    - c. Hartnell College and NHS reinstatement requirements.

---

## **POLICY**

### **I. POLICY STATEMENT**

Hartnell College NHS encourages and supports the reinstatement of students who were unsuccessful in theoretical coursework in the ADN, VN, or RCP programs of study. Upon successful completion of requirements and /or student success plans, students may petition for reinstatement. Students who are unsuccessful in a clinical/lab course or in the clinical/lab component of a combined theory/clinical course are ineligible for reinstatement.

### **II. POLICY**

- A. Definitions
  1. Reinstatement: enrollment in the same semester course(s) from which the student previously withdrew.
  2. Good standing: maintenance of passing grades ("C" or  $\geq 70\%$ ) in all nursing or respiratory care theory courses at the time of withdrawal. Good standing includes elective withdrawal due to non-academic performance issues such as family situations, illness, or surgery. (See Policy 2B)
  3. Unsatisfactory standing: withdrawal with less than a "Meets Expectations/Satisfactory" or a "No Pass/Fail" in an on- or off-campus clinical/lab

course or with a non-passing grade in a nursing or respiratory care core course [less than “C” (< 70%) or “No Pass”].

- B. Students seeking reinstatement must submit a written request to the dean.
- C. No more than one reinstatement is granted for students with unsatisfactory standing in a theory course. Students with extenuating circumstances must meet with the dean and may petition for reinstatement.
- D. Successful completion of a student success plan specific to the cause for withdrawal or dismissal is required prior to applying for reinstatement. It is the student’s responsibility to submit proof of successful completion of the plan to the dean. The remediation plan should include selected nursing or respiratory skills competencies.
- E. Students are encouraged to meet with a Hartnell College NHS counselor and student support staff before petitioning for reinstatement.
- F. Circumstances resulting in possible conditional reinstatement include, but are not limited to
  - 1. positive drug or alcohol screen
  - 2. legal infractions
- G. Circumstances resulting in ineligibility for reinstatement include, but are not limited to, the following:
  - 1. Unsafe behavior
  - 2. Unprofessional behavior
  - 3. Unethical behavior
  - 4. Clinical course failure
  - 5. Incomplete remediation plan
  - 6. More than one repeat within a NHS program

### III. PROCEDURE

- A. Students submit a written request for reinstatement to the dean prior to the closing date for new student applications or prior to the semester/module in which the student is requesting reinstatement.
- B. After review of reapplication materials and space availability, the instructor of record recommends action to the dean.
- C. The student receives notification of acceptance or denial from the dean.

ORIG.DATE: 6/23/03

REVIEWED/REVISED: 2/06; 06/08; 07/11, 5/28/13; 6/18; 6/19;10/20

APPROVED: 07/11, 5/28/13; 07/14, 05/15, 09/15, 10/16, 9/19

## **2D: ADMISSION: TRANSFER AND ADVANCED PLACEMENT: NURSING PROGRAMS**

### **PURPOSE**

To establish guidelines for students requesting transfer into the registered or vocational nursing, or advanced placement.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Process all qualified applicants.
  - 4. Notify applicants of admission or denial.
- B. Nursing Faculty
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Participate in admission and selection processes as assigned.
- C. NHS Staff
  - 1. Collect and manage submitted applications and related materials.
  - 2. Maintain student files in accordance with security and confidentiality regulations.
- D. Applicant
  - 1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. NHS Student Handbook and Policy and Procedure Manual.
    - c. Hartnell College and NHS admission requirements.

---

## **POLICY**

### **I. POLICY STATEMENT**

Hartnell College accepts qualified transfer students from other accredited nursing programs and has advanced placement options for persons with related education and/or experience.

#### **A. Definitions**

- 1. Transfer applicant: an applicant who is seeking credit for nursing course units from an accredited institution of higher education or technical school.
- 2. Armed forces applicant: an applicant who has completed a military-based education/training program.
- 3. LVN-to-ADN applicant: a California licensed vocational nurse seeking entry into the ADN program.
- 4. LVN applicant (30-unit option): a California licensed vocational nurse seeking entry into the ADN program with intent to complete the required nursing units, but not the general education units required for the associate degree. Applicants have one (1) year of LVN work experience within the last five (5) years.

### **II. PROCEDURE**

- A. Applicants are admitted based on space availability in accordance with selection processes.
- B. Applicants must meet admission requirements at the time of application.

- C. Potential transfer or advanced placement candidates must attend preliminary planning appointments with the Hartnell College NHS academic counselor.
- D. Transfer Credit: Students requesting transfer credits meet with the NHS academic counselor to complete and/or submit the following:
  - 1. Application packet
  - 2. *Request for Course to Course Equivalency* form.
  - 3. Course descriptions and/or syllabi for course work under consideration for credit or advanced placement as requested by the NHS academic counselor.
  - 4. Two (2) official transcripts from every college attended.
  - 5. VN only: One (1) official high school transcript, GED report, or proficiency report.
- E. Transfer Applicants: Applicants requesting placement meet with the NHS academic counselor to complete and/or submit the following:
  - 1. Application packet
  - 2. Copies of current certifications/licenses in the State of California.
  - 3. Current American Heart Association BLS for Providers card.
  - 4. Two (2) official transcripts from every college attended.
  - 5. VN only: One (1) official high school transcript, GED report, or proficiency report.
  - 6. *Request for Course-to-Course Evaluation Form* completed by a Hartnell College academic counselor.
  - 7. If applicable, a Medical Corps of Armed Services applicant letter defining preparation and areas of supplementary education needed to take a licensure exam.
  - 8. Additional documentation and pre-screening assessments as requested.
- F. LVN-to-ADN Applicants (ADN or 30-unit option): Applicants requesting placement submit the following:
  - 1. Application packet.
  - 2. Two (2) official transcripts for all coursework.
  - 3. Current American Heart Association BLS for Providers card.
  - 4. Copies of current certifications/licenses in the State of California.
  - 5. Two (2) official transcripts from every college attended.
  - 6. One (1) official high school transcript, GED report, or proficiency report.
  - 7. *Request for Course-to-Course Equivalency* form completed by the NHS academic counselor.
  - 8. If applicable, Medical Corps of Armed Services applicant letter defining preparation areas and education needed to take NCLEX-RN.
  - 9. Additional documentation and pre-screening assessments as requested.
- G. Acceptance of transfer and LVN-to-ADN applicants is contingent on the successful completion of Hartnell College ADN admissions requirements and space availability.
- H. Credit by examination for placement
  - 1. Students requesting placement into the ADN program complete ATI assessments.
  - 2. Semester placement is determined by student performance on required screening exams. Assessments are given at no expense to the student.

3. Students requesting admission into the third semester of the ADN program may be required to participate in a clinical simulation or clinical reasoning seminar based on a specific case study.

ORIGINAL: 6/23/03

Reviewed/Revised: 3/05; 07/11; 06/12, 5/13; 06/18; 06/19;10/20

Approved: 6/08; 06/12, 5/13; 07/14, 05/15, 09/15, 10/16, 9/19

## **2E: ADMISSIONS: TRANSFER AND PLACEMENT: RESPIRATORY CARE PRACTITIONER PROGRAM**

### **PURPOSE**

To establish guidelines for students requesting transfer or placement to the Hartnell College Respiratory Care Practitioner (RCP) program.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Process qualified applicants.
  - 4. Notify applicants of admission or denial.
- B. RCP Faculty
  - 1. Annually review the NHS Program Policy and Procedure Manual.
  - 2. Participate on the admission and selection processes as assigned.
- C. NHS Staff
  - 1. Collect and manage submitted applications and related materials.
  - 2. Maintain student files in accordance with security and confidentiality regulations.
- D. Applicant
  - 1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. NHS Student Handbook and Policy and Procedure Manual.
    - c. Hartnell College and NHS admission requirements.

---

## **POLICY**

### **I. POLICY STATEMENT**

The Hartnell College RCP program accepts qualified transfer students from accredited RCP programs and has placement options for persons with related education and/or experience.

### **II. PROCEDURE**

- A. Applicants are admitted based on space availability in accordance with admission criteria.
- B. Applicants meet admission requirements at the time of application.
- C. Potential transfer candidates attend preliminary planning appointments with the Hartnell College NHS academic counselor.
- D. If applicable, applicants from Medical Corps of Armed Services submit a letter defining preparation and areas of supplementary education needed for permission to take licensing examinations.
- E. Transfer Credit: Students requesting transfer credit must submit the following:
  - 1. Application packet.
  - 2. *Request for Course-to-Course Evaluation Form* completed by a Hartnell College academic advisor.
  - 3. Official transcript(s) from all colleges or universities.
- F. Placement: Definitions

1. Transfer applicant: an applicant who is seeking credit for previous RCP course units from an accredited institute of higher education.
2. Armed forces applicant: an applicant who has completed a military-based education/training program.
3. Transfer Applicants: Applicants requesting placement must submit the following:
  - a. Application packet
  - b. Current American Heart Association BLS Provider card
  - c. Two (2) official transcripts from every college attended
  - d. *Request for Course-to-Course Equivalency* form completed by a Hartnell College academic counselor
  - e. Additional documentation and admission examinations as requested.
4. Acceptance of transfer applicants is contingent on the successful completion of Hartnell College RCP admissions requirements and space availability.

ORIG.DATE: 6/26/12

Reviewed/Revised: 4/13; 06/18; 06/19; 10/20

Approved: 5/28/13; 07/14, 05/15, 09/15, 10/16, 9/19



## **2F: SELECTION CRITERIA FOR ADMISSION: ASSOCIATE DEGREE IN NURSING PROGRAM**

### **PURPOSE**

To establish student selection criteria guidelines for admission to Hartnell College's Associate Degree in Nursing program.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy & Procedure Manual.
  - 2. Annually align NHS policies with regulatory and Hartnell College administrative and board policies.
  - 3. Coordinate applicant standardized testing, if required for admission.
  - 4. Notify applicants of admission to the ADN Program.
- B. Nursing Faculty
  - 1. Annually review the NHS Policy & Procedure Manual
  - 2. Participate in the admission and selection processes as assigned
- C. NHS Staff
  - 1. Annually revise all application materials as directed.
  - 2. Collect and manage submitted applications and related materials.
  - 3. Maintain student files in accordance with security and confidentiality regulations.
- D. Applicant
  - 1. Review the Hartnell College Catalog and academic policies and procedures.
  - 2. Review NHS Student Handbook and Policy & Procedure Manual for admission and selection requirements.

---

## **POLICY**

### **I. POLICY STATEMENT**

Hartnell College NHS faculty believes in the value of a multi-criteria selection process when selecting students into the ADN academic program.

#### **A. Definition of terms:**

- 1. Generic applicant: an applicant entering as a new student into the ADN program.
- 2. Transfer applicant: an applicant seeking admission after completing nursing courses at another institute in higher education.
- 3. Armed forces applicant: an applicant seeking admission after completing a military-based education/training program.
- 4. LVN-to-ADN applicant: a licensed vocational nurse in California seeking entry into the ADN program with the intent of attaining an ADN.
- 5. LVN applicant (30-unit option): a LVN in California seeking entry into the ADN program with the intent of completing the required nursing units, but not the general education units required for the associate degree. Applicants must have one (1) year of LVN work experience within the last five (5) years.
- 6. Re-admission applicant: An applicant seeking reentry after an interruption in academic course progression.

## II. PROCEDURE

The ADN program has a separate admission application process from the Hartnell College admission process.

- A. The ADN program has a four-semester curriculum and admits a new class each fall.
- B. Minimum requirements for admission eligibility:
  1. Hartnell College enrollment.
  2. Completion of prerequisite courses with a grade of "C" or better as documented on official transcripts.
  3. Minimal 2.5 GPA in requisite sciences: anatomy, physiology, pathophysiology, chemistry, and microbiology.
  4. Current American Heart Association's Basic Life support (BLS) Provider card.
  5. Minimum Hartnell College benchmark score on the standardized pre-readiness for nursing assessment exam (ATI TEAS).
- C. NHS does not maintain an applicant "wait list."
- D. Student selection is based on multiple criteria selected by NHS and approved by California Board of Registered Nursing.
- E. Admissions application information and the Hartnell College Multi-criteria Scoring Rubric are available on the NHS webpage.
- F. Completed applications with official certificates and documents of verification must be submitted online by the published deadline date. Applicants are responsible for verifying that all documents have been received. Incomplete or late application packets are not considered during the admission process.
- G. Applicants advance in the selection process by submitting ATI TEAS scores taken within 365 days of the Hartnell TEAS test date or by taking the TEAS at Hartnell's expense.
- H. Applicants who achieve an ATI TEAS composite score at or above the Hartnell College benchmark are considered for admission. ATI TEAS score points are added to the applicant's multi-criteria subtotal score. Each application is assigned a case number once the database is entered in a computer-based statistics program.
- I. Using a computerized random draw program, case numbers assigned to qualified applicants are selected for the "conditionally accepted," "alternate list," and "denied" cohorts.
- J. Applicants who are "conditionally accepted" or placed on the "alternate list" must submit the *Acceptance Reply* form to advance in the acceptance process.
- K. Placement is forfeited if the *Acceptance Reply* form is not received by the stated deadline or if the applicant does not attend the mandatory New Student Orientation presentation.
- L. If an applicant scores below the ATI TEAS benchmark, the applicant must meet with a Hartnell College NHS counselor to generate an individualized remediation plan that must be completed within one year. If the applicant completes the remediation plan and meets the ATI TEAS benchmark score, the applicant is eligible for admission.
- M. Students accepted or denied admission receive notification from the dean.
- N. Applicants not selected are encouraged to retrieve their application package within two weeks of notification. Packets not retrieved are shredded in accordance with student record and confidentiality regulations.
- O. Priority applicant placement by semester
  1. First Semester: for spaces available, in order of acceptance

- a. Reentry students returning after elective withdrawal
  - b. Reentry students returning after successfully completing a remediation plan following a failure/withdrawal with unsatisfactory standing
  - c. Advance placement students
  - d. New generic applicants
2. Second Semester: for spaces available, in order of acceptance
    - a. Returning generic students
    - b. Reentry students returning after elective withdrawal
    - c. Reentry students returning after successfully completing a remediation plan following a failure/withdrawal in unsatisfactory standing
    - d. Transfer applicants who meet criteria
3. Third Semester: for spaces available, in order of acceptance
    - a. Returning generic students
    - b. Reentry students returning from elective withdrawal
    - c. Reentry students returning after successfully completing a remediation plan following a failure/withdrawal in unsatisfactory standing
    - d. Transfer applicants who meet criteria
4. Fourth Semester: for spaces available, in order of acceptance
    - a. Returning generic students
    - b. Reentry students returning after elective withdrawal
    - c. Reentry students returning after successfully completing a remediation plan following a failure/withdrawal in unsatisfactory standing
    - d. Transfer applicants who meet criteria

ORIGINAL: 6/24/03

Reviewed/Revised: 2/05, 2/08; 07/11, 4/13; 5/13, 2/17; 06/18; 06/19; 10/20

Approved: 3/22/05, 6/04/08; 6/12; 5/28/1; 07/14, 05/15, 09/15, 6/17, 9/19

## **2G: SELECTION CRITERIA FOR ADMISSION: VOCATIONAL NURSING PROGRAM**

### **PURPOSE**

To establish student selection criteria guidelines for admission to Hartnell College's Vocational Nursing Program.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Review the NHS Policy & Procedure Manual annually.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Annually align the admission selection with State and Board of Vocational Nursing and Psychiatric Technician (BVNPT) regulations.
  - 4. Determine eligibility of non-generic students based on successful completion of transfer or reinstatement requirements.
  - 5. Review and approve qualified applicant list forwarded by Admissions/Selection Committee.
  - 6. Notify applicants of admission or denial.
- B. Nursing Faculty
  - 1. Review the NHS Policy & Procedure Manual annually.
  - 2. Participate in the admission and selection processes as assigned.
- C. NHS Staff
  - 1. Annually revise application materials as directed.
  - 2. Collect and manage submitted applications and related materials.
  - 3. Maintain student files in accordance with security and confidentiality regulations.
- D. Applicant
  - 1. Review Hartnell College Catalog and academic policies and procedures.
  - 2. Review NHS Student Handbook and Policy & Procedure Manual for admission and selection requirements.

---

## **POLICY**

### **I. POLICY STATEMENT**

Hartnell College NHS faculty believes in the value of incorporating selection criteria that have been associated with the success of nursing students in the Hartnell College Vocational Nursing program.

- A. Definition of terms
  - 1. Generic applicant: an applicant initially entering the VN program.
  - 2. Advanced placement student: a student who seeks credit for previous education units in a nursing program.
  - 3. Transfer applicant: an applicant who seeks credit for completed nursing courses at another college.

### **II. PROCEDURE**

- A. The VN Program has a separate admission application process from the Hartnell College admission process.
- B. The VN Program is three-semester course of study that admits a new class each spring.

- C. Applications are reviewed the semester prior to admission. NHS does not maintain an applicant “wait list.”
- D. Applicants who have successfully completed prerequisite courses are considered for admission.
- E. Minimum requirements for admission eligibility:
  - 1. Hartnell College enrollment.
  - 2. Completion of high school coursework: Official high school transcript or GED report is required (Board of Vocational Nursing and Psychiatric Technicians, California Code of Regulations, Title 16: Professional and Vocational Regulations).
  - 3. Completion of all prerequisite courses with a grade of "C" or better as documented on official transcripts.
  - 4. Anatomy and Physiology, Biology 11 and Intro to Psychology (PSY 2) courses within the five (5) year recency requirement per the Board of Vocational Nursing and Psychiatric Technicians of the State of California (California Code of Regulations, Title 16: Professional and Vocational Regulations, Division 25).
  - 5. Nutrition, Growth and Development may be taken concurrently with first semester or taken previously and are subject to the 5 year recency requirement.
  - 6. Current American Heart Association Basic Life Support (BLS) Provider card.
- F. Enrollment is based on space availability in the appropriate semester.
- G. Only complete application packets received by the published deadline date are considered during the student selection process. There are no exceptions. Students are responsible for verifying that all documents have been received.
- H. Using a computerized random draw program, case numbers assigned to qualified applicants are selected for the “conditionally accepted,” “alternate list,” and “denied” cohorts.
- I. Students accepted or denied admission receive notification from the dean.
- J. Applicants who are “conditionally accepted” or placed on the “alternate list” must submit the *Acceptance Reply* form to advance in the acceptance process.
- K. Placement is forfeited if the *Acceptance Reply* form is not received by the stated deadline or if the applicant does not attend the mandatory New Student Orientation presentation.
- L. Applicants not selected are encouraged to retrieve their application packets within two weeks of notification. Packets not retrieved are shredded in accordance with student record and confidentiality regulations.

ORIGINAL: 6/03

Reviewed/Revised: 2/05, 2/08, 6/09; 05/13; 5/17; 06/18, 4/20

Approved: 07/09; 07/11; 6/12; 5/13; 07/14, 09/15, 9/19

## **2H: SELECTION CRITERIA FOR ADMISSION: RESPIRATORY CARE PRACTITIONER PROGRAM**

### **PURPOSE**

To establish student selection criteria guidelines for admission to Hartnell College's Respiratory Care Practitioner Program.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy & Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Coordinate applicant standardized testing, if required for admission.
  - 4. Review and approve qualified applicants forwarded by Admissions/Selection Committee.
  - 5. Notify the Admission/Selection Committee of students requesting admission after successful completion of remediation, transfer requirements, or leaves of absence.
  - 6. Notify applicants of admission.
- B. Respiratory Care Practitioner Faculty
  - 1. Review the Hartnell College NHS Policy & Procedure Manual annually.
  - 2. Participate on the Admission/Selection Committee as assigned.
- C. NHS Staff
  - 1. Review and revise application materials annually as directed.
  - 2. Process submitted applications and related materials.
- D. Student
  - 1. Review Hartnell College Catalog and academic policies and procedures.
  - 2. Review NHS Student Handbook and Policy & Procedure Manual for admission and selection requirements.

---

## **POLICY**

### **I. POLICY STATEMENT**

Hartnell College Respiratory Care Practitioner faculty believes in the value of incorporating specific selection criteria that have been associated with the success of RCP students at Hartnell College.

- A. Definition of terms:
  - 1. Generic applicant: an applicant initially entering the RCP Program.
  - 2. Transfer applicant: an applicant seeking credit for completed respiratory courses at another college.
  - 3. Armed forces applicant: an applicant seeking credit for a military-based education/training program.
  - 4. Reentry applicant: an applicant seeking reinstatement following an interruption in continuous course progression.

### **II. PROCEDURE**

- A. The RCP program has a separate admission application process from the Hartnell College admission process.
- B. The RCP program has a four-semester curriculum and admits a new class each fall

- C. Applications are reviewed the semester prior to admission. NHS does not maintain an applicant “wait list.”
- D. Enrollment is based on space availability in the appropriate semester.
- E. Admission applications are available on the Hartnell College NHS website in the fall for the following fall semester.
- F. Complete application packets received by the published submission date are considered during the student selection process. Students are responsible for submitting their application packet and are responsible for verifying that all documents have been received.
- G. Prospective students meet the minimum requirements for admission eligibility:
  - 1. Hartnell College enrollment.
  - 2. Completion of all prerequisite courses with a grade of "C" or better as documented on official transcripts.
  - 3. Current American Heart Association’s BLS Provider card.
- H. Applicant selection is completed using a random draw process.
- I. Students accepted or denied admission receive notification from the dean.
- J. If accepted, students submit the *Acceptance Reply* form to secure student placement. If the letter is not received by the stated deadline, the placement is forfeited to an alternate student.
- K. Priority rank order for students applying for reentry:
  - 1. Withdrawal in good standing
  - 2. Withdrawal in unsatisfactory standing: successful remediation required
- L. Reinstatement Process: A written statement requesting reentry is submitted to the dean. The reinstatement request includes
  - 1. completed remediation plan, with documentation from the instructor of record
  - 2. plans for achieving success
  - 3. when necessary, a physician’s statement indicating ability to return to a clinical setting
- M. Priority applicant placement by semester
  - 1. First Semester: for spaces available, in order of acceptance
    - a. Reentry students returning from an approved leave of absence
    - b. Reentry students returning after successfully completing a remediation plan after withdrawing in unsatisfactory standing
    - c. New generic applicants
  - 2. Second Semester: for spaces available, in order of acceptance
    - a. Returning generic students
    - b. Reentry students returning from an approved leave of absence
    - c. Reentry students returning after successfully completing a remediation plan after withdrawing in unsatisfactory standing
    - d. Transfer applicants who meet criteria
  - 3. Third Semester: for spaces available, in order of acceptance
    - a. Returning generic students
    - b. Reentry students returning from an approved leave of absence
    - c. Reentry students returning after successfully completing a remediation plan after withdrawing in unsatisfactory standing
    - d. Transfer applicants who meet criteria
  - 4. Fourth Semester: for spaces available, in order of acceptance

- a. Returning generic students
  - b. Reentry students returning from an approved leave of absence
  - c. Reentry students returning after successfully completing a remediation plan after withdrawing in unsatisfactory standing
  - d. Transfer applicants who meet criteria
- N. Applicants not selected are encouraged to retrieve their application package within two weeks of notification. Packets not retrieved are shredded in accordance with confidentiality regulations.

ORIG.DATE: 6/26/12

Reviewed/Revised: 4/13; 05/13; 5/17; 06/18; 10/20

APPROVED: 5/28/13; 07/14, 05/15, 09/15, 9/19



### 3: ATTENDANCE

#### PURPOSE

To establish standards for attendance in Nursing and Health Sciences (NHS) courses.

#### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  1. Annually review the NHS Policy and Procedure Manual.
  2. Annually align NHS policies with Hartnell College administrative and board policies.
  3. Review and approve or disapprove all failure/dismissals based on attendance.
- B. NHS Faculty
  1. Annually review the NHS Policy and Procedure Manual.
  2. Review unsatisfactory student attendance issues.
- C. Faculty of Record
  1. Notify student of unsatisfactory attendance and document in student record.
  2. Discuss student non-compliance with attendance policy with the dean and involved Hartnell College student support service providers.
  3. Adhere to Hartnell College attendance guidelines
- D. Student
  1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. Hartnell College NHS Student Handbook and Policy and Procedure Manual.
    - c. Adhere to Hartnell College and NHS attendance guidelines.

---

### POLICY

#### I. POLICY STATEMENT

Hartnell NHS faculty recognizes the positive relationship between student engagement, class attendance, and student success. Students in a Hartnell College NHS academic program must attend classes in accordance with the Hartnell College and regulatory agency policies. Failure to attain required instructional hours might result in dismissal.

#### II. PROCEDURE

- A. Attendance:
  1. Students are expected to arrive to class on time and to complete required course hours.
  2. Students are encouraged to notify the instructor of record prior to any occurrence.
  3. Students are expected to arrive prepared. To reduce risk to self and others, a student unprepared to assume a clinical assignment may be dismissed from the clinical site by the instructor of record or preceptor.
- B. "Prepared" is defined as
  1. completing clinical prep as applicable.
  2. arriving in appropriate uniform.
  3. being well rested, in optimal health, and non-distracted.
  4. ready to assume care of the assigned individuals.
  5. meeting Technical Standards as described in the NHS Handbook.
- B. Dismissal from the site because of lack of preparedness constitutes a clinical course absence.

- C. Tardy is defined as arriving after instruction has begun.
- D. Arriving more than 30 minutes after class start time or leaving 30 minutes before class end time constitutes an absence. Students who earn an absence because of tardiness may attend the remainder of the class at the discretion of the instructor of record.
- E. Excessive incidents of occurrences (two or more) will result in academic failure when course objectives are unmet.
- F. Occurrences include tardies, leaving early, returning from breaks late, or absences.
- G. Occurrences do not include; attending instructor approved conferences, regulatory meetings, or other leadership activities in lieu of class/clinical when alignment with course objective/end of program student learning outcomes is demonstrated.
- H. Absences due to illness may require written clearance to assume clinical coursework from a healthcare provider. Students are responsible for assignments missed while absent.
- I. Nursing students absent from on- or off-campus clinical courses are required to fulfill hours by completing alternate learning coursework as assigned by the clinical instructor of record.
- J. It is a privilege to participate in conferences, regulatory meetings, or leadership activities in lieu of routine classroom/clinical experiences. Attendance at these events may replace regular attendance only when prior faculty approval is obtained.
- K. Inability to complete course objectives results in a clinical course failure.
- L. Sleeping in class constitutes an absence.
- M. Quizzes and Examinations:
  - 1. Missed examinations are rescheduled with the instructor of record.
  - 2. Missed quizzes may be rescheduled at the discretion of the instructor of record.
  - 3. The instructor of record may require a tardy student to take the exam/quiz in the time remaining.
- N. Students who violate the Hartnell College or the course attendance requirements receive a “W” if the drop occurs prior to the last drop date, per Hartnell College policy. After the last drop date has passed a grade of “F” or “NP” is given. (Refer to the Hartnell College Catalog).
- O. Attendance is taken in all classroom and clinical courses.
- P. Excessive Absences Leading to Dismissal: (Refer to Hartnell College Catalog)
  - 1. Absence from a full semester class in excess of two weeks (consecutive or non-consecutive) may result in the instructor dropping the student. That is, a student may be dropped after missing one more class meeting than twice the number of class meetings per week.
  - 2. Absences in excess of one week (consecutive or non-consecutive) from a summer session class, or any regular semester class 6-17 weeks in duration may result in the instructor dropping the student. That is, a student may be dropped after missing one more class meeting than the number of class meetings per week.
  - 3. Absences in excess of 10% of the scheduled class meetings in classes one to five weeks in duration is likely to result in being dropped from the course by the instructor. That is, a student may be dropped after missing one more class meeting than 10% of the total number of scheduled class meetings.
  - 4. Completion of fewer clinical or classroom hours than required by licensing agencies is likely to result in failure.

5. It is the student's responsibility to withdraw from classes. Failure to withdraw from classes in PAWS may result in the student earning a failing grade in that course.

Reference: Hartnell College Attendance Policy

ORIG.DATE: 6/03

REVIEWED/REVISED: 4/08; 07/09; 05/11, 4/13; 5/13; 12/13, 5/16, 5/17; 06/18; 06/19; 12/20; 4/2021

APPROVED: 05/11; 5/13; 12/12/13; 07/14, 02/15, 5/16, 10/16. 9/19

## 4A: CLINICAL PLACEMENT: FACULTY

### PURPOSE

To establish guidelines for assignment of faculty in clinical agencies.

### RESPONSIBILITY

- I. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - A. Annually review the NHS Policy and Procedure Manual.
  - B. Annually align NHS policies with Hartnell College administrative and board policies.
  - C. Exercise right of assignment.
  - D. Determine overall clinical placement needs.
  - E. Maintain current contracts with each clinical agency.
  - F. Adhere to BRN/BVNPT/CoARC/ Monterey County Emergency Medical Services Agency (MCEMSA) clinical faculty approval processes.
- II. NHS Faculty
  - A. Annually review the NHS Program Policy and Procedure Manual.
  - B. Discuss with Dean of Academic Affairs: Nursing and Health Sciences specific needs related to achievement of student/program learning outcomes.
  - C. Accept clinical assignments.

---

## POLICY

### I. POLICY STATEMENT

Hartnell College NHS collaborates with clinical agencies to provide optimal clinical experiences necessary for student and faculty success. All clinical sites are approved by the BRN, BVNPT, CoARC, and/or MCEMSA. Memoranda of understanding and business affiliation agreements are current and valid.

### II. PROCEDURE

- A. The dean, in collaboration with the faculty, selects clinical sites and experiences that align with course objectives and program outcomes.
- B. The dean, in collaboration with the faculty, determines appropriateness of clinical learning sites after assessing the agency's staffing ratios, client population, onboarding processes, and student support resources.
- C. Clinical assignments are based on the following priorities:
  1. Ability to meet course objectives and achieve learning outcomes.
  2. Instructor's knowledge and readiness to accept the specific assignment.
  3. BRN/BVNPT/CoARC approval for content area.
- D. Clinical placement assignment requests are reviewed and considered by the dean.
- E. Instructors cannot act as a licensed professional or administrative substitute at the assigned clinical site during clinical hours.

Original: 9/8/03  
Reviewed/Revised: 07/09; 05/11; 04/14; 05/14; 06/18; 06/19; 10/20  
Approved: 5/11; 05/12/14; 07/14, 02/15, 09/15. 9/19

## **4B: CLINICAL PLACEMENT: STUDENTS**

### **PURPOSE**

To establish guidelines for placement of students in clinical courses.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  1. Annually review the NHS Policy and Procedure Manual.
  2. Annually align NHS policies with Hartnell College administrative and board policies.
  3. Collaborate with faculty in determining student placement, as necessary.
  4. Determine overall clinical placement needs.
  5. Maintain current contracts with each clinical agency.
  6. Maintain BRN/BVNPT/CoARC/MCEMSA site approvals.
- B. NHS Faculty
  1. Annually review the NHS Program Policy and Procedure Manual.
  2. Collaborate with the dean to determine specific needs and requests of students to achieve learning outcomes.
  3. Determine appropriate student clinical sites.
- C. Student
  1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. Hartnell College NHS Student Handbook and Policy and Procedure Manual.
  2. Discuss with faculty of record any specific learning need.

---

## **POLICY**

### **I. POLICY STATEMENT**

Hartnell College NHS collaborates with clinical agencies to provide optimal clinical experiences necessary for student success. Clinical sites are approved by the BRN, BVNPT, CoARC, and/or the MCEMSA. Memoranda of understanding and business affiliation agreements are current and valid.

### **II. PROCEDURE**

- A. Content experts or instructors of record select clinical agencies and experiences that align with course objectives and program level outcomes.
- B. Students register for clinical sites per Hartnell College registration policies.
- C. Faculty may reassign students to achieve learning outcomes or to meet agency requirements.
- D. Students cannot act as a clinical, instructional, or administrative substitute at the assigned clinical site during clinical hours.
- E. Students cannot complete clinical course hours during scheduled work hours if employed at the clinical affiliate.
- F. Clinical assignments occur on every shift, seven days per week, and are subject to change.
- G. Student placement requests based on extraordinary hardship are submitted to the dean for consideration prior to the beginning of a clinical course.

Reviewed/Revised: 5/08; 05/11; 05/14; 06/18; 06/19; 10/20  
Approved: 07/09; 05/11; 05/12/14; 07/14, 02/15, 09/15, 10/16. 9/19

## 4C: CLINICAL FACULTY: STUDENT RATIO

### PURPOSE

To establish guidelines for NHS administration and faculty to plan for clinical experiences based on client needs, academic objectives, student preparation, specialty accreditation agency, and clinical agency requirements.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Support the role development of NHS professionals through clinical experiences.
  - 4. Maintain current contracts with clinical agencies.
  - 5. Validate adherence to agency regulations regarding faculty-to-student ratios
- B. NHS Faculty Directors and Assistant Directors
  - 1. Annually review specialty accreditation regulations for clinical and clinical skill instruction.
  - 2. Annually review the NHS Policy and Procedure Manual.
  - 3. Support the role development of NHS professionals through clinical experiences.
- C. Student
  - 1. Read and seek clarification of:
    - a. Hartnell College Catalog and academic policies and procedures
    - b. Hartnell College NHS Student Handbook and Policy and Procedure Manual
  - 2. Participate in role development through clinical experiences.

---

## POLICY

### I. POLICY STATEMENT

Clinical experiences for Hartnell College NHS students promote the development of competent, caring, collaborative, and curious NHS professionals. Optimal faculty student ratios meet client, student, faculty and clinical agency and role specific requirements.

### II. PROCEDURE

- A. The dean and agency liaison, in collaboration with the faculty, determine faculty-to-student ratios for clinical courses.
- B. The BRN regulation section 1424(k) states that the student/teacher ratio in the clinical setting is based on the following criteria:
  - 1. Acuity of patient needs
  - 2. Objectives of the learning experience
  - 3. Class level of the students
  - 4. Geographical placement of the students
  - 5. Teaching methods
  - 6. Requirements established by the clinical agency
- C. BVNPT regulation Article 5 Section 2534 mandates a maximum of 15 vocational nursing students for each instructor.
  - 1. BVNPT approves student-faculty ratios for each clinical facility.

2. Clinical facilities are adequate as to number, type, and variety of individuals treated, to provide clinical experience for all students in the areas specified by Section 2533. There must be available for student assignment, an adequate daily census of patients to afford a variety of clinical experiences consistent with competency-based learning objectives.
  3. Clinical objectives that students need to master are posted on patient care units utilized for clinical experience.
  4. Faculty is responsible for the continual review of clinical facilities to determine if the student's clinical objectives for each facility are being met.
- D. Commission on Accreditation for Respiratory Care (COARC) mandates no more than six students per faculty member or preceptor per clinical rotation.
  - E. EMT program preference is a ratio of one student per faculty member or preceptor per clinical experience. A ten student to one instructor during skills instruction is required by the Monterey.
  - F. Nursing faculty and Accreditation Commission for Education in Nursing (ACEN) preference is a ratio of no more than ten students per faculty member per clinical rotation.
  - G. Clinical agencies establish the student faculty ratio based on facility needs.

Original: 12/13/2014  
Reviewed/Revised: 06/18; 10/20  
Approved: 02/15, 09/15, 10/16, 9/19



## 5: FACULTY ORIENTATION AND REMEDIATION

### PURPOSE

To establish guidelines for orientation and remediation of full- and part-time faculty.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS): Annually review the NHS Policy and Procedure Manual.
  - 1. Annually align NHS policies with Hartnell College administrative and board policies.
  - 2. In collaboration with the content expert, determine competency requirements for classroom and clinical assignments.
  - 3. Review the professional development plan with the orientee and content expert or peer mentor.
  - 4. Provide necessary resources to meet orientee's learning needs.
- B. NHS Content Expert
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Identify orientation and professional development needs for the teaching assignment.
  - 3. Generate a professional development plan with dean, peer mentor, and orientee.
  - 4. Review and validate the orientee's completed plan.
  - 5. Submit evidence of remediation to the dean and the BRN/BVNPT/CoARC/MCEMSA, if required.
- C. NHS Faculty Orientee
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Identify orientation and remediation needs for the teaching assignment.
  - 3. Generate a professional development plan with dean, content expert, and peer mentor.
  - 4. Submit completed remediation plan to the content expert and peer mentor and maintain evidence of clinical competence.

---

## POLICY

### I. POLICY STATEMENT

Hartnell College NHS faculty members possess degrees of learning, skill, care, and experience ordinarily exercised by staff level registered nurses, respiratory care practitioners, or emergency medical technicians in the clinical area to which the faculty member is assigned.

### II. PROCEDURE

- A. The orientee, content expert, peer mentor, in collaboration with the dean, determines didactic and clinical coursework and experience necessary to meet competency standards, course objectives, and learning outcomes. A written professional development plan includes
  - 1. measurable theory and clinical learning objectives/goals,
  - 2. timelines and resources,
  - 3. learning assessments to evaluate competency (e.g., agency orientations, continuing education classes, mentorship, and academic coursework).
- B. The orientee meets with the content expert and peer mentor to implement the professional development plan.
- C. Upon completion of the plan, the content expert or peer mentor submits written

verification that the orientee has achieved the learning objectives as specified in the professional development plan.

- D. The dean submits the completed professional development plan, signed verifications of competencies, and paperwork required for faculty appointments to the clinical agencies and the BRN/BVNPT/CoARC/MCEMSA as required.

Original: 1/31/2015

Reviewed/Revised: 06/18; 06/19; 10/20

Approved: 02/15, 09/15, 10/17. 9/19

**HARTNELL COLLEGE**  
NURSING AND ALLIED HEALTH



**HARTNELL COLLEGE**  
NURSING AND ALLIED HEALTH

Name: \_\_\_\_\_  
Faculty Mentor/Content Expert: \_\_\_\_\_  
Date: \_\_\_\_\_

| Objective  | Activities   | Dates/<br>Times | Point<br>Person/<br>Location | Evidence/<br>Date of<br>Completion |
|--|--|-----------------|------------------------------|------------------------------------|
| To achieve clinical competency necessary to safely supervise _____ students at _____.      | Meet with content expert/faculty mentor  |                 |                              |                                    |
|  | Construct SMART goals/orientation plan   |                 |                              |                                    |
|  | Complete required NHS clinical competency and professional competency requirements |                 |                              |                                    |
|  | Precept with staff   |                 |                              |                                    |
|  | Meet with agency liaison   |                 |                              |                                    |
|  | Review syllabus/objectives/class assignments                                       |                 |                              |                                    |
|  | Attend Hartnell College Student Success Days                                       |                 |                              |                                    |
| To achieve classroom competency necessary to facilitate student learning related to _____. | Meet weekly with content expert  |                 |                              |                                    |
|  | Generate a SMART goals/orientation plan, curriculum development, teaching          |                 |                              |                                    |
|  | Review syllabus/objectives/class assignments                                       |                 |                              |                                    |
|  | Attend Hartnell College Student Success Days                                       |                 |                              |                                    |
|  | Complete ATI new instructor teaching modules #x, xx, xxx                           |                 |                              |                                    |
|  | Attend Boot Camp for New Instructors   |                 |                              |                                    |
|  | Complete skill competency testing as required for semester.                        |                 |                              |                                    |

Sample

The faculty member has completed the professional development plan as described. The faculty member possesses and exercises the degrees of learning, skill, care, and experience ordinarily possessed and exercised by classroom instructors or staff-level professionals in clinical areas to which the faculty member is assigned.

Content Expert/Peer \_\_\_\_\_ Date \_\_\_\_\_

Mentor \_\_\_\_\_ Date \_\_\_\_\_

Orientee \_\_\_\_\_ Date \_\_\_\_\_

## 6: CONFLICT RESOLUTION PROCESS

### PURPOSE

To establish guidelines for effective communication and conflict resolution between students, faculty, and staff of Hartnell College NHS.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
- B. NHS Faculty
  - 1. Annually review the NHS Policy and Procedure Manual.
- C. Student
  - 1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. Hartnell College NHS Student Handbook and Policy and Procedure Manual.

---

## POLICY

### I. POLICY STATEMENT

Hartnell College NHS faculty believes that communication between students, faculty, and staff should be courteous and professional at all times. Attempts to resolve interpersonal conflict occur as soon as possible. Assistance in resolving interpersonal differences is provided when necessary. Confidentiality is maintained.

### II. PROCEDURE

- A. Involved persons should speak directly to each other and attempt to develop a plan for resolution as soon as possible.
- B. Involved persons should seek assistance if the conflict is not resolved in a timely manner.
- C. The dean assists in conflict resolution as appropriate. Hartnell College Human Resource personnel may be asked to assist in the conflict resolution.
- D. Hartnell College and appropriate union procedures and policies are adhered to consistently.
- E. If resolution is not achieved, a formal complaint/grievance may be filed in accordance with Hartnell College policies, procedures, and practices.
- F. The student complaint/grievance procedures are found on the Hartnell College website.
- G. Faculty complaint/grievance procedures are found in the Hartnell College Faculty Agreement.

ORIG.DATE: 6/26/03

Reviewed/Revised: 5/08; 07/09; 05/11; 06/12; 4/13; 05/13; 05/14; 06/18; 06/19; 10/20

Approved: 07/09; 06/11; 5/13; 05/12/14; 07/14, 02/15, 09/15, 10/16. 9/19

## 7A: DRESS CODE: FACULTY AND STAFF

### PURPOSE

To establish guidelines for NHS faculty and staff that support the professional image of healthcare professionals and environment.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Exemplify the professional image of a Hartnell College administrator and a NHS healthcare provider.
- B. NHS Faculty and Staff
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Exemplify the professional image of a Hartnell College employee and/or NHS healthcare provider.

---

## POLICY

### I. POLICY STATEMENT

NHS personnel value professionalism. NHS faculty and staff comply with the dress code when representing Hartnell College.

### II. PROCEDURE

- A. Clinical Setting
  - 1. Socks or stockings must be worn.
  - 2. Shoes must have a closed toe and heel.
  - 3. Colognes or scented lotions are avoided.
  - 4. Fingernails are short, clean and well-trimmed. In accordance with the Centers for Disease Control and OSHA regulations, artificial nails or overlays are prohibited. Nail polish must be neutral, with no chipping.
  - 5. Hair should be neat and clean, and pulled away from the face.
  - 6. Tattoos are covered.
  - 7. A plain ring or wedding band and one small pair of earring studs are acceptable. No jewelry is acceptable.
  - 8. Piercing jewelry on the face or through the tongue is not allowed. Cultural and religious beliefs and practices (e.g., piercings of body parts other than ear lobes) are addressed individually with the dean and/or clinical agent. Faculty must adhere to agency policies, infection control, and patient safety standards.
  - 9. A white lab coat is worn over clothing. The lab coat is embroidered on the left with Hartnell College, the faculty member's name, and educational degree initials.
  - 10. The Hartnell College photo name badge and clinical agency badge are visible.
  - 11. Faculty complies with clinical agency requirements, as appropriate.
- B. Classroom Setting
  - 1. Business casual dress supports the professional image of healthcare providers.

2. The white lab coat is worn during on-campus clinical learning sessions.
- C. Business casual dress
1. Women: blouse, shirt with a collar, and/or a sweater, khakis or dress pants, moderate length dress/skirt. Dresses or skirts above the knee, exposed midriff or cleavage, off-shoulder blouses, tight fitting or torn clothing, athletic outfits, t-shirts, and denim jeans of any color are considered inappropriate for the classroom and clinical learning environments.
  2. Men: polo shirt or shirt with a collar and/or sweater, khakis or dress pants, and dress shoes. No tie is required. Tight fitting or torn clothing, athletic outfits, t-shirts, and denim jeans of any color may be considered inappropriate for the classroom and/or clinical environments.

Original: 6/26/03

Reviewed/Revised: 5/08; 06/11; 04/13; 04/14; 05/14; 06/18; 06/19; 4/2021

Approved: 07/09; 06/11; 05/12/14; 07/14, 05/15, 09/15, 10/16. 9/19, 4/2021

## 7B: DRESS CODE: STUDENTS

### PURPOSE

To establish guidelines for NHS students in support of the image of healthcare professionals.

### RESPONSIBILITY

- A. Dean of Academic Affairs: NHS
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Exemplify the professional image of a Hartnell College administrator and healthcare professional.
- B. NHS Faculty and Staff
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Exemplify the professional image of a Hartnell College employee and/or healthcare professionals.
- C. Student
  - 1. Read and seek clarification of:
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. Hartnell College NHS Student Handbook and Policy and Procedure Manual.
  - 2. Review and participate in policy revision.
  - 3. Exemplify the professional image of a Hartnell College NHS student and a developing healthcare professional.

---

## POLICY

### I. POLICY STATEMENT

NHS faculty and students value professionalism. Students comply with a professional dress code when representing Hartnell College.

### II. PROCEDURE

- A. The Hartnell-issued photo name badge is visible when representing Hartnell College NHS. Hartnell identification (ID) is worn in addition to any ID required by the clinical agency.
- B. Defacement of any ID badge is not permitted.
- C. NHS identification is restricted to currently enrolled students during activities directly related to student experiences.
- D. Approved uniform and identification are worn during assigned clinical times. Exceptions are limited to sites requiring agency-issued garb such as labor and delivery, surgical suite, mental health, and community health.
- E. Student uniform and lab coat brands and style numbers are made available at the New Student Orientation meeting and at the beginning of the academic year.
- F. Clinical Setting
  - 1. The ADN and VN uniform consists of the selected uniform style and lab coat.
    - a. ADN: White uniform top and black uniform pant
    - b. VN: Combination of white uniform top and maroon pant
    - c. White lab coat with the ADN or VN patch sewn on the left shoulder.

- d. Clean white shoes, with a closed toe and closed heel. Shoes must be solid white and made from non-permeable material, preferably leather.
  - e. White socks or flesh colored nylons.
  - f. A watch with a sweep second hand and stethoscope. Exceptions based on specific clinical sites are possible.
2. The RCP uniform consists of the selected uniform style and lab coat.
    - a. Indigo blue uniform top and slacks/pants.
    - b. White lab coat with RCP patch sewn on the left shoulder.
    - c. Clean shoes, with a closed toe and closed heel. Shoes must be solid white, black, or brown, made from non-permeable material, preferably leather.
    - d. White, brown, black, or neutral socks or flesh colored nylons.
    - e. A watch with a sweep second hand and stethoscope. Exceptions based on specific clinical site are possible.
  3. An optional white, crew neck, warm-up scrub jacket with the school patch is permitted in the clinical setting. This does not replace the requirement of a lab coat for professional dress days.
  4. For infection control and hygienic purposes, students are encouraged to change out of uniforms upon leaving a clinical setting.
  5. Uniforms must be clean and unwrinkled and laundered after each use.
  6. Undergarments should not be visible through the uniform.
  7. Hair cannot interfere with safe patient care. Hair is clean, neat, and pulled away from the face and off the collar. Ponytails may not extend past the collar. Men may wear a hair net in lieu of a ponytail or bun.
  8. Facial hair must be cut close to the skin to allow for fit of the N95 respirator mask or hood.
  9. Appropriate uniform top or undershirts are worn to minimize chest hair exposure.
  10. Colognes and scented lotions are prohibited.
  11. Cosmetic application is subtle and professional in appearance.
  12. Fingernails are short, clean and well-trimmed. In accordance with the Centers for Disease Control and OSHA regulations, artificial nails or overlays are prohibited. Nail polish must be clear or neutral, with no chipping.
  13. A plain ring (e.g., a wedding band) and one small pair of earring studs are acceptable. All other jewelry is prohibited.
  14. Tattoos are covered.
  15. Piercing jewelry on the face and through the tongue is prohibited. Gauged ears must contain flesh tone plugs. Culturally or religiously bound piercings are addressed with instructor of record and clinical agency liaison. Students must adhere to agency policies, infection control guidelines, and patient safety standards.
- G. Business casual clothing is required when the uniform is not appropriate.
1. Women: blouse, shirt with a collar, sweater, khakis or dress pants, moderate length dress/skirt, and dress shoes.
  2. Men: polo shirt, shirt with a collar, sweater, khakis, dress pants, and dress shoes.
  3. Business casual dress includes well-fitting garments that are clean, pressed, and modest.



4. Dresses, skirts, or shorts above the knee, exposed midriff or cleavage, off-shoulder blouses, tight fitting or torn clothing, athletic outfits, t-shirts and denim jeans of any color not considered business casual.
  5. Shoes worn at clinical agencies must have an enclosed toe and heel.
  6. The lab coat is required over business attire. The provisions of this policy are subject to the policies of the specific clinical agency
- H. Noncompliance with the dress code policy may result in an absence.
- I. On-campus Clinical Settings
1. High fidelity simulation lab assignments represent clinical experiences and require uniforms.
  2. Skills lab courses require professional attire or clinical uniform.
  3. Classroom Settings
- J. NHS adheres to the Dress Guidelines as described in the Hartnell College Catalog.

Original: 6/26/03

Reviewed/Revised 5/08; 05/11;5/13; 05/14, 5/17; 06/18; 06/19; 10/20

Approved: 07/09; 12/11; 5/13; 05/14; 07/14, 12/14, 09/15, 5/17. 9/19

## 8: STUDENT IMPAIRMENT

### PURPOSE

- A. To establish safety guidelines for students with suspected impairment or actual disability.
- B. To establish a definition of impairment within the context of providing healthcare to clients.
- C. To establish a course of action for students who are exhibiting physical and mental manifestations that compromise a learning environment or interfere with the safe and effective care of individuals in a clinical environment.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Promptly gather and review evidence of a reported incident related to suspected impairment or actual disability.
  - 4. Consult with Hartnell College administrators when indicated.
  - 5. Meet with the student, faculty of record, student support providers to implement a course of action.
- B. NHS Faculty:
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Address concerns related to suspected impairment or actual disability and document appropriately.
  - 3. Optimize student and/or client safety and confidentiality as outlined.
  - 4. Immediately notify the dean and appropriate personnel of incidents in learning environments that threaten or violate the physical, biological, or emotional safety of students, clients, families, peers, or staff members.
  - 5. Develop plans of action in collaboration with the dean, student, and student support providers.
- C. Student:
  - 1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. Hartnell College NHS Student Handbook and Policy and Procedure Manual.
  - 2. Notify clinical instructor if unable to provide safe care for assigned clients in clinical settings or unable to meet course objectives because of suspected impairment or actual disability.
  - 3. Seek diagnosis and/or treatment for any condition that may result in unsafe situations.
  - 4. Individuals requesting reasonable accommodations are required to self-disclose to the Department of Supportive Programs and Services (DSPS).

---

## POLICY

### I. POLICY STATEMENT

Hartnell College is a drug- and alcohol-free campus. NHS maintains a safe, drug- and alcohol-free, learning environment. An individual with a disability is defined as one who has a mental or physical impairment that substantially limits one or more major life activities, a record of such an impairment, or being regarded as having such an impairment.

- A. The BRN, in the matter of nursing students impaired by alcoholism, drug abuse, and emotional illness, proposes the following:
  - 1. These are diseases and should be treated as such;
  - 2. Personal and health problems involving these diseases can affect one's academic and clinical performance, and the impaired nursing student is a danger to self and a danger to the clients in her or his care;
  - 3. It is the responsibility of the nursing student to voluntarily seek diagnosis and treatment for any suspected illness;
  - 4. Confidential handling of the diagnosis and treatment of these diseases is essential.
- B. In accordance with the Respiratory Care Board (RCB) of California standards, "The Respiratory Care Board has the authority to deny licensure based on convictions of crimes, acts of dishonesty or fraud, acts involving bodily injury, unlicensed activity, violations of certain sections of the Health and Safety Code, convictions of alcohol/substance abuse, or any act which if done by a licentiate would be grounds for suspension or revocation of a license" (RCB, 2016). 1.1
- C. Definitions:
  - 1. Impairment within the context of providing healthcare to clients occurs when drugs, alcohol, and/or emotional illness interfere with the student's judgment, cognitive, interpersonal and/or psychomotor skills so that the student is unable to function safely in a professional role
  - 2. 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.
  - 3. "Campus" refers to off-site locations where students are involved in authorized college activities, including healthcare agencies and community sites.
  - 4. 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 others and includes, but is not limited to, the conduct listed as follows:
    - a. Violating the confidentiality, or releasing information or knowledge concerning the client, except where required by law.
    - b. 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.
    - c. 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.
    - d. Failing to follow the policy and procedure for disposal of medications in effect at the facility at which the student is assigned.
    - e. Diverting, in connection with the professional practice, medications, supplies, equipment, or personal items of the client, employer, or any other person or entity.

- f. Failing to administer medications and/or treatments in a timely, responsible manner.
- g. Failing to take all precautionary measures necessary to prevent the loss of, or unauthorized appropriation of, medication(s)/equipment.
- h. 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.
- i. Causing, permitting, or allowing physical or emotional injury to the client or failure to report same in accordance with the incident reporting procedure in effect where the student is assigned.
- j. Expressly delegating care functions or responsibilities to a person who lacks the ability or knowledge to perform the function or responsibility in question.
- k. Leaving a student assignment without notifying appropriate personnel.
- l. Failing to report to NHS, within a reasonable time of the occurrence, any violation of duly promulgated rules, regulations, or prescriptions.
- m. 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 or misdemeanor convictions).
- n. Failing to meet stated competencies within each course, such that a hazard to a client may occur.
- o. Falsifying information, written or verbal.
- p. Reporting to assigned clinical areas under the influence of psychoactive drugs.

## II. PROCEDURE

- A. Students are required to adhere to the Hartnell College Board Policy and the Hartnell College District <https://www.hartnell.edu/about/safety/policies/drug-free-workplace-policy.html> Hartnell maintains a drug-free campus by prohibiting the manufacturing, distribution, dispensing, possession or use of controlled substances as listed in Section 22: The Drug Free Schools and Communities Act Amendment of 1989 (Public Law 101-226), which includes, but is not limited to, substances such as cannabis, heroin, cocaine, amphetamines, and alcohol.
- B. Abuse of a substance may include prescription or over-the-counter medications that are known to impair or alter judgment. These may include, but are not limited to, benzodiazepines, Schedule IV medications, cannabis, and alcohol.
- C. Consequences of drug abuse violations include, but are not limited to, student disciplinary action pursuant to California Education Code and District policy. Drug abuse violations in any client care environment results in immediate removal from the clinical setting and possible academic failure.
- D. The provisions of this policy are subject to California and federal laws.
- E. The clinical instructor has the responsibility to remove the student from the clinical site if the student is behaving in an unsafe manner or is suspected of impairment.

## III. ASSESSMENT

- A. Assessment, documentation, and evaluation of behaviors unfit/unsafe for a classroom or clinical learning environment is related to an inability to provide safe and competent client care or to a safety risk to self or others.
- B. Confirmation by or reports from another faculty, clinical staff professional, or a member of agency management are considered during the assessment process.
- C. Signs or behaviors that increase the likelihood of harm and pose a danger to clients, self, or others and might require intervention include but are not limited to the following:
  - 1. Physical signs:
    - a. excessive drowsiness and/or sleepiness
    - b. slurred and/or incoherent speech
    - c. lack of manual dexterity
    - d. lack of coordination in walking, unsteady gait
    - e. glossy, red eyes, unusually dilated or constricted pupils
    - f. tremors
    - g. unkempt or deteriorated appearance
    - h. injection wounds on the body
    - i. smell of alcohol on the breath
    - j. altered gait
    - k. slurred speech
    - l. unexplained red eyes and runny nose
  - 2. Mental or emotional signs/behaviors
    - a. impaired judgment
    - b. labile attitude
    - c. mood swings
    - d. emotional outbursts
    - e. change in alertness
    - f. inability to concentrate
    - g. sleepiness/report of sleeplessness
    - h. disorientation
    - i. irrational statements
    - j. unusually aggressive, argumentative, hyperactive, secretive, or passive behavior
    - k. unexplained or frequent accidents or injuries
    - l. unexplained breaks from clinical setting during assigned hours
    - m. unexplained change in mood
    - n. altered interpersonal skills
    - o. isolating behavior
    - p. signs of increasing restlessness
    - q. anger
    - r. sad or depressed affect
    - s. irritability
    - t. over-sensitivity to criticism
    - u. repeated inability to concentrate
    - v. inconsistent behavior patterns
    - w. dishonesty or inability to regard behavior
    - x. unsatisfactory clinical or theory preparation and/or performance
- D. Serious Disruption

1. Students are encouraged to discuss with faculty if there is a situation altering behavior that they did not anticipate, so that disruption is prevented.
  2. Faculty/preceptor/licensed staff who observes a student who is disruptive in class/clinical but poses no immediate danger to clients, self, or others will issue a confidential verbal warning in a private setting that includes the following:
    - a. Specific identification of the observed signs/behaviors
    - b. Identification and encouragement of desired behavior
    - c. A cautionary statement that continued demonstration of the observed signs/behaviors might cause dismissal from the learning environment for that class period or for a specified time interval
    - d. Verbal confirmation of understanding
  3. A written Performance Improvement Plan (PIP) by the faculty of record with input from the student, dean, and student support providers might be indicated following a verbal warning. The PIP includes the learning objective in question, the student's behavior or the perception by others of his/her behavior, identified deficiency, expected student outcomes, and resources made available to the student. The student completes a personal plan for achieving the outcomes/goals within a designated time.
  4. If the serious disruption continues during class/clinical period, or in subsequent class/clinical meetings, the faculty member/instructor will follow the procedures for "Immediate Danger."
- E. Immediate Danger
1. Faculty/preceptor/licensed staff who observe a student exhibiting any of the behaviors in I.C.4.a and II.B or observes a student whose behavior poses an immediate danger to the safety and well-being of clients, self, or others, the faculty member or preceptor will
    - a. make the student aware of the safety risk and immediate course of action.
    - b. direct the student to leave the learning environment and/or clinical facility.
    - c. inform the student that an absence will be noted for that class/clinical period.
    - d. alert security or law enforcement officials if the student exhibits a hostile stance.
  2. The decision of a faculty of record or licensed professional to remove the student from a learning environment due to unsafe behavior is reported immediately to the dean.
  3. Arrangements are made for the student to be taken to their domicile. If the student insists on driving home, security officers on site contact the local police department.
- F. Clinical setting searches: Clinical agency representatives may request security searches of students' personal property and person in cases where there is reasonable cause to suspect a safety risk.
1. While no search is conducted without the student's consent, consent to search may be condition of placement in the clinical setting.
  2. Uncooperative or unsafe behaviors during security searches are grounds for academic failure.

#### IV. REVIEW PROCESS

1. Documentation of the incident(s) by the faculty of record or licensed professional is reviewed as soon as possible by the dean, Hartnell College administrators, and student support providers if indicated. A Performance Improvement Plan (PIP) is developed promptly by the faculty of record with input from the student, dean, and

- student support providers. The PIP includes the learning objective in question, the student's behavior or the perception by others of his or her behavior, identified deficiency, expected student outcomes, and resources made available to the student.
2. Determination of unsafe behavior is made using relevant data, Hartnell College resources, and consultation from the State regulatory boards.
  3. A student removed from a learning environment
    - a. is directed not to return to classes pending completion of the review procedure.
    - b. must generate a PIP with the instructor of record that includes a personal plan for achieving outcomes/goals within the designated timeline.
    - c. must meet with the dean within 48 business hours of the exclusion.
    - d. is provided alternate assignments during the review period, when applicable.
  4. A referral indicating behaviors that led to the classroom/clinical exclusion is provided to the student.
    - a. The referral must be signed by a licensed chemical dependency/mental health counselor/healthcare provider indicating the student received professional treatment and is released to return to the academic program and to resume clinical duties.
  5. Refusal by the student to submit the required assessment may result in dismissal from the academic program.
  6. Students may appeal dismissal from the academic program using the appeals process available through Hartnell College Student Affairs.
- B. Students with a repeated incident of impaired behavior are ineligible for reinstatement.

## V. DRUG TESTING

- A. The student may be subject to a drug screen under circumstances described below:
  1. Abandonment: Leaving the clinical site without permission of the clinical instructor.
  2. Refusal to Cooperate: Refusal to comply with agency policies designed to uphold client safety is grounds for academic failure.
  3. Unfit for Duty: A student suspected of being unfit for duty will be subject to a drug screen. Behavior that compromises safety is grounds for academic failure.
  4. Reasonable Cause: A student is required to submit to a drug screen if the hospital staff/management believes a student has violated a drug-free policy.
- B. The student may request that a peer accompany him/her through the drug screen process, except during urine/specimen collection.
- C. Confidentiality of Drug Test Results: All test results are handled in a confidential manner. No information is released without written consent of the student, or as required by law.
- D. Positive Drug Screening Results:
  1. Students with positive drug screens related to non-prescribed, illegal medications are counseled. If dismissed, students must submit proof of treatment prior to reentry.
  2. The student may request a second test of the same sample at a different lab at the student's expense.
  3. The dean and student support providers may make appropriate referrals to the impaired student.
  4. Students who receive a positive screening result are dismissed from the NHS program and referred for counseling.

## VI. REINSTATEMENT

- A. Reinstatement processes after completion of a PIP and/or prescribed professional treatment plan are included in Policy 2C. Successful completion of the PIP is required to progress in the academic program.
- B. Additional conditions for reinstatement might include
  1. participation in an approved rehabilitation program
  2. periodic verification of continued compliance with the approved rehabilitation program a specified period for rehabilitation of successful rehabilitation. Evidence of continued rehabilitative treatment is provided on a schedule as determined by the dean in collaboration with the student's healthcare provider.
  3. a release to return to classroom and clinical learning environments from the treating healthcare provider.
  4. Students are required to complete an approved substance abuse treatment program prior to reinstatement to any of the academic programs that include a clinical component.
- C. Students are eligible for reinstatement if they meet the established rehabilitation requirements and have no subsequent incidents of positive drug screens or impairment.
- D. Reinstated students are subject to periodic and screening requirements for substance(s) detected in the positive screen.
- E. Reinstatement is based on space availability.
- F. Failure to achieve course objectives results in dismissal.

### REFERENCES:

- American Nurses Association (ANA) (2015). *Code of ethics for nurses with interpretive statements*. Silver Springs, MD: Author.
- California Board of Registered Nursing, Board Approved 5/24/2003. EDP-B-03 (2016). *Recommended guidelines for disciplinary orders and conditions of probation*. Retrieved from [www.rn.ca.gov/pdfs/enforcement/discguide.pdf](http://www.rn.ca.gov/pdfs/enforcement/discguide.pdf)
- California Board of Vocational Nursing and Psychiatric Technicians (2015). *Vocational nursing practice act with rules and regulations*. Retrieved from [http://www.bvnpt.ca.gov/about\\_us/laws.shtml](http://www.bvnpt.ca.gov/about_us/laws.shtml) <http://www.bvnpt.ca.gov/pdf/discguide.pdf>
- California Legislative information.  
[https://leginfo.ca.gov/faces/codes\\_displayText.xhtml?lawCode=BPC&division=2.&title=&part=&chapter=6.&article=3](https://leginfo.ca.gov/faces/codes_displayText.xhtml?lawCode=BPC&division=2.&title=&part=&chapter=6.&article=3).
- Emergency Nurses Association/International Nurses Society on Addictions (2017). *Joint position statement: substance use among nurses and nursing students*. Retrieved from [http://ac.els-cdn.com/S009917671730168X/1-s2.0-S009917671730168X-main.pdf?\\_tid=e278a0a6-602d-11e7-951f-00000aab0f26&acdnat=1499113764\\_09b09893c182847980230beca38cd8ea](http://ac.els-cdn.com/S009917671730168X/1-s2.0-S009917671730168X-main.pdf?_tid=e278a0a6-602d-11e7-951f-00000aab0f26&acdnat=1499113764_09b09893c182847980230beca38cd8ea)
- Hartnell College (2019). *Hartnell College policy on drug free workplace*. Retrieved from <http://www.hartnell.edu/drug-free-workplace-policy> [http://www.hartnell.edu/sites/default/files/Library\\_Documents/board\\_documents/policies/5230.pdf](http://www.hartnell.edu/sites/default/files/Library_Documents/board_documents/policies/5230.pdf)
- McCulloh Nair, J., Nemeth, L.S., Sommers, M., & Newman, S. (2015). Substance abuse policy among nursing students. *Journal of Addictions Nursing*, 26(4), 166-174.
- McCulloh Nair, J., Nemeth, L.S. Williams, P. H., Newman, S. D., & Sommers, M. S. (2015). Alcohol misuse among nursing students. *Journal of Addictions Nursing*, 26(2), 71-80.
- Respiratory Care Board of California (2016). Business and Professions Code, Section 3710.1. Retrieved from <http://www.rcb.ca.gov/applicants/lawsregs.shtml>
- The Commission on Accreditation for Respiratory Care <http://www.coarc.org>

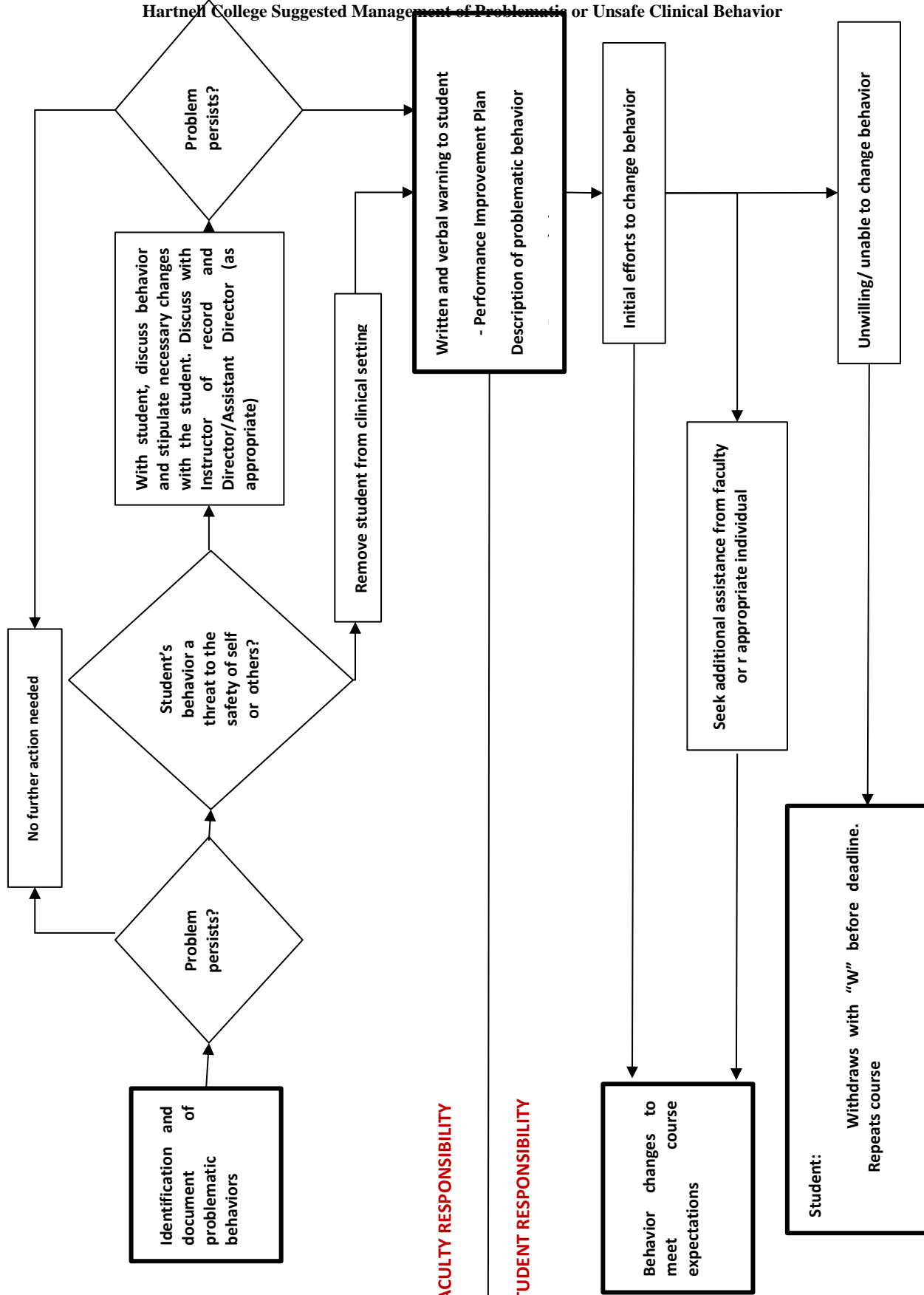
Original: 6/26/03

Reviewed/Revised: 5/08; 07/09; 06/11; 06/12; 05/13; 05/14, 5/17; 06/19. 10/19;11/20

Approved: 07/09; 06/11; 06/12; 05/13; 07/14, 09/15, 5/17.



Hartnell College Suggested Management of Problematic or Unsafe Clinical Behavior



**FACULTY RESPONSIBILITY**

**STUDENT RESPONSIBILITY**

## 9: GRADING CRITERIA

### PURPOSE

To establish standardized academic grading criteria and standards that optimize student success.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College Administrative and Board policies.
  - 3. Review Progress Improvement Plans (PIPs) with the instructor of record.
  - 4. Review failures/dismissals with the faculty.
- B. NHS Faculty
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Record grades and notify students of academic standing.
  - 3. Notify the dean about students at risk of failing.
  - 4. Generate a PIP with each student earning less than 75% or “Unsatisfactory” ratings.
- C. Student
  - 1. Read and seek clarification of
    - a. all course and clinical objectives.
    - b. Hartnell College Catalog and academic grading policies and procedures.
    - c. Hartnell College NHS Policy and Procedure Manual
  - 2. Review current grades.
  - 3. Contact the faculty of record to clarify academic standing, if necessary.
  - 4. Generate a PIP with the faculty of record.

---

## POLICY

### I. POLICY STATEMENT

NHS faculty grading criteria are founded on student development theory and proven pedagogical practices. Faculty value student engagement and employ early alert practices for students at risk.

- A. A 70% or “Pass” must be achieved in all nursing and respiratory care core courses to advance to the next semester. Students achieving less than 70% or “No Pass” in a non-clinical course must repeat courses for that semester. A “No Pass” in a clinical course results in dismissal from the program and the student is not eligible for reinstatement.
- B. Summative assessments shall be weighted at 70 % (+/- 5 %) of the course grade.
- C. Notification of Academic Standing letters are issued to students by the faculty of record before the Hartnell College withdrawal date for that semester.
- D. Upon receipt, the student must sign and return the Notice of Academic Standing letter to the faculty of record.
- E. The signed letter is placed in the student’s file.
- F. Grading system:
  - 90-100% = A Excellent
  - 80-89.99% = B Good

70-79.99% = C Satisfactory  
60-69.99% = D Unsatisfactory  
59.99 & below = F Failure

- G. Final grades are not rounded and instructors do not grade on a curve.
- H. Extra credit is not granted for educational activities.
- I. Determination of a student's grade by the faculty of record is considered final.
- J. Each semester, students must pass a medication administration and calculation competency with 100% grade prior to administering medications to individuals. Inability to administer medications safely may result in unmet course objectives, which is cause for failure in a clinical course.
- K. Completion of assignments and examination/quiz scores are available to students in the Canvas grade book.
- L. Grading rubrics are used to identify and assess expected criteria for course assignments.
- M. Written assignments (homework, projects, standardized assessments, self-evaluation rubrics) are completed by students within the assigned time period.
- N. Ten percent is deducted for each day an assignment is submitted past the due date/time.
- O. Students submit Test Item Query forms when challenging answers to specific test items.
- P. Standardized tests may account for no more than 10% of total points in a course.
- Q. Faculty engages students and encourages student self-appraisals of college work.
- R. Students are encouraged to discuss grades and seek formative evaluations from instructors of record on a regular basis.
- S. NHS courses may not be audited.
- T. Each student is required to complete at least one interprofessional education (IPE) simulation experience per semester.

## II. PROCEDURE

- A. Theory classes
  - 1. Standardized proctored and practice assessments may be administered each semester.
  - 2. Assignments, essays, quizzes, and exams may be assigned/administered online.
- B. On- and off-campus clinical classes
  - 1. Evidence of meeting the clinical objectives is based on observations of clinical performances, evaluations of written assignments, assessments of student participation in pre and post conferences, and summative ratings on clinical objectives.
  - 2. Passing a medication administration and calculation competency with 100% is required each semester. Only students who pass the medication administration and calculation competency may pass medications in clinical settings.
    - a. Students are expected to complete practice exercises, attend workshops, and come prepared to pass the medication administration and calculation competency with a score of 100%.
    - b. Initial medication administration and calculation competency assessment for each semester is scheduled during class hours. Subsequent competency attempts are scheduled outside of regularly scheduled class time.

- c. Students who score less than 100% are required to complete supplemental learning modules before retaking the competency.
  - d. A second unsuccessful attempt may require a written Performance Improvement Plan (PIP). The student is given additional learning materials.
  - e. A third unsuccessful attempt results in a PIP. The student who does not achieve course objectives related to medication administration after repeated attempts is at risk for academic failure.
  - f. A student may petition the dean and the instructor of record to request additional attempts.
    1. Clinical performance evaluations are completed by the student and faculty at mid-term and end of the course. Students or faculty may initiate a formative evaluation meeting at any time for feedback and guidance.
      - a. A less than satisfactory formative evaluation based on performance in the clinical setting may result in a verbal counseling, written PIP, or academic failure.
      - b. Failure to complete the PIP by the specified date or continued unsatisfactory performance may result in academic failure.
      - c. Causes for clinical failures include but are not limited to the following circumstances:
        - i. Unmet clinical performance objectives
        - ii. Student withdrawal after the published drop date
        - iii. Unprofessional or inappropriate behavior with instructor(s), peers, clients or hospital staff
        - iv. Impaired judgment or evidence of behaviors that present a safety risk to the student or others (see Policy 8)
        - v. Unlawful behaviors
      - d. The student is entitled to due process through the Hartnell College Student Grievance Procedure.
- B. Skills Lab Courses: Guidelines for evaluation
1. Assessment and evaluation of assignments, exams, skills competencies, simulation experiences, and clinical knowledge practice may be achieved in multiple ways as determined by the instructor of record.
  2. Evaluation methods may include videotaping, peer review, or faculty review, and may be accomplished in the clinical setting or classroom laboratory setting. Skill demonstrations are timed.
  3. Students maintain completed competency checklists until graduation.
  4. A scoring rubric is used for grading.
  5. Students come prepared to successfully demonstrate competency.
  6. Unsuccessful completion of skill competency results in the following actions:
  7. Unsuccessful first attempt: verbal learning contract between the student and the instructor of record.
  8. Unsuccessful second attempt: PIP between the student and instructor of record.
  9. Unsuccessful third attempt: a revised PIP between the student and instructor of record. A student with multiple failures is at risk for academic failure.
  10. The student must petition the dean for additional attempts.
- C. Clinical Reasoning Seminar
1. Students come prepared and actively participate in the seminar each week.

2. A grading rubric is used to measure student achievement. Students complete self-evaluations and submit them by the established deadlines as defined in the course syllabus.
- D. Supervised Skills Practice
1. Supervised skills practice is a positive attendance course. To receive credit (pass/no pass) students must complete the minimum number of hours required.

Original: 6/26/03

Reviewed/Revised: 5/08; 06/12; 04/14; 06/14; 06/18; 06/19; 4/2021

APPROVED: 07/09; 06/11; 06/12; 06/14; 07/14, 09/15. 9/19, 4/2021

## 10: MEDICATION ADMINISTRATION

### PURPOSE

To provide guidance to clinical agencies to identify how NHS students are prepared to administer medications in the clinical settings. To communicate how professional staff assist students with medication administration in clinical settings.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College Administrative and Board policies.
- B. NHS Faculty of Record
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Follow Just Culture Model.
  - 3. Read and seek clarification of all hospital/agency specific policies and procedures related to medication administration.
  - 4. Orient students to the agency's medication administration policies and practices
  - 5. Report risks, irregular incidents, and medication errors in accordance with the agency's policies. Involve students when indicated.
  - 6. Notify the faculty director, assistant director, and dean of the incident. Initiate a Hartnell College incident report with the dean.
- C. Student
  - 1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. Hartnell College NHS Program Policy and Procedure Manual.
    - c. specific hospital/agency medication administration policies and practices.
  - 2. Attend required classes and clinical experiences.
  - 3. Follow the Hartnell College medication competency protocols.

---

## POLICY

### I. POLICY STATEMENT

NHS students are provided supervised medication administration opportunities in both simulated and actual clinical environments. Hartnell College NHS programs have adopted the Just Culture Model when evaluating compliance with medication policies and procedures. Students comply with the clinical agency's medication administration policies and procedures.

### II. PROCEDURE

- A. Lead instructors discuss course objectives, course content, and skills taught with agency liaisons at the beginning of each semester. Instructors post course objectives, course content, and skills performed at their clinical unit and discuss them with the clinical staff.
- B. Medication administration protocols are introduced progressively in theory and laboratory skills courses. Administering medications to clients in a clinical setting is

- limited to content taught and tested.
- C. Medication administration-related practices are in accordance with the clinical agency’s policies and practices.
    1. After successful demonstration of medication administration skills in a simulated environment, the student performs medication administration in the clinical setting with instructor supervision according to professional scope of practice. Procedural guidelines and references are listed in course syllabi. Students are encouraged to seek clarification with faculty.
  - D. A dosage calculation and medication administration exam is administered every semester. Students must pass the exam with a score of 100% before administering medications with a preceptor or clinical instructor.
  - E. Supervision in the clinical setting may be delegated to a licensed staff member in accordance with agency policy. Delegated tasks can include the following:
    1. Assessing the student’s knowledge of the medication, the prescription, pertinent side effects, relevant labs or assessments, key teaching points for the client, and how to measure the effectiveness of the medication
    2. Verifying the medication prescription according to agency policy or standardized protocol
    3. Obtaining the medication from medication dispensing system, storage bin, medication cart, or refrigerator according to agency policy
    4. Checking the dosage calculations
    5. Verifying the prepared medication against Medication Administration Record
    6. Overseeing administration of the drug to the client (see table below)
    7. Supervising medication administration documentation
    8. Evaluating the individual’s response to the medication
    9. Direct supervision includes overseeing the entire medication administration process, from preparing the medication to evaluating its effectiveness.
  - F. Vocational nursing students may not administer intravenous medications or fluids.

**Associate Degree Nursing: Instructor Role:**

|   |
|---|
| <b>Semester 1</b>   |
| <ul style="list-style-type: none"> <li>● Oversee every step of the medication administration process.</li> <li>● Approve a licensed professional to oversee the administration of medications as above, with the exception of all medications and/or fluids administered intravenously. All IV medications will be directly supervised by nursing instructor.</li> </ul>  |
| <b>Semester 2</b>   |
| <ul style="list-style-type: none"> <li>● Verify all student-prepared medications against MAR/standardized protocols.</li> <li>● Supervise medication administration, including intravenous medications and fluids administered through peripheral lines.</li> <li>● After medication verification, approve the independent administration of oral and alternate route medications, according to agency policy.</li> <li>● Directly supervise the administration of RhoGam.</li> <li>● Approve a licensed professional to oversee the administration of medications as described above.</li> </ul> |
| <b>Semester 3</b>   |
| <ul style="list-style-type: none"> <li>● Verify student-prepared medications and/or blood products against MAR/standardized protocols.</li> </ul>   |

|   |
|---|
| <ul style="list-style-type: none"> <li>• Oversee medication administration, including peripheral intravenous fluids/ medications and central line intravenous fluids/medications, according to agency policy.</li> <li>• After medication verification, approve the independent administration of medications including flushing peripheral IVs/INTs independently, according to agency policy.</li> <li>• Approve a licensed professional to oversee the administration of medications as described above.</li> </ul>  |
| <ul style="list-style-type: none"> <li>• <b>Semester 4</b></li> </ul>   |
| <ul style="list-style-type: none"> <li>• Verify student-prepared medication and/or blood products against MAR/standardized protocols.</li> <li>• Oversee medication administration, including IVPB, IVP, IV fluids, and blood products given through INTs, peripheral, and central lines/PICCs.</li> <li>• After medication verification, approve the independent administration of medications, including flushing peripheral IVs/INTs, according to agency policy.</li> <li>• Approve a licensed professional to oversee the administration of medications as described above.</li> </ul> |

**Vocational Nursing: Instructor Role:**

|  |
|--|
| <p><b>Semester 1</b></p> <ul style="list-style-type: none"> <li>• Oversee every step of the medication administration process.</li> <li>• Verify student-prepared medication and/or blood product against MAR/standardized protocols.</li> <li>• Directly supervise the administration of RhoGam.</li> <li>• After medication verification, approve the independent administration of oral and alternate route medications, according to agency policy. Exception: intravenous fluids/medications and blood products.</li> <li>• Approve a licensed professional to oversee the administration of medications as described above.</li> <li>• Supervise medication administration in simulated environment only.</li> </ul> |
| <p><b>Semester 2</b></p> <ul style="list-style-type: none"> <li>• Oversee every step of the medication administration process.</li> <li>• Verify student-prepared medication <b>and</b>/or blood product against MAR/standardized protocols.</li> <li>• Directly supervise the administration of RhoGam.</li> <li>• After medication verification, approve the independent administration of oral and alternate route medications, according to agency policy. Exception: intravenous fluids/medications and blood products.</li> <li>• Approve a licensed professional to oversee the administration of medications as described above.</li> </ul>  |
| <p><b>Semester 3</b></p> <ul style="list-style-type: none"> <li>• Verify student-prepared medication and/or blood product against MAR/standardized protocol.</li> <li>• After medication verification, approve the independent administration of medications, according to agency policy. Exception: intravenous fluids/medications and blood products.</li> <li>• Approve a licensed professional to oversee the administration of medications as described above</li> </ul>  |

**Respiratory Care Practitioner: Instructor/Staff Role:**

|  |
|--|
| <p><b>Semester 1</b></p> <ul style="list-style-type: none"> <li>• Supervise medication administration in simulated environment only.</li> </ul>  |
| <p><b>Semester 2 and 3</b></p> <ul style="list-style-type: none"> <li>• Oversee every step of the medication and oxygen administration process.</li> <li>• Verify student-prepared medication and oxygen against MAR/standardized protocols.</li> <li>• After medication verification, approve the independent administration of inhaled medications, according to agency policy.</li> <li>• Approve a licensed professional to oversee the administration of medications as described above.</li> </ul> |
| <p><b>Semester 4</b></p>   |



- Verify student-prepared medication against MAR/standardized protocol.
- After medication verification, approve the independent administration of medications and oxygen, according to agency policy.
- Approve a licensed professional to oversee the administration of medications and oxygen as described above.

Original: 11/21/2013

Reviewed/Revised: 12/13; 01/14; 02/14; 06/14; 06/18; 06/19; 10/20; 4/2021

Approved: 01/14; 02/14; 06/14, 03/15, 11/15. 9/19, 4/2021

## 11A: EXAMINATION DEVELOPMENT AND REVIEW

### PURPOSE

To standardize exam construction, a writing style protocol and review that promotes uniformity among the Hartnell College NHS faculty.

### RESPONSIBILITY

- A. Dean of Academic Affairs: NHS
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
- B. NHS Faculty
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Participate on the Curriculum Committee as assigned.
- C. Student
  - 1. Read and seek clarification of:
    - a. Hartnell College Catalog and academic policies and procedures
    - b. Hartnell College NHS Policy and Procedure Manual

---

## POLICY

### I. POLICY STATEMENT

The NHS faculty incorporates standardized protocols for the development of all exams in the respective programs. These standardized protocols serve as an aid to students and faculty. Writing style protocols are incorporated to ensure sound internal curriculum evaluation and to reflect professional licensing examinations. NHS supports the belief that tests and evaluative measures are used to evaluate student achievement, to support student learning, and to evaluate and improve teaching and program effectiveness.

### II. PROCEDURE

General guidelines for writing test questions:

- A. Writing Style Protocol: A writing style protocol provides faculty with clear guidelines for item writing to help minimize ambiguity and to ensure uniformity in the presentation of exams throughout the curriculum. Consider the following suggestions when formulating questions.
  - 1. Use gender-neutral language: Use of pronouns that are styled to designate male or female should be avoided unless germane to the question. Unless the question item(s) relate to a case study or the gender relates to the correct response.
  - 2. Avoid use of proper names: Use client, adult, or child. Avoid comical names (e.g. May B. Sick) as they can be considered insensitive.
  - 3. Use a parsimonious (succinct) writing style: Avoid using “of the following” and scenario-based questions consistent with national licensing standard.
  - 4. Use person-first language: Place the person first when constructing the sentence.
  - 5. Style drug names uniformly using generic names.
  - 6. Include in the stem any words duplicated in the options/distracters.
  - 7. Take care when using *best*, *first*, *most important*, *highest priority* etc. All

answers must be correct with only one being the first or the best, etc. Consider bolding or italicizing these words.

8. Avoid the word *appropriate* as it may have many different interpretations. It can be vague, confusing, and debatable.
  9. Avoid use of *except* test items. A question using *except* places the focus on an incorrect action/response.
  10. When using *select all that apply* (SATA), bold or underline the phrase. Minimum of five distracters should be used for any SATA question. These questions may have one right answer or all right answers regardless of the number of answer options.
  11. The healthcare professional (RN, LVN, RCP) performs the correct action and evaluates for incorrect actions.
  12. All necessary information is included in the stem.
  13. The stem must be a complete question.
- B. Writing Test Item Distracter Guidelines:
1. Present options in a logical order.
  2. Make options consistent in length.
  3. Avoid “*all the above*” and “*none of the above.*”
  4. Multiple-multiple questions do not constitute more than 5% of an exam, unless partial credit is provided.
  5. Make distracters plausible and homogeneous.
  6. Do not write partially correct answer choices. The entire choice must be correct or incorrect.
  7. Vary placement of correct answer, or consider using the scramble answer choice feature in the test delivery system.
- C. Writing Test Item Rationale Guidelines:
1. Use a narrative format. Explain why the correct answer is correct, then explain the why the distractors are in error.
  2. Provide references for the correct response.
- D. Critical Thinking: Questions that measure critical thinking must contain four criteria:
1. Include rationale for each test item.
  2. Test questions will be determined to be at one of two levels. Foundational thinking which equates to Remembering and Understanding or Clinical Judgment which includes applying, analyzing, evaluating, creating
    - a. Remembering: Recall of facts and specific information, requires memorization.
    - b. Understanding: Ability to describe and explain the material.
    - c. Applying: Use of information/knowledge in a new situation. Requires at least two facts placed in the question.
    - d. Analyzing: Ability to break down material into component parts and identify the relationships among them. Requires three or more facts. This is the highest level that can be asked using a multiple-choice question.
    - e. Evaluating: Ability to judge the value of material, based on definite criteria.
    - f. Creating: Ability to combine elements or develop a new product. Requires multi-logic thinking to answer questions.

3. Multi-logical thinking is defined as thinking that requires knowledge of more than one fact to logically and systematically apply concepts to a clinical problem.
  4. Require a high level of discrimination to choose from among plausible alternatives.
- E. Exam Development Protocol
1. Exam question should be reviewed by a faculty peer prior to administration.
  2. Blueprinting is most useful prior to administration to ensure a broad range of content is tested, objectives-question alignment, and a variation of questions.
  3. Faculty members are encouraged to blueprint all exams. (This does not apply to quizzes) At a minimum test should blue print the lesson objective being tested.
  4. Test blueprint could also include cognitive level (foundational thinking, clinical judgment), integrated process, concept, and client need. (See attachment B).
  5. Integrated processes include the nursing process, respiratory protocols, caring, teaching/learning, and communication.
  6. Client needs include Safe, effective care environment; Health promotion and maintenance; Psychosocial integrity; Physiological integrity.
  7. All theory courses have a comprehensive final exam. Multiple choice and alternative format questions are preferred.
- F. Test Analysis
1. Faculty members are required to conduct an item analysis for every exam administered.
  2. The following statistics may be collected based on exam analysis software available:
    - a. Number of students taking the exam
    - b. Number of items
    - c. Total possible points
    - d. Range of scores from High to Low
    - e. Average score or mean
    - f. Median score is the midpoint where 50% of scores are above and 50% are below the median score.
    - g. Mode (most frequently occurring score)
    - h. Standard deviation is the variance from the mean
    - i. Reliability Coefficient: (Kuder-Richardson) KR 20 that is a measure of internal consistency or reliability calculated by exam analysis software with an acceptable range: greater than 0.65
      - i. 65% of the total score variance is attributed to the true score variance indicating the exam is reliable (high scoring students consistently answered questions correctly and low-scoring students consistently answered questions incorrectly).
      - ii. KR-20 scores less than 0.65 indicate more homogeneity among students/instructor or that the average difficulty level for the exam was higher.
  3. Difficulty level of each test item
    - a. Difficulty level equals number of students who answered correctly

- and divide by the total number of questions.
  - b. Acceptable range for point-biserial: 0.30-0.90.
  - c. Optimum level of difficulty for a four-option, multiple choice test items is 63%. *Average difficulty level for test items on nursing exams is 75-85%.*
  - d. Instructors review items that are answered correctly by less than 30% of the class.
  - e. Items that are answered correctly by 90% or more of the class may be considered a mastery item, or the question may be too easy and needs to be reviewed.
- G. Item discrimination is a calculation that measures the ability of a test item to distinguish between those who know the content, and those who do not.
- H. Item discrimination ratio (IDR).
  - 1.  $IDR = \% \text{ of upper } 27\% \text{ who answered correctly} - \% \text{ of the lower } 27\% \text{ who answered correctly.}$
  - 2. Acceptable range: 25% or above. IDR's >40% are considered excellent discriminators.
  - 3. IDRs below this level are considered poor discriminators.
  - 4. Negative IDRs occur when more students in the lower-scoring group answer correctly than by students in the upper-scoring group.
- I. Items with a zero or negative discrimination must be reviewed carefully before using them again.
- J. Point biserial correlation coefficient (PBCC) measure variance of the entire group, not just the high/low scorers.
- K. The closer the PBCC is to +1, the better the item is at discriminating between those who know the content and those who don't.
- L. Range:
  - 0.30 and above: Excellent item
  - 0.2 – 0.29: Good item
  - 0.15 – 0.19: Acceptable item
  - 0.1 – 0.14: Marginal item
  - 1.09 and below: Poor item (should be carefully reviewed and probably edited)
- M. Response frequencies represent the number of students who choose each option/distracter.
  - 1. Identify options that were not chosen by anyone. Faculty should review and edit these “non-distracters.”
- N. Faculty are encouraged to conduct exam review with a faculty peer.
- O. Faculty item review options include
  - 1. giving credit for more than one answer, only if more than one option provides a reasonable answer.
  - 2. nullifying the test item by giving credit for all four choices. The result is increased scores for the students who answered incorrectly; scores remain the same for students who answered correctly.
  - 3. dropping the question. This is the least preferred action. This reduces the total number of questions that comprise the exam. However, this increases the value of the remaining questions.
  - 4. revising the test question for future use.

P. Data Storage for Faculty-written Examinations

1. Analysis results, re-scored rosters are maintained on the course management system for two years.
2. Faculty are encouraged to retain a copy of the item analysis, and student response report for ease of retrieval.
3. Exams are stored for a minimum of two years for nursing and five years for respiratory care program.
4. Paper and Pencil exams, if offered, will be retained in a locked cabinet, to include the original exam, answer key and student scores.

References:

- Caputi, L. and Engelmann, L. (2005). *Teaching nursing. Volume 1: The art and science*. Glen Ellyn, IL: College of DuPage.
- Morrison, S., Nibert, A., and Flick, J. (2006). *Critical thinking and test item writing*, (2<sup>nd</sup> ed.) Houston, TX: Health Education Systems, Inc.
- Oermann, M. H. and Gaberson, K. B. (1998). *Evaluation and testing in nursing education*. New York: Springer Publishing Company.

Original: 05/11/11

Reviewed/revised 9/12; 03/14; 06/14, 4/15; 06/18

Approved: 06/04/14; 07/14, 04/15, 09/15

Reviewed/Suspended 4/20/2020 during COVID 19 Emergency. Will examine and revise in light of changes in test plans, and best practices with online instruction.

**11A**  
HARTNELL COLLEGE NHS

**Verbs Associated with Cognitive Levels**

| Remembering | Understanding | Applying   | Analyzing   | Evaluating | Creating  |
|-------------|---------------|------------|-------------|------------|-----------|
| Define      | Describe      | Apply      | Analyze     | Appraise   | Compose   |
| Identify    | Differentiate | Calculate  | Categorize  | Assess     | Construct |
| Know        | Discuss       | Classify   | Compare     | Determine  | Create    |
| List        | Explain       | Develop    | Contrast    | Evaluate   | Derive    |
| Name        | Infer         | Examine    | Deduce      | Judge      | Design    |
| Recognize   | Interpret     | Generalize | Detect      |            | Formulate |
| Relate      | Outline       | Illustrate | Distinguish |            | Invent    |
| State       | Rephrase      | Show       | Investigate |            | Modify    |
| Tell        | Restate       | Solve      | Separate    |            | Plan      |
| Write       | Reword        | Use        |             |            | Predict   |
|             |               |            |             |            | Produce   |

D.

**11A**  
HARTNELL COLLEGE NHS EDUCATION  
**Test Blueprint Questions 1-**

**Course:** \_\_\_\_\_ **Exam#:** \_\_\_\_\_ **Date:** \_\_\_\_\_

| Item # | CO | CL | NP/IP | CN |
|--------|----|----|-------|----|
| 1      |    |    |       |    |
| 2      |    |    |       |    |
| 3      |    |    |       |    |
| 4      |    |    |       |    |
| 5      |    |    |       |    |

Key:

CO=Class Objective

CL=Cognitive Level

NP=Nursing Process Step (A, An, P, I, E)/IP-Integrated Process=Caring (Ca), Teaching (TL), Communication (Co)

CN=Client Need- Physiological (Phy), Psychosocial (PS), Health promotion (HP), Safe, effective care environment (S).

Hartnell College  
Nursing and Health Sciences Program

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:

\_\_\_\_\_  
\_\_\_\_\_



Rationale:

\_\_\_\_\_  
\_\_\_\_\_

Two published resources available to classmates that validate the challenge.

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

\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_



## 11B: EXAMINATION ADMINISTRATION

### PURPOSE

To standardize exam administration and assessment review procedures to promote scholarship of instruction and student success in NHS.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
- B. NHS Faculty
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Participate on the Curriculum Committee as assigned.
- C. Student
  - 1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures
    - b. Hartnell College NHS Policy and Procedure Manual

---

## POLICY

### I. POLICY STATEMENT

NHS faculty incorporates best practices and evidence based assessment techniques for the development and administration of all exams in the respective programs. Faculty written exams foster sound internal assessment of curricular content and scholarship of instruction. Additionally, standardized exams are utilized and serve as an aid to students and faculty to norm assessment results between cohorts. Standardized exam also allow students to become experienced with assessment styles used in contemporary professional licensing examinations.

### II. PROCEDURE

- A. Exam Administration Protocol
  - 1. Exam formats include paper/pencil and computer assisted testing.
  - 2. As a guideline, 1.5 minutes are allotted per question. National average is 1.2 to 1.36 minutes for multiple-choice questions per National Council for State Boards of Nursing (NCSBN) and National Board for Respiratory Care (NBRC). Mathematical computation questions requiring multiple steps are allotted up to 3 minutes per question.
  - 3. Exams are administered in an environment that is conducive to success. Students are advised to remain quiet during the exam and are seated at least two arm lengths apart. If space does not allow for separation, students are issued different versions of the exam.
  - 4. Exams are proctored by faculty or a designee. The proctor does not leave the room during the exam.
  - 5. Students are encouraged to use the restroom prior to starting the examination. If urgently necessary, one student may leave the room at a time if/when an escort is available.

6. No student may leave the room without permission from the proctor.
  7. Students are required to include names and ID numbers on tests and Scantron®. For computerized exams, students log in using personal codes. Electronic proctoring services may be required for computerized exams. Both those taken on campus and at home.
  8. Students are advised to come to the front of the classroom with questions for the proctor to minimize disruptions for other students. Faculty speaks to students during an exam in the least disruptive manner possible.
  9. During standardized exams proctoring protocols prohibit faculty from responding to questions related to the actual examination.
- B. Exams using Scantrons®
1. Students enter responses on the Scantron before the end of the exam. The student is not allowed to enter responses after the exam time has elapsed.
  2. Only responses on the Scantron are accepted. The exception is responses to alternate format questions, as indicated.
- C. Computerized Exams
1. Students must finish the exam in the allotted time. Once the exam shuts off, students cannot reenter the exam.
  2. Faculty provides directions for entering responses to alternate format questions.
- D. Testing Environment
1. All student possessions (backpacks, hats, notes, food, etc.) are deposited at the front or sides of the room. Students are provided ~~pencils~~, calculators, and scratch paper, when necessary for the examination.
  2. Students use a school-issued calculator, or the embedded electronic calculator. No other calculator will be allowed. Scratch paper is returned to the instructor after the exam.
  3. No cell phones or electronic devices, including smart watches, are permitted during examinations.
  4. Students who talk during an exam earn a grade of zero for that exam.
  5. Once an exam is submitted by the student, the student leaves the classroom and cannot reenter for any reason.
- E. Department of Supportive Programs and Services (DSPS)
1. Reasonable accommodations are provided to students who submit paperwork confirming assessment by DSPS personnel.
  2. Students are provided reasonable accommodations when the “Confidential Request for Reasonable Accommodations” is received a week prior to the exam date.
  3. Students with DSPS accommodations are subject to same testing protocols as other students.
  4. Reasonable accommodations **can only be applied in the DSPS suite by DSPS staff.**
  5. Violations of testing protocols in DSPS results in disciplinary actions including but not limited to assigning a grade of zero for the exam.
- F. Exam Review
1. Faculty supervises exam reviews. Copies of exams are never returned to students.
  2. Exam review is scheduled at such time that all students have completed the exam.
  3. For printed exams: the answer key with rationale is posted around the classroom

- for students to review in silence. No cameras, books or papers are permitted.
4. Students may not copy the exam questions, screenshot, photograph, or otherwise record exam questions.
  5. For instructor written, computerized exams, the rationale will be on for a limited time, while supervised in the classroom.
  6. No recording, or photographs, or ~~notes~~ are to be taken during exam review.
  7. Notes may only include lists of major concepts to review. (e.g. need to review hypokalemia.)
  8. Exam review does not take place after final exams. Students may make an appointment to review a final exam after the completion of all exams for the term.
  9. Students may make an appointment to review their exam individually, or in small groups with the instructor.
- G. Student Test Item Queries
1. As professionals, faculty and students do not engage in verbal debate regarding any test item.
  2. Students have three days after the exam has been graded to challenge exam questions.
  3. One Test Item Query Form is completed per question.
  4. Questions under review are described on the Query Form and the student's rationale for query is provided.
  5. A minimum of two to three scholarly resources/references that support the student's answer choice are required. Sources should be listed in the course syllabus or available to all students.
  6. The Query Forms are reviewed by faculty and decisions are rendered within 5 days.
- H. Standardized Computer Testing
1. NCLEX and NBRC questions use a computer adaptive test (CAT) model. Faculty may offer quizzes or exams that require the use of the computer (e.g., course management systems, standardized testing).
  2. Standardized exams are integrated into the curriculum. Standardized tests are offered during each semester/~~module~~.
  3. Students earn credit/points for completing practice exams and remediating or retaking exams.
  4. In the absence of a proctored exam, students take online quizzes under the same honor system as if in the classroom as outlined in Procedure A of this policy.
- I. Quizzes and Examinations
1. Missed examinations must be rescheduled with the faculty of record.
  2. Missed quizzes may be rescheduled at the discretion of the faculty of record. Only one missed quiz can be made up.
  3. The faculty of record may allow a tardy student to take the quiz/exam within the remaining time scheduled for the exam.

**References:**

- Caputi, L. and Engelmann, L. (2005). *Teaching nursing. Volume 1: The art and science*. Glen Ellyn, IL: College of DuPage.
- Morrison, S., Nibert, A., and Flick, J. (2006). *Critical thinking and test item writing*, (2<sup>nd</sup> ed.) Houston, TX: Health Education Systems, Inc.
- Oermann, M. H. and Gaberson, K. B. (1998). *Evaluation and testing in nursing education*. New York: Springer

Publishing Company.

Original: 05/11/11

Reviewed/revised 9/12; 03/14; 06/14, 3/15; 06/18; 06/19

Approved: 06/04/14; 07/14, 3/15, 11/15, 2/17

Reviewed/Suspended 4/20/2020 during COVID 19 Emergency. Will examine and revise in light of changes in test plan, and best practices with online instruction.

## 12: HIGH FIDELITY SIMULATION

### PURPOSE

1. To establish behavioral expectations of professionalism during high fidelity simulation (HFS) experiences similar to expectations in other clinical experiences.
2. To facilitate and guide learners as they develop clinical judgment, decision-making, and clinical reasoning skills through active learning.
3. To promote consistency in facilitator support through ongoing faculty development in high fidelity simulation.
4. To promote fidelity and environmental safety using tools, resources, and participants.

### RESPONSIBILITY

- A. Dean of Academic Affairs: NHS
  1. Annually review the NHS Policy and Procedure Manual.
  2. Annually align NHS policies with Hartnell College policies.
  3. Collaborate with faculty regarding content.
- B. NHS Faculty
  1. Annually review the NHS Policy and Procedure Manual.
  2. Maintain a safe learning environment.
  3. Collaborate with nursing faculty, allied health faculty, and the dean to determine specific needs and requests for achieving learning outcomes.
- C. Clinical Operations Specialist
  1. Periodically review simulation-based activities to ensure all are feasible and appropriately designed based on programmatic resources.
  2. Implement plans that coordinate and align resources of the simulation-based education (SBE) program to achieve learning objectives.
  3. Provide personnel with appropriate expertise to support and sustain the SBE program.
  4. Collaborate with faculty to coordinate the preparation and implementation of interprofessional healthcare simulations.
- D. Student
  1. Maintain professional integrity related to simulation.
  2. Read and seek clarification of:
    - a. Hartnell College Student Handbook.
    - b. Hartnell College NHS Policy and Procedure Manual.
    - c. Assigned coursework related to simulation.
  3. Participate in simulation activities.
  4. Discuss with faculty of record any specific learning requests, needs, or concerns.
  5. Sign the Confidentiality and Videotaping Recording Agreement.
  6. Arrive on time and prepared for the clinical simulation activity.

---

## POLICY

### I. POLICY STATEMENT

The Hartnell College NHS Program offers a high-fidelity simulation (HFS) learning environment that provides alternative clinical experiences. The use of this teaching and learning methodology offers faculty-facilitated clinical experiences for students during all

levels of the NHS programs.

## **II. PROCEDURE**

- A. Each learner participant has Confidentiality Videotaping Recording Agreement on file for each academic year. Adherence to the confidentiality agreement will be strictly enforced. Breach of confidentiality may be grounds for dismissal from the program. Non-participant observers are also required to sign a confidentiality agreement and adhere to the same standards of respect and professionalism.
- B. All simulation and debriefing sessions may be recorded by authorized personnel. Any recording or photos by students is prohibited.
- C. Students may be videotaped/filmed/photographed for marketing/publicity by the NHS department and Hartnell College without compensation.
- D. Learner orientation to HFS and to necessary equipment is required prior to assigned participation. The student is expected to come to simulation prepared with pre-briefing material completed and ready to be submitted.
- E. Clinical attire and a lab coat for students and faculty are required for participation in HFS unless otherwise communicated by NHS faculty. The student is expected to bring standard clinical equipment to simulation (e.g. stethoscope, watch).
- F. Use of HFS laboratory is coordinated through the Clinical Operations Specialist
- G. Collaboration and planning are recommended one week prior to scheduled simulation in efforts to promote optimal learning and preparation time.
- H. Faculty not in attendance will receive necessary feedback on learner preparedness, attendance, and clinical behavior.
- I. Evaluation of simulation experiences is completed by participating students at least annually and when requested by facilitator or other nursing faculty.

## **III. STANDARDS FOR STUDENT PERFORMANCE IN SIMULATION**

- A. Be accountable for all previous knowledge and skills learned in the NHS program.
- B. Maintain respect for self and others.
- C. Enjoy, engage, and participate in the process. Be open to roleplaying and new experiences.
- D. Expect to make mistakes and to learn from them.
- E. Follow guidelines presented in orientation.
- F. Exhibit professional behaviors while interacting with patient, peers, and faculty.
- G. Follow established standards of care for nursing and respiratory care.

Original: 11/2011  
Reviewed/Revised: 04/14; 06/14; 06/18; 06/19; 10/20  
Approved: 06/04/14; 07/14, 05/15, 09/15, 10/16. 9/19

## 13: CONFIDENTIALITY AND PROFESSIONALISM

### PURPOSE

To establish guidelines for professional conduct in all aspects of communication and interactions related to Hartnell College Nursing and Health Sciences.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Annually align NHS with Hartnell College Administrative and Board Policies
  - 4. Collaborate with faculty regarding content.
- B. NHS Faculty and Staff
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Collaborate to determine specific needs and requests regarding professionalism and related behaviors.
- C. Student
  - 1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. Hartnell College NHS Policy and Procedure Manual.
  - 2. Collaborate with faculty of record to discuss specific learning needs.

---

## POLICY

### I. POLICY STATEMENT

Individuals associated with the NHS community (students, staff, and faculty) are always expected to conduct themselves in a professional manner. Written and verbal communications are held to professional standards. Confidentiality and academic integrity standards are upheld.

### II. PROCEDURE

- A. Faculty and students maintain professional conduct in the classroom and locations designated for learning.
- B. Clarity and validation are sought when making decisions related to professionalism and issues of privacy.
- C. Professional guidelines for engaging in online social networking, electronic mail, and other means of public communication are shared with students.
- D. Curricula contain educational programs designed to increase awareness about incivility in healthcare and repercussions of lateral violence.
- E. Professionalism
  - 1. According to the Code of Academic and Clinical Conduct section of the NHS Handbook, professionalism is represented in the following areas:
    - a. Academic integrity: accountability for actions
    - b. Academic dishonesty: work must be the result of the student's own thought, and effort
    - c. Professional Code of Ethics: ethical, caring behaviors and respect for persons must be displayed

2. Professional responsibilities include, but are not limited to the following:
  - a. Professional appearance: adhering to dress code policy
  - b. Professional behavior: holding oneself to high standards; embracing responsibility; demonstrating caring behaviors; respecting patients, faculty, staff, or students (no incivility); communicating in a professional manor; possessing a teachable and accountable spirit
  - c. Reflective practice: reflecting on what went well/poorly and make needed adjustments to prevent problems next time; ability to receive constructive feedback and grow as a result
  - d. Preparedness: showing up on time and prepared for class/clinical
  - e. Performance: meeting standards of care/safety; demonstrating a commitment to excellence
- F. Confidentiality
  1. Privacy towards individuals encountered in healthcare settings is maintained in accordance with the Health Insurance Portability and Accountability Act (HIPAA). Refer to <http://www.cms.gov/HIPAAgenInfo/Downloads/HIPAALaw.pdf>
  2. Privacy towards students is maintained in accordance with the Family Educational Rights and Privacy Act (FERPA). Refer to <http://www2.ed.gov/policy/gen/guid/pfco/ferpa/index.html>
  3. No identifiable information, including any portion of names, birthdates, medical record numbers, diagnosis, addresses, gender, race, ethnicity, photographs, and any other factor or situation of potential identification, can be removed, discussed, or communicated in any way. Communication includes face-to-face, phone, or electronic interactions. Communication with faculty and health care providers with a direct need for access to information is acceptable.
  4. Federal, state, and local laws and agency policies regulate the sharing of confidential information.
- G. Social Networks
  1. Sharing and posting personal information on social media, including photographs and screen names, should reflect professionalism and comply with college policies.
  2. Using social networking sites for posting, referencing, or disclosing information detailed in Procedure F is prohibited and may result in academic failure.
  3. Social network interactions between or involving current students and NHS faculty/staff is prohibited.
- H. Approved communication channels between faculty and staff are established by Hartnell College. Methods of communication include faculty office hours, college email, and course management systems.
- I. Acts of academic incivility are defined as “rude or disruptive behaviors which often result in psychological or physiological distress for the people involved – and if left unaddressed, may progress into threatening situations” (Clark, 2011). Examples include the following:
  1. Disruptive behaviors: phones, texting, computers, side conversations
  2. Rude remarks, sarcasm, vulgarity, cyber-bullying
  3. Lack of respect and regard for others
  4. Intolerance of cultural, ethnic, class differences



5. Pressuring faculty to agree to demands
  6. Speaking negatively about students, faculty, and NHS
- J. Incivility can occur in any location associated with the delivery of NHS education, including the “live” or virtual classroom or clinical setting (Clark, 2011)
  - K. The behavioral code of conduct for Hartnell College and NHS requires that all members of the health care community treat colleagues, students, and patients with dignity and respect. Any form of harassment, disrespect, or threatening action is not tolerated and may result in academic failure (ANA Code of Ethics). Members of the community must “communicate openly and intentionally and work together to create a culture of civility” (Clark, 2011).
  - L. Horizontal (Lateral) Violence is harmful behavior, attitudes, actions, or words directed toward one individual by another individual that controls, denigrates, or injures the dignity of another.
  - M. The conflict resolution policy guides responses to issues of incivility and lateral violence.

References:

- Clark, C. (2011). *Addressing incivility and bullying in nursing education: Creating communities of civility*. Webinar presented on 10/10/2011 by the National League for Nursing.
- U.S. Department of Education. (2014) *Family educational rights and privacy act regulations*. Retrieved from <http://www2.ed.gov/policy/gen/guid/fpco/pdf/ferparegs.pdf>
- U.S. Department of Health & Human Services (2011). *Health information privacy*. Retrieved from [www.hhs.gov/ocr/hipaa/finalreg.html](http://www.hhs.gov/ocr/hipaa/finalreg.html)

Original: 11/28/11

Reviewed/Revised: 04/29/14; 06/14; 06/18; 10/20

Approved: 12/11; 07/14, 04/15, 09/15, 10/16. 9/19

## 14: GRADUATION AND PINNING

### **PURPOSE**

To establish guidelines for planning and attending the pinning and Hartnell College graduation ceremonies.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
  - 3. Annually review and approve the plans for the pinning ceremony.
- B. Lead Program Coordinator
  - 1. Review budget and billing processes with faculty co-chairs
  - 2. Retain fiscal management and responsibility for submission of expenses.
- C. Assistant Directors of Nursing and Director of RCP
  - 1. Chair the Pinning Committee.
  - 2. Collaborate with students, faculty, and the dean to plan and conduct the pinning ceremony.
  - 3. Review budget and billing processes with lead program coordinator
- D. NHS Faculty
  - 1. Annually review the NHS Program Policy and Procedure Manual.
  - 2. Participate in the planning and attend the pinning ceremony.
  - 3. Act as faculty liaisons to students in the graduating classes.
- E. Students
  - 1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. Hartnell College NHS Program Policy and Procedure Manual.
  - 2. Participate in the planning of the pinning ceremony.
  - 3. Attend the pinning and Hartnell College graduation ceremonies.

---

## **POLICY**

### **I. POLICY STATEMENT**

Students in the Hartnell College NHS Program are encouraged to participate in annual pinning and graduation ceremonies. The traditional Pinning Ceremony marks the students' passage into the professions of nursing and respiratory care.

### **II. PROCEDURE**

- A. The Assistant Directors of Nursing and Director of RCP have lead responsibility for planning and conducting the pinning ceremony. The Assistant Directors of Nursing and Director of RCP acts as liaisons to the Pinning Committee.
- B. The Pinning Committee, composed of representatives from all NHS classes, is elected by the student body or is appointed by the graduating RN, VN, and RCP class officers. The Pinning Committee is co-chaired by graduating students and the Assistant Directors of Nursing or Director of RCP.
- C. Pinning Committee chairs conduct planning sessions, post committee minutes, and

- update the Pinning Committee binder on a regular basis.
- D. Subcommittees include, but are not limited to the following: Decorations, Clean up, Program and Yearbook, Audiovisual, Volunteers, Reception, and Public Relations.
- E. The Pinning Ceremony usually occurs the day of the Hartnell College graduation ceremony.
- F. The Pinning Committee chair or designee must contact the president and keynote speaker at least two months in advance and request his/her participation in the ceremony. The Pinning Committee chair must obtain approved written biographies of the college president and/or other speakers that are read as introductions at the ceremony.
- G. All publications, letters, requests, speeches, and fundraising activities must be reviewed by the assistant directors of nursing and the director of RCP and approved by the dean and Hartnell College.
- H. Participants in the Pinning Ceremony are expected to attend the Hartnell College graduation ceremony.

### **III. SITE**

- A. The Pinning site location is reserved 5-6 months in advance by the assistant directors of nursing and/or director of respiratory care. An equipment list that includes chairs, tables, room set-up, audiovisual (AV) equipment, musical instruments, lighting, flags, podium, trash cans, etc., is submitted with the facilities request form. The request forms are obtained on the Hartnell College website. Submission of the room reservation and equipment list is the responsibility of the assistant directors of nursing and director of RCP.
- B. Two weeks before the event, the Pinning Committee audiovisual subcommittee members collaborate with the pinning site location managers. Traditionally, a podium, sound system, screen and projector are required. Customary AV fees-for-service may be paid by the NHS Program. Tablecloths with NHS insignia are available for use.
- C. Costs for decorations (optional) are the responsibility of the graduating classes.
- D. Costs associated with performing musicians (optional) are the responsibility of the graduating classes.
- E. Only seats for guests with special needs may be reserved.

### **IV. PINS, STOLES, LAMPS, ROSES**

- A. The Hartnell Program VN, RN, and RCP pins, stoles, and lamps are ordered from preapproved vendors by the assistant directors of nursing and director of RCP. Under the direction of supervising faculty, the Pinning Committee Chair supplies graduating students with ordering information at least three months before graduation and tracks the orders. NHS does not assume responsibility for misplaced or incorrect orders. Students are responsible for the cost of their pins, stoles, and lamps.
- B. Graduates may borrow stoles and lamps for use during the pinning and Hartnell College graduation ceremonies. Personal checks covering the replacement costs of the borrowed items are collected by NHS prior to the ceremony. Uncashed checks are returned when borrowed items are turned in.
- C. NHS purchases one long-stemmed white rose with burgundy and gold ribbons for

each graduate. The ordering and delivery of the roses is the responsibility of the faculty chair.

**V. INVITATIONS, PROGRAMS, STUDENT YEARBOOKS**

- A. NHS is responsible for the cost, designing, ordering, and distribution of the invitations. Invitations are ordered two months before the event.
  - 1. The assistant directors of nursing and director of RCP assume responsibility for updating the honored guest lists.
- B. Editing and printing of the program is the responsibility of the assistant directors of nursing and director of RCP. NHS covers the cost of the program.
- C. Student yearbook design, printing, and costs are responsibilities of the graduating classes.
- D. Costs and arrangements for photographs are responsibilities of the graduating classes.

**VI. ATTIRE**

- A. Graduates wear graduation gowns over their clothing. Gowns are purchased at the Hartnell College Bookstore. Shoes must not pose a risk to fall. Clothing and appearance should reflect professionalism.
- B. Honors cords, mortarboards, leis, and other graduation regalia are worn during the Hartnell College graduation ceremony, not during the Pinning Ceremony.
- C. Student hosts/ushers wear lab coats over professional attire as determined by the committee.

**VII. TRADITIONAL PINNING CEREMONY**

- A. Students file in from the back alphabetically, end of the alphabet first.
- B. Master of Ceremonies opens the ceremony and initially welcomes the honored guests.
- C. Recognition of the Flag, by pledge of allegiance or national anthem will be included.
- D. The Dean of Academic Affairs: Nursing and Health Sciences or designee welcomes all and explains the meaning of pinning.
- E. The Hartnell College president or designee speaks, often about the programs and student success.
- F. Class presidents share the classes' educational experiences.
- G. A keynote speaker may be selected by the graduates.
- H. Faculty members, chosen by the graduates, read the names of the graduates, place the stole with the pin on each graduate, present each with the lamp or plaque, and hand each a rose.
- I. Graduates proceed to the aisles, light their lamps, and recite traditional pledges, led by the dean or designated nursing faculty.
- J. A cake and coffee reception for graduates, volunteers, and invited guests may be held after the pinning ceremony. NHS assumes the costs of the reception. The assistant directors of nursing and director of RCP are responsible for the ordering and delivery of the refreshments

Original: 4/07

Reviewed/Revised: 6/12; 05/14; 06/18 10/19;3/21

Approved: 06/12; 05/12/14; 07/14, 05/15, 09/15, 10/16

## 15: GIFTS FROM STUDENTS

### **PURPOSE**

To establish guidelines for faculty and staff regarding the acceptance of gifts from students.

### **RESPONSIBILITY**

- A. Dean of Academic Affairs: Nursing and Health Sciences
- B. Annually review the NHS Policy and Procedure Manual.
- C. Annually align NHS policies with Hartnell College administrative and board policies.
- D. NHS Faculty
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Communicate to students that faculty may not accept major gifts.
- E. Student
  - 1. Read and seek clarification of:
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. Hartnell College NHS Policy and Procedure Manual
  - 2. Honor the policy.

---

## **POLICY**

### **I. POLICY STATEMENT**

The Hartnell College NHS faculty and staff does not believe in accepting major gifts from students.

### **II. PROCEDURE**

- A. Students are encouraged to express gratitude by donating to a community program of their choice.
- B. Faculty and staff may accept minor gifts from students, such as group pictures, class memorabilia, and/or office items.
- C. Faculty and staff may not accept major gifts from students exceeding \$25.00.

Original: 11/21/2013

Reviewed/Revised: 12/13; 01/14; 02/14; 06/14; 06/18; 06/19; 10/20

Approved: 01/14; 02/14; 06/04/14; 07/14, 05/15, 09/15, 10/16, 9/19

## 16: INVASIVE PROCEDURES

### PURPOSE

To establish standardization of processes and structure for performing invasive procedures related to clinical skills on adult volunteers in the NHS learning laboratories.

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Annually align NHS policies with Hartnell College administrative and board policies.
- B. NHS Faculty
  - 1. Annually review the NHS Policy and Procedure Manual.
- C. Faculty of Record
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Review procedure to be performed with student and volunteer
- D. Student
  - 1. Read and seek clarification of
    - a. Hartnell College Catalog and academic policies and procedures.
    - b. Hartnell College NHS Policy and Procedure Manual.

---

## POLICY

### I. POLICY STATEMENT

At the discretion of the NHS faculty, NHS students may be provided supervised opportunities in laboratory environments. Students are expected to exercise safe protocols when performing invasive procedures and to adhere to Hartnell College policies and procedures.

### II. PROCEDURE

- A. Participation in invasive skills is voluntary and requires direct, in person, supervision by a Hartnell College faculty member.
- B. Students provide live subject volunteers.
- C. Students review the selected competency with the faculty member prior to performing the procedure. Competency review includes, but is not limited to
  - 1. student knowledge and practice of sterile procedures, and safe disposal of sharps, blood and body fluids, and contaminated supplies and equipment;
  - 2. identification of indications, contraindications, and complications of the chosen procedure;
  - 3. evidence of successful completion of competency prior to performing the procedure;
  - 4. practice session immediately prior to performing skill on live subject.
- D. Written consent by live human subject is given to the supervising faculty member
  - 1. Supervising faculty must witness signatures on consent form after the process of consent has been reviewed with both student and volunteer.

- a. Review includes ethical rights of volunteers and information about the procedure including contraindications and possible complications, contraindications.
- E. Invasive procedures are limited to two attempts per procedure.
  - 1. Second attempts are at the discretion of the volunteer and/or the supervising faculty.
- F. Supplies for supervised invasive procedures are provided or distributed by NHS faculty, if available.

ORIG.DATE: 04/16; 06/18

REVIEWED/REVISED: 06/19, 4/20; 10/20

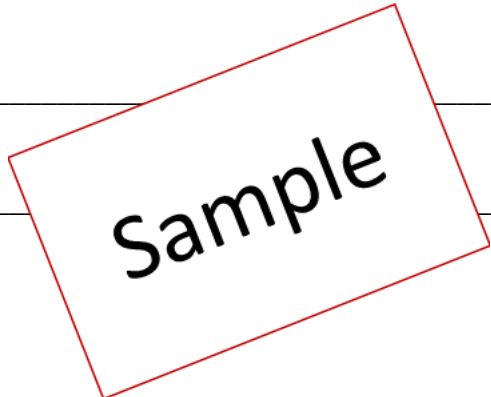
APPROVED: 04/16, 10/16

**Nursing and Health Sciences**  
**Consent for Invasive Procedure**

I freely volunteer to have an invasive procedure performed by a Hartnell College NHS student. I understand my rights as a volunteer. Also, I understand that my participation is for educational purposes.

I declare that I know of no allergy to latex or have health problems that prohibit my participation in this learning exercise. I understand that the procedure will be supervised by a Hartnell College NHS faculty member expert in the protocol. I understand that there are inherent risks with any invasive procedure including, but not limited to, infection, bruising, bleeding, or pain. I declare that my participation is voluntary and I will not hold Hartnell College or any agent of the college liable for injury resulting from my participation.

|                                |      |                                       |      |
|--------------------------------|------|---------------------------------------|------|
| _____                          |      | _____                                 |      |
| Student Volunteer (print name) |      | Student Performing Skill (print name) |      |
| _____                          |      |                                       |      |
| Signature                      |      |                                       |      |
| _____                          |      |                                       |      |
| Date                           | Time | Time                                  | Time |
| _____                          |      |                                       |      |
| Faculty Witness (signature)    |      | Date                                  | Time |



Copies to students and student files

ORIG.DATE: 04/16  
REVIEWED/REVISED: 06/18; 06/19  
APPROVED: 04/16



## 17: USE OF ATI IN NURSING CURRICULUM

### PURPOSE

To assure consistency in use of Assessment Technologies Institute (ATI) in each content area across the curriculum. To communicate expectations clearly with students and faculty

### RESPONSIBILITY

- A. Dean of Academic Affairs: Nursing and Health Sciences (NHS)
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Align NHS with Hartnell College Administrative and Board Policies
  - 3. Assign qualified faculty (content experts) for content review.
- B. Nursing Faculty only
  - 1. Annually review the NHS Policy and Procedure Manual.
  - 2. Identify qualified faculty (content experts) for content review.
  - 3. Participate in curriculum revision and function as a member of the curriculum committee.
  - 4. Utilize ATI faculty resources for integration and faculty development.
- C. Nursing Student
  - 1. To purchase ATI comprehensive package and keep current with payments throughout program
  - 2. To complete assignments
  - 3. To remediate practice and proctored assessments
  - 4. To demonstrate readiness for NCLEX prior to sitting for the exam.

---

## POLICY

### D. POLICY STATEMENT

The nursing faculty and students commit to using Assessment Technologies Institute (ATI) assessment driven review program to enhance student success. The comprehensive program includes assessments, remediation, tutorials, lessons, and activities to prepare students efficiently as well as increase confidence and familiarity with nursing content.

### E. PROCEDURE

- 1. Curriculum review occurs throughout the academic year and discussed at Curriculum Committee meetings.
- 2. Curriculum alignment with ATI expertes will be utilized when the curriculum is updated.
- 3. The content expert is consulted for planning and placement of ATI assignments throughout the curriculum.
- 4. Students complete the **ATI Plan - Student Orientation \*NEW\*** to learn the basics of ATI. They also attend a 30 minute live webinar with ATI specialists to walk them through accessing the modules, tutorials, assessments, etc.
- 5. ATI provides online review modules that include written and video materials in all content areas. Students are encouraged to use these modules to supplement course work and instructors may assign these during the course and/or as part of active learning/remediation following assessments.

6. ATI offers unique Tutorials that teach nursing students how to think like a nurse; how to take a nursing assessment and how to make sound clinical decisions.
  7. **Nurse Logic** is an excellent way to learn the basics of how nurses think and make decisions.
  8. **Learning System** offers practice tests in specific nursing content areas that allow students to apply the valuable learning tools from Nurse Logic. Features are embedded in the Tutorials that help students gain an understanding of the content, such as a Hint Button, a Talking Glossary, and a Critical Thinking Guide.
  9. **Achieve** offers modules to help with classroom, test-taking, and clinical preparation.
  10. **Nurse's Touch** is another tutorial that is divided into sections. These modules provide guidance for students in caring for themselves, role-modeling appropriate professional and at-the bedside behaviors, as well as introducing them to the technical side of nursing care and documentation.
    - a. Professional Communication,
    - b. Wellness and Self-care,
    - c. Informatics and Technology,
    - d. Becoming a Professional Nurse.
- G. ATI offers simulations that immerse the student in the real life scenario.
1. **Civility Mentor** and **The Communicator** focus on professional communication and interactions as well as providing different bedside scenarios to promote safety and wellness.
  2. **Video Case Studies**, students are asked to problem-solve and think critically and then reflect on their decisions.
  3. **The Leader** offers 5 case studies that ask students to integrate concepts learned when providing assessments and interventions in real life situations.
  4. **Real Life Scenarios** focus on medical-surgical, pediatric, maternal-newborn, and mental health nursing scenarios and case studies where students must integrate concepts and utilize clinical judgment and reasoning when presented with certain case scenarios.
- H. ATI also provides tutorials
1. **Pharmacology Made Easy** and **Active Stack Pharmacology Flashcards** to assist students with concepts in Pharmacology as well as medication classifications.
  2. The **Dosage Calculation and Safe Medication Administration Module** offers practice opportunities for dosage calculations from simple to complex.
  3. **Skills Modules** provide students with videos of nursing interventions, examples of documentation, evidence-based practice resources, and step-by-step guides for performing skills safely and competently.
  4. The **HealthAssess** simulation module contains detailed assessment and practice simulations in which students have the opportunity to document in the **EHR** (electronic health record) which communicates with the simulations or can be used as a stand alone documentation tool for case studies or clinical patients.
- I. The student's **E-books** are available in the same location as the tutorials.

- J. **Active Learning Templates** are another tool available to facilitate learning in terms of concepts, medications, assessments, and interventions.
- K. **Live Sessions** are included and required as part of the nursing program
  - 1. During program, test taking strategies seminar.
  - 2. End of program: NCLEX preparation.
- L. End of program NCLEX Preparation includes capstone and virtual ATI coach, students are expected to complete these programs and earn the “green light” to test for NCLEX, prior to testing.
- M. Standardized Assessments will help the student to identify what they know as well as areas requiring active learning/remediation. There are practice assessments available to the student and standardized proctored assessments that may be scheduled during courses.
  - 1. Practice Assessments will be used prior to proctored assessments
  - 2. Students will be expected to remediate practice assessments prior to the proctored assessment.
- N. Active Learning/Remediation is a process of reviewing content in an area that was not learned or not fully understood as demonstrated on an assessment. It is intended to help the student review important information to be successful in courses and on the NCLEX.. The student’s individual performance profile will contain a listing of the topics to review. The student can remediate, using the Focused Review which contains links to ATI books, media clips and active learning templates.
- O. ATI does not support the use of proctored exams as high stakes testing.
- P. Retakes of proctored assessments may only be utilized if students complete remediation of the previously offered proctored exam.
- Q. Instructors retain the academic freedom to determine how performance in ATI lessons, modules, and assessments is scored, and the type of remediation required.
  - 1. Provided that ATI products are used effectively in accordance with guidance from ATI educators and Hartnell Content Expert faculty.
  - 2. ATI recommends that proctored assessments do not count for more than 10% of the course grade. However, at faculty discretion an assessment may replace a faculty written exam.
- R. Students are to sign the following acknowledgement upon receipt of ATI products.

Original: 10/05/2020  
REVIEWED/REVISED: 4/2021



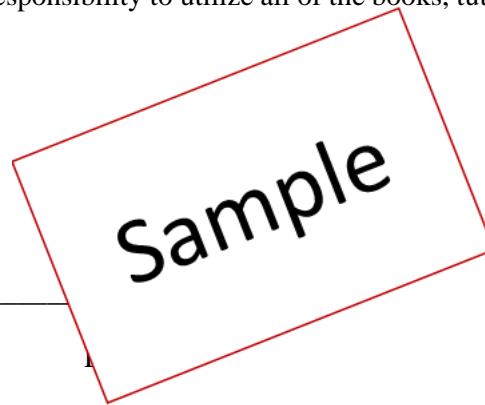
## Student Acknowledgement

Initial all and sign below:

\_\_\_\_\_ I have received a copy of and have read the ATI Assessment and Review Policy

\_\_\_\_\_ I understand that it is my responsibility to utilize all of the books, tutorials and online resources available from ATI.

\_\_\_\_\_  
Student printed name



\_\_\_\_\_  
Student signature

Original: 10/05/2020  
REVIEWED/REVISED: 4/2021