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

Because of the challenges related to the pandemic, dates, times, and contact information included in the 2020-2021 Nursing and Allied Health Handbook are subject to change as new information comes to light and updated guidance is received.

Your academic journey is bound to be quite different from what you have experienced or expected it to be. There will be a scheduled mix of on- and off-campus instruction. It is highly likely that there will be changes to course scheduling and student displacements from clinical sites. Without a doubt, managing complications brought about by COVID-19 while engaged in a rigorous academic program is without precedent and will require flexibility, cooperation, and patience from all.

Over the next several months, as our communities stabilize from the COVID-19 pandemic and stay-at-home restrictions are lifted, Hartnell College will bring students, faculty, staff and visitors back to our campuses. We ask that you advocate for public health by adhering to and promoting the CDC guidelines to mitigate the spread of the pandemic, which will make return to campus possible.

Stay well.
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2020-2021 Nursing and Allied Health Student Handbook
CONGRATULATIONS AND WELCOME

Congratulations on your participation in the Hartnell College Nursing and Allied Health programs. We applaud your academic efforts and value your personal attributes. We are fortunate to share your educational experience. We ask you to commit to be extraordinary.

Hartnell Nursing and Allied Health has an important vision. We strive to be “an influential resource for the health and well-being of the community.” We are value driven. Every experience in the classroom, community, and at the bedside is founded on our five core values of Comportment, Competence, Caring, Collaboration, and Curiosity. If we are to achieve our vision and demonstrate our 5Cs, everyone needs to embrace excellence and accountability for advancing the art and science of healthcare professions.

The NAH Handbook and the Policy and Procedure Manual include information you need to be successful. The documents have been prepared with safety in mind for everyone: you, the NAH faculty, clinical and community partners, and the individuals for whom you provide care.

Your academic journey will not be easy or predictable, given the uncertainties related to the pandemic. Your journey will be unique and incomparable to other educational or professional journeys you have experienced. Together, we will need resilience, perseverance, and resolve to do what is necessary to mitigate risk as you work to achieve your goal.

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

Continued success!
Debra Kaczmar PhD, RN, CNE
Dean of Academic Affairs: Nursing and Allied Health
The Nursing & Allied Health office is staffed from 0800-1700 Monday through Friday.

**Full-time Faculty:**

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### Hartnell College Academic Counselor: Nursing and Allied Health

| Elizabeth Estrella, EdD | NAH Academic Counselor | 755.68206 | lestrell@hartnell.edu |

To ensure a quality educational plan, please contact the main counseling office at 831.755.6820 for an appointment with any academic counselor.
## CLINICAL AGENCIES AND PARTNERSHIPS

<table>
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<th>Partner</th>
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<th>City/State</th>
<th>Phone</th>
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<tr>
<td>Alisal Health Center</td>
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</tr>
<tr>
<td>Santa Clara Valley Medical Center</td>
<td>751 S Bascom Ave</td>
<td>San Jose CA 95128</td>
<td>408.885.5000</td>
</tr>
<tr>
<td>Seaside Family Health Center</td>
<td>1150 Fremont Boulevard</td>
<td>Seaside, CA 93955</td>
<td>831.899.8100</td>
</tr>
<tr>
<td>Sierra Vista Regional Medical Center</td>
<td>1010 Murray Avenue</td>
<td>San Luis Obispo, CA 93405</td>
<td>805.546.7600</td>
</tr>
<tr>
<td>St. Louise Regional Hospital</td>
<td>9400 No Name Uno</td>
<td>Gilroy, CA 95020</td>
<td>408.848.2000</td>
</tr>
<tr>
<td>Stanford Health Care/ Stanford Medical Center</td>
<td>300 Pasteur Dr.</td>
<td>Stanford, CA, 94305</td>
<td>650.723.4000</td>
</tr>
<tr>
<td>Sun Street Center</td>
<td>11 Peach Drive</td>
<td>Salinas, CA 93901</td>
<td>831.753.5144</td>
</tr>
<tr>
<td>Sutter Maternity and Surgical Center</td>
<td>2900 Chanticleer Ave.</td>
<td>Santa Cruz, CA 95065</td>
<td>831.477.2200</td>
</tr>
<tr>
<td>VA Medical Center -Palo Alto</td>
<td>3801 Miranda Ave</td>
<td>Palo Alto, CA 94304</td>
<td>650.493.5000</td>
</tr>
<tr>
<td>WIC Nutrition Program</td>
<td>632 East Alisal Street</td>
<td>Salinas, CA 93905</td>
<td>831.393.3251</td>
</tr>
<tr>
<td>Windsor Gardens Rehab. Center of Salinas</td>
<td>637 E. Romie Lane</td>
<td>Salinas, CA 93901</td>
<td>831.424.0687</td>
</tr>
<tr>
<td>Windsor, The Ridge Rehab. Center</td>
<td>350 Iris Drive</td>
<td>Salinas, CA 93905</td>
<td>831.449.1515</td>
</tr>
</tbody>
</table>
MISSION, VISION, VALUES, AND PHILOSOPHY

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

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

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

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

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

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

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

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

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

**INTERPROFESSIONAL CORE COMPETENCIES**
Interprofessional core competencies include four domains, essential values for healthcare professionals:

1. **Values/ethics for interprofessional practice**: Work with individuals of other professions to maintain a climate of mutual respect and shared values (IPEC, 2016)

2. **Roles/responsibilities**: Use the knowledge of one’s own role and those of other professions to appropriately assess and address the healthcare needs of the clients and populations served. Of patients and to promote and advance the health of populations (IPEC, 2016).

3. **Interprofessional communication**: Communicate with clients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and the treatment of disease. (IPEC, 2016)

4. **Teams and teamwork**: Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan and deliver client/population-centered care that is safe, timely, efficient, effective, and equitable (IPEC, 2016; Schroeder, Malone, McCabe, & Lipman, 2018).
NURSING AND ALLIED HEALTH PHILOSOPHY

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

Nursing and Allied Health faculty and staff strive for an inclusive academic environment where students, faculty, and staff flourish. Faculty is responsive to the unique needs of each learner. Celebrating strengths and past experiences of students and faculty alike fortifies and enhances the learning environment. Faculty encourages student engagement by using adult education theories and experiential instructional methods, including clinical scenarios, high and low fidelity simulation, application of theory to clinical practice, interprofessional learning activities, and reflective journaling. Faculty believes that modeling professional behaviors and promoting personal growth transforms students into graduates who are prepared for entry-level positions within their scope of practice and are ready to engage in leadership and lifelong learning. Values guide curriculum development and the way in which faculty interact with students.

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

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

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


National League for Nursing (2020). *Core values*. Retrieved from [NLN core values](#).


ASSOCIATE DEGREE IN SCIENCE, REGISTERED NURSING

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

In 2018, Hartnell and three other pre-licensure programs participated in the Reframing Nursing Education Project sponsored by the Kaiser-Permanente Fund for Health Education and Health Impact. The goal of the project was to reframe nursing education to better prepare nurses for work in an expanded number of settings, both in and beyond acute care. Hartnell College’s new 5-C curriculum will be implemented in fall 2020. The curriculum has an increased focus on wellness and illness prevention and requires an increased use of technology, data, and clinical judgement. In 2020, the low-unit course of study will be showcased nationally at the 2020 Organization of Associate Degree in Nursing Annual Conference.

CONCEPTUAL FRAMEWORK:

Foundations of the 5C curriculum

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

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

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

Assessment

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

Diagnosis

The nursing diagnosis is the nurse’s clinical judgment about the individual’s response to actual or potential health conditions or needs. For example, the nursing diagnosis may reflect that the individual is in pain as manifested by anxiety, immobility, poor nutrition, and conflict within the family, or that the pain has the potential to cause complications, such as respiratory infection secondary to immobilization. The nursing diagnosis is the basis for the nurse’s plan of care.
Outcomes/Planning
Based on assessment and diagnosis, the nurse sets measurable and achievable short- and long-range goals—or desired outcomes—for each person. An example of a short-term goal is moving from bed to chair at least three times per day to improve mobility. An example of a long-term goal is attainment of independent mobility within one month. Assessment data, nursing diagnosis, and goals are communicated to involved healthcare professionals and incorporated in the plan of care.

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

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

Metaparadigms of Nursing
The Metaparadigms of Nursing are components of the conceptual framework for Hartnell’s Associate Degree, Science, in Nursing:

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

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

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

- **Nursing** is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, facilitation of healing, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individual families, groups, communities, and populations. (ANA, 2015).


ADN PROGRAM OUTCOMES:

End of Program Student Learning Outcomes (EOPSLOs)

Upon successful completion of the Hartnell College Associate Degree in Science, Nursing Program, a graduate will

1. incorporate leadership, management, and legal-ethical principles to guide practice as a professional nurse. (I. COMPORTMENT)

2. apply increasingly complex clinical judgment and theoretical concepts when providing safe nursing care to diverse individuals across the lifespan in a variety of settings. (II. COMPETENCE)

3. integrate caring into relationships and nursing interventions that demonstrate sensitivity to the values of others. (III. CARING)

4. communicate and collaborate with members of the interprofessional healthcare team to coordinate care and optimize health outcomes. (IV. COLLABORATION)

5. model a spirit of inquiry when examining data, challenging the status quo, questioning underlying assumptions, and offering new insights to improve quality of care. (V. CURIOSITY)

The EOPSLOs were formulated with consideration of regulatory imperatives; national licensure examination topics; national accreditation and professional standards; best practices in nursing education; local stakeholder input; Hartnell College’s vision, mission, and values; and current/projected trends in healthcare.

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

<table>
<thead>
<tr>
<th>Nursing ADN Program: EOPSLO</th>
<th>HC: Institutional Student Learning Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Incorporate leadership, management, and legal-ethical principles to guide practice as a professional nurse.</td>
<td>Personal Growth: Students will demonstrate ethical decision making, goal setting, and positive lifestyle choices.</td>
</tr>
<tr>
<td>II. Apply increasingly complex clinical judgment and theoretical concepts when providing safe nursing care to diverse individuals across the lifespan in a variety of settings.</td>
<td>Inquiry and Reason: Students will use analytical, creative, and critical thinking to evaluate ideas, predict outcomes and form conclusions and solutions.</td>
</tr>
<tr>
<td>III. Integrate caring into relationships and nursing interventions that demonstrate sensitivity to the values of others.</td>
<td>Global Engagement: Students will demonstrate global citizenship via knowledge of and interaction with civic participation, diverse cultures and people, and social justice advocacy.</td>
</tr>
<tr>
<td>IV. Communicate and collaborate with members of the interprofessional healthcare team to coordinate care and optimize health outcomes.</td>
<td>Communication: Students will effectively communicate to varied audiences via spoken, written, visual and other forms of communication.</td>
</tr>
</tbody>
</table>
V. Model a spirit of inquiry when examining data, challenging the status quo, questioning underlying assumptions, and offering new insights to improve quality of care.

Information Competency: Students will define information needs, utilizing appropriate technology and resources to access information efficiently and effectively, evaluate information critically, and use information ethically.

There is no specific ADN EOPSLO that correlates with Aesthetic Analysis and Application. Students meet this outcome in pre-requisite humanities courses and in their personal interactions.

Aesthetic Analysis and Application: Students will analyze, conceptualize, evaluate, and/or synthesize creative and artistic expressions applied via contents such as cultures and disciplines.

COURSE LEVELING AND OUTCOMES

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

Semester Levels

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

- **Level 1/Semester 1:** Foundational knowledge of health, illness, and professional concepts, clinical judgment, and pharmacological principles needed to care for clients across the lifespan in a variety of settings. This level includes instruction in nursing assessment and basic psychomotor skills.
- **Level 2/Semester 2:** Continued development of clinical judgment, theoretical knowledge, and technical knowledge in the provision of nursing care of individuals and families with stable conditions across the lifespan in acute care and community settings.
- **Level 3/Semester 3:** Application of clinical judgment, theoretical knowledge, and technical knowledge in the provision of nursing care to individuals and families with complex physiological and psychological conditions in acute care and community settings.
- **Level 4/Semester 4:** Integration of all theoretical knowledge and technical
knowledge in the provision of nursing care at an advanced level to prepare for practice as a Registered Nurse. Students care for individuals with potential or actual multi-system failure and assume the roles of team leader and care coordinator.

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

**Leveled, End of Program Student Learning Outcomes by Semester**

<table>
<thead>
<tr>
<th>EOPSLO</th>
<th>Level 1/Sem 1</th>
<th>Level 2/Sem 2</th>
<th>Level 3/Sem 3</th>
<th>Level 4/Sem 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. COMPORTMENT</td>
<td>Identify and use legal-ethical, leadership, and management principles that focus on professional role acquisition.</td>
<td>Illustrate nursing actions consistent legal-ethical, leadership, and management principles in a variety of settings.</td>
<td>Demonstrate the ability to manage the care of multiple clients and the community “as a client,” using legal-ethical principles.</td>
<td>Incorporate leadership, management, and legal-ethical principles to guide practice as a professional nurse.</td>
</tr>
<tr>
<td>II. COMPETENCE</td>
<td>Begin to use clinical judgment with a focus on health promotion and foundational concepts when providing safe nursing care to diverse individuals across the lifespan.</td>
<td>Explain the use of clinical judgment and theoretical concepts when providing safe nursing care to diverse individuals and families with stable conditions.</td>
<td>Demonstrate clinical judgment and analysis of theoretical concepts when providing safe nursing care to diverse individuals with complex physiological and psychological conditions.</td>
<td>Apply increasingly complex clinical judgment and theoretical concepts when providing safe nursing care to diverse individuals across the lifespan in a variety of settings.</td>
</tr>
<tr>
<td>III. CARING</td>
<td>Discover caring behaviors by being sensitive to the client’s preferences based on gender, developmental stage/age, functional ability, family dynamics, health literacy, language, ethnicity/culture, and spiritual practices.</td>
<td>Express caring behaviors and sensitivity to the values of others when planning and implementing nursing care for diverse individuals and families.</td>
<td>Demonstrate caring and sensitivity when providing nursing care to clients with complex physiological and/or psychological conditions.</td>
<td>Integrate caring into relationships and nursing interventions that demonstrate sensitivity to the values of others.</td>
</tr>
</tbody>
</table>
### IV. COLLABORATION

| Identify and begin to establish collaborative relationships with clients and interprofessional healthcare team members. | Establish collaborative relationships through effective communication with members of interprofessional healthcare teams. | Use collaborative relationships with interprofessional healthcare team members to provide health-illness care across and within health care systems. | Communicate and collaborate with members of the interprofessional healthcare team to coordinate care and optimize health outcomes. |

### V. CURIOSITY

| Relate a spirit of inquiry to examining data, challenging the status quo, and asking questions about underlying assumptions. | Express a spirit of inquiry when examining data, challenging the status quo, and questioning underlying assumptions while caring for diverse individuals and families. | Use a spirit of inquiry to examine data, challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for individuals with complex physiological and psychological conditions. | Model a spirit of inquiry when examining data, challenging the status quo, questioning underlying assumptions, and offering new insights to improve quality of care. |

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**CONCEPT-BASED CURRICULUM**

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

A concept is an organizing principle, or classification of information. A concept may be simple or complex in scope. Concepts can be considered building blocks for the curriculum, or the foundations of nursing theory. By gaining a deeper understanding of a core set of concepts, a student can recognize and understand similarities and recurring characteristics, which can be applied more effectively than memorized facts. Exemplars are examples of how a particular concept can be applied to a contextualized client situation.” (Giddens, 2017, p. x.).

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

The nursing concepts are clustered around each of the five core values. The faculty identified and defined specific concepts that comprise the essentials of entry-level registered nursing practice. The concepts are threaded throughout the curriculum in a manner that facilitates acquisition of competencies, ultimately leading to student achievement of expected end-of-program outcomes.


### ADN Program’s Concepts Arranged According to Each Core Value

<table>
<thead>
<tr>
<th>I. Comportment</th>
<th>Ethics</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Health Law &amp; Policies</td>
</tr>
<tr>
<td></td>
<td>Leadership-Management</td>
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<tr>
<td></td>
<td>Professional Identity</td>
</tr>
<tr>
<td>II. Competence</td>
<td>Clinical Judgment</td>
</tr>
<tr>
<td></td>
<td>Safety</td>
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<tr>
<td></td>
<td>Addiction</td>
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<tr>
<td></td>
<td>Fluid and Electrolytes/Acid-base Balance</td>
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<tr>
<td></td>
<td>Cognition</td>
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<td></td>
<td>Digestion</td>
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<td></td>
<td>Elimination</td>
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<tr>
<td></td>
<td>Gas Exchange</td>
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<tr>
<td></td>
<td>Grief and Loss/End of Life</td>
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<tr>
<td></td>
<td>Hormonal Regulation</td>
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<tr>
<td></td>
<td>Immunity/Cellular Regulation</td>
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<tr>
<td></td>
<td>Infection/Inflammation</td>
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<tr>
<td></td>
<td>Intracranial Regulation</td>
</tr>
<tr>
<td></td>
<td>Mobility</td>
</tr>
<tr>
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<td>Mood and Affect</td>
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<tr>
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<td>Nutrition</td>
</tr>
<tr>
<td></td>
<td>Pain</td>
</tr>
<tr>
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<td>Perfusion</td>
</tr>
<tr>
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<td>Psychosis</td>
</tr>
<tr>
<td></td>
<td>Sensory Perception</td>
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<tr>
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<td>Sexuality/Reproduction</td>
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<td></td>
<td>Stress and Coping</td>
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<td>Tissue Integrity</td>
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<tr>
<td>III. Caring</td>
<td>Culture and Spirituality</td>
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<tr>
<td></td>
<td>Development</td>
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<tr>
<td></td>
<td>Family Dynamics</td>
</tr>
<tr>
<td></td>
<td>Functional Ability</td>
</tr>
<tr>
<td>IV. Collaboration</td>
<td>Health Care Organizations</td>
</tr>
<tr>
<td></td>
<td>Economics</td>
</tr>
<tr>
<td></td>
<td>Communication</td>
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<tr>
<td></td>
<td>Collaboration &amp; Core Coordination</td>
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<tr>
<td></td>
<td>Health Promotion</td>
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<tr>
<td></td>
<td>Health Care Disparities</td>
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<td>V. Curiosity</td>
<td>Informatics</td>
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<td></td>
<td>Evidenced Based Practice</td>
</tr>
<tr>
<td></td>
<td>Health Care Quality</td>
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</table>
# ASSOCIATE DEGREE IN NURSING COURSE SEQUENCING

## Requisite Courses for Associate Degree in Science, Registered Nursing

<table>
<thead>
<tr>
<th>Semester</th>
<th>Course Code</th>
<th>Course Title</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Semester 1</td>
<td>NRN 110</td>
<td>Foundations for Success for Registered Nursing Student</td>
<td>1</td>
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<tr>
<td></td>
<td>NRN 46</td>
<td>Health Promotion and Foundational Health Concepts Across the Lifespan</td>
<td>6.5</td>
</tr>
<tr>
<td></td>
<td>NRN 47</td>
<td>Social Determinants of Health</td>
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<td></td>
<td>NRN 48</td>
<td>Nursing Assessment and Interventions</td>
<td>1</td>
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<tr>
<td></td>
<td>NRN 49</td>
<td>Introduction to Pharmacology and Medication Administration</td>
<td>1.5</td>
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<tr>
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<td><strong>Subtotal Semester 1</strong></td>
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<td><strong>11.5</strong></td>
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<tr>
<td>Semester 2</td>
<td>NRN 56</td>
<td>Nursing Theory II</td>
<td>8</td>
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<tr>
<td></td>
<td>NRN 57</td>
<td>Nursing Interventions and Scenarios</td>
<td>.5</td>
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<tr>
<td></td>
<td>NRN 58</td>
<td>Application of Pharmacology Across the Lifespan</td>
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<tr>
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<td><strong>Subtotal Semester 2</strong></td>
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<tr>
<td>Semester 3</td>
<td>NRN 66</td>
<td>Care of Clients with Complex Physiological and Psychological Conditions</td>
<td>8</td>
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<td><strong>Subtotal Semester 3</strong></td>
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<td>Semester 4</td>
<td>NRN 76</td>
<td>Care of Clients with Potential or Actual Multi-system Failure</td>
<td>7</td>
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<td>NRN 77</td>
<td>Role Transition and Care Coordination Seminar</td>
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<td><strong>Subtotal Semester 4</strong></td>
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<td></td>
<td><strong>Major Course Total</strong></td>
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## Required General and Major course

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIO 5</td>
<td>Human Anatomy</td>
<td>4</td>
</tr>
<tr>
<td>NRN 70</td>
<td>Growth and Development across the Lifespan for the Healthcare Professional</td>
<td>3</td>
</tr>
<tr>
<td>SOC 1</td>
<td>Intro to Sociology</td>
<td>3</td>
</tr>
<tr>
<td>ENG 1A</td>
<td>College Composition and Reading</td>
<td>3</td>
</tr>
<tr>
<td>MAT 126</td>
<td>Quantitative Reasoning for Personal and Professional Life</td>
<td>4</td>
</tr>
<tr>
<td>COM 3</td>
<td>Survey of Human Communication</td>
<td>3</td>
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<tr>
<td></td>
<td><strong>General course subtotal</strong></td>
<td><strong>20</strong></td>
</tr>
<tr>
<td>BIO 6</td>
<td>Introductory Physiology</td>
<td>3</td>
</tr>
<tr>
<td>BIO 6L</td>
<td>Physiology Laboratory</td>
<td>2</td>
</tr>
<tr>
<td>BIO 27</td>
<td>Principles of Microbiology</td>
<td>4</td>
</tr>
<tr>
<td>CHEM 22</td>
<td>The Science of Chemistry</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td><strong>Major course subtotal</strong></td>
<td><strong>13</strong></td>
</tr>
</tbody>
</table>

| | **General and Major course total** | **33** |

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ADN course descriptions are found in the Hartnell College Catalog [ADN Course Descriptions](#)
VOCATIONAL NURSING

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

In 2020, Hartnell College was approved by the State of California to offer its students the choice between a certificate of achievement and an associate of science degree in vocational nursing. The curriculum was updated to reflect the expansion of competencies for the vocational nurse in the areas of case management, priority setting, and system-based care (NLN, 2014). The revised curriculum based on the five core values of Comportment, Competence, Caring, Collaboration, and Curiosity requires an increased use of technology, data, and clinical judgement.

In 2019, an after high school, direct admission, pilot program was launched. The purpose of the pilot program was to establish an engaging, supportive cohort experience for potential vocational nursing students in prerequisite courses. To decrease time to completion, the number of prerequisite courses was reduced to four: English-1A, Math-123, Psychology-2, and Biology-11 courses. To progress to vocational nursing courses, direct-admission students must achieve a 2.5 GPA.

Success in the Vocational Nursing Program is based on the application of theoretical knowledge, nursing skills proficiency, and professional comportment in clinical settings. The Hartnell College VN Program is fully approved by the California Board of Vocational Nurses and Psychiatric Technicians (BVN/PT) and is the first and only vocational nursing program in California to earn national accreditation by the Accreditation Commission for Education in Nursing.

CONCEPTUAL FRAMEWORK:

Foundations of the 5C VN Curriculum

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

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

The unifying theme of Hartnell’s Associate Degree, Science, in Vocational Nursing academic program is the Nursing Process, which the Hartnell College faculty adopted as the problem-solving guide to vocational nursing practice. The 5C core values, the Nursing Process, the National League for Nursing Outcomes and Competencies for Graduates of Vocational Nurses, the California vocational nurse scope of practice, and standards of nursing practice are foundational pillars for the curriculum.

The Nursing Process: Five Steps to Organize and Deliver Nursing Care
The vocational nurse assists the registered nurse in applying the nursing process to provide nursing care within their scope of practice.

Assessment
A vocational nurse collects holistic assessment data from multiple sources and communicates the data to appropriate healthcare providers. This is the first step in delivering nursing care. Assessment includes physiological psychological, sociocultural, spiritual, economic, and life-style data. For example, a nurse’s assessment of a person in psychological distress includes physical causes contributing to the distress, the person’s interpretation of the situation, and the person’s ability to respond based on the person’s social capital.

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

Outcomes/Planning
Based on the assessment and diagnosis, the vocational nurse collaborates with the registered nurse to set measurable and achievable short- and long-range goals/desired outcomes for each person. Examples of short-term goals might include moving from bed to chair at least three times per day for the next two days to improve mobility and maintaining adequate nutrition by eating smaller, more frequent meals for the next seven days. Examples of long-term goals might include attainment of independent mobility within six month and adequate nutrition as evidenced by a 10-pound weight gain in three months. Vocational nurses collaborate with the registered nurse or other members of the healthcare team to organize and incorporate assessment data to plan/revise patient care and actions based on established
nursing diagnoses, nursing protocols, and assessment and evaluation data.

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

**Evaluation**
The vocational nurse assists the registered nurse by monitoring and recording a patient’s status over time and reporting any deviations from the plan.

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**NLN ROLE SPECIFIC COMPETENCIES FOR VOCATIONAL NURSES**
The six integrating concepts are the following:

- **Safety**: Safety is the foundation upon which all other aspects of quality care are built (NLN, 2010, p. 25). A nurse, who practices safely minimizes risk of harm to patients and providers through both system effectiveness and individual performance. Safe practice includes the individual’s purposeful use of knowledge to provide safe care in a deliberate, skillful, and informed way.

- **Quality**: Quality is the degree to which health services to individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge (IOM, 2001). Quality is operationalized from an individual, unit and systems perspective (NLN, 2010).

- **Team/collaboration**: Team/collaboration refers to fostering open communication, mutual respect, and shared decision-making to achieve quality patient care (NLN, 2014).

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

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

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

National League for Nursing (2012). *Outcomes and competencies for graduates of practical/vocational, diploma, associate*
Institutional Degree Completion Rates

Outcomes and Competencies


**VN PROGRAM OUTCOMES:**

**End of Program Student Learning Outcomes (EOPSLOs)**

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

1. articulate the role of the vocational nurse as a member of the health care team, committed to provide safe, quality care for diverse persons and their families.
2. provide rationale for judgments used in the provision of safe, quality care and for decisions that promote the health of persons.
3. promote the human dignity, integrity, self-determination, and personal growth of persons, oneself, and members of the health care team.
4. achieve quality care through effective communication, mutual respect, and shared decision making with the health care team.
5. question the basis for nursing actions, considering research, evidence, tradition and personal preferences.
The Vocational Nursing EOPSLOs are aligned to Hartnell College’s Institutional Student Learning Outcomes (ISLOs):

<table>
<thead>
<tr>
<th>Nursing VN Program: EOPSLO</th>
<th>HC: Institutional Student Learning Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Articulate the role of the vocational nurse as a member of the health care team, committed to provide safe, quality care for diverse persons and their families.</td>
<td><strong>Personal Growth:</strong> Students will demonstrate ethical decision making, goal setting, and positive lifestyle choices.</td>
</tr>
<tr>
<td>II. Provide rationale for judgments used in the provision of safe, quality care and for decisions that promote the health of persons.</td>
<td><strong>Inquiry and Reason:</strong> Students will use analytical, creative, and critical thinking to evaluate ideas, predict outcomes and form conclusions and solutions.</td>
</tr>
<tr>
<td>III. Promote the human dignity, integrity, self-determination, and personal growth of persons, oneself, and members of the health care team.</td>
<td><strong>Global Engagement:</strong> Students will demonstrate global citizenship via knowledge of and interaction with civic participation, diverse cultures and people, and social justice advocacy.</td>
</tr>
<tr>
<td>IV. Achieve quality care through effective communication, mutual respect, and shared decision making with the health care team.</td>
<td><strong>Communication:</strong> Students will effectively communicate to varied audiences via spoken, written, visual and other forms of communication.</td>
</tr>
<tr>
<td>V. Question the basis for nursing actions, considering research, evidence, tradition, and personal preferences.</td>
<td><strong>Information Competency:</strong> Students will define information needs, utilizing appropriate technology and resources to access information efficiently and effectively, evaluate information critically, and use information ethically.</td>
</tr>
</tbody>
</table>

*There is no specific VN EOPSLO that correlates with Aesthetic Analysis and Application. Students meet this outcome in pre-requisite humanities courses.*

**Aesthetic Analysis and Application:** Students will analyze, conceptualize, evaluate, and/or synthesize creative and artistic expressions applied via contents such as cultures and disciplines.
VN COURSE LEVELING AND OUTCOMES
Courses are designed for each semester level. Each course has outcomes that represent the expected culmination of course learning experiences and support the attainment of the five EOPSLOs. Course outcomes are adapted for each course according to the complexity of theoretical content and clinical requirements.

Levels
The curriculum levels and course sequencing are designed to prepare students to transition the knowledge and skills from a beginning level to integration of all previously acquired knowledge, skills, and competencies at the culmination of the program. Students advance through the course sequence that scaffolds the complexity of care delivery and management. The courses are arranged into three levels that are offered in sequential semesters as follows:

- **Level 1/Semester 1**: Level 1/Semester 1: Foundational knowledge of health, illness, and professional concepts, clinical judgment, and pharmacological principles needed to care for clients across the lifespan in a variety of settings. This level includes instruction in nursing assessment and basic psychomotor skills.
- **Level 2/Semester 2**: Level 2/Semester 2: Continued development of clinical judgment, theoretical knowledge, and technical knowledge in the provision of nursing care to individuals and families with stable conditions across the lifespan in acute care and community settings.
- **Level 3/Semester 3**: Application of clinical judgment, theoretical knowledge, and technical knowledge in the provision of nursing care to individuals and families with physiological and psychological conditions in acute care and community settings. Integration of all theoretical knowledge and technical knowledge in the provision of nursing care at a novice vocational nurse. Students act as a team leader under the supervision of a licensed professional and assist with care coordination.

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

<table>
<thead>
<tr>
<th>EOPSLO</th>
<th>Level 1/Sem 1</th>
<th>Level 2/Sem 2</th>
<th>Level 3/Sem 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. COMPORTEMENT</td>
<td>Describe the role of the vocational nurse as a member of the health care team, committed to provide safe, quality care for diverse persons and their families.</td>
<td>Perform in the role of the vocational nurse as a member of the health care team, committed to provide safe, quality care for diverse persons and their families.</td>
<td>Articulate the role of the vocational nurse as a member of the health care team, committed to provide safe, quality care for diverse persons and their families.</td>
</tr>
</tbody>
</table>
II. COMPETENCE

Describe clinical judgement that is needed to provide safe, quality care and to make decisions that promote the health of persons.

Demonstrate clinical judgement when providing safe, quality care and when making decisions that promote the health of persons.

Provide rationale for judgments used in the provision of safe, quality care and for decisions that promote the health of persons.

III. CARING

Recognize caring behaviors that contribute to human dignity, integrity, self-determination, and personal growth of persons, oneself, and members of the healthcare team.

Use caring behaviors that support human dignity, integrity, self-determination, and person growth of persons, oneself, and members of the healthcare team.

Promote the human dignity, integrity, self-determination, and personal growth of persons, oneself, and members of the healthcare team.

II. COLLABORATION

Practice effective communication, mutual respect, and shared decision making with the healthcare team when providing nursing care.

Demonstrate effective communication, mutual respect, and shared decision making with the healthcare team when providing nursing care.

Achieve quality care through effective communication, mutual respect, and shared decision making with the healthcare team.

V. CURIOSITY

Examine research, evidence, tradition, and personal preferences when examining the basis for nursing actions.

Apply research, evidence, tradition, and personal preferences when determining the basis for nursing actions.

Question the basis for nursing actions, considering research, evidence, tradition, and personal preferences.

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**VN CONCEPT-BASED CURRICULUM**

The Hartnell College Vocational Nursing program uses a concept-based curriculum.

A concept is an organizing principle, or classification of information. A concept may be simple or complex in scope. Concepts can be considered building blocks for the curriculum, or the foundations of nursing theory. By gaining a deeper understanding of a core set of concepts, a student can recognize and understand similarities and recurring characteristics, which can be applied more effectively than memorized facts. Exemplars are examples of how a particular concept can be applied to a contextualized client situation.” (Giddens, 2017, p. x.).

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

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


## VN Program’s Concepts Arranged According to Each Core Value

| I. Comportment | Ethics  
|                | Health Law & Policies  
|                | Leadership-Management  
|                | Professional Identity |
| II. Competence | Clinical Judgment  
|                | Safety  
|                | Addiction  
|                | Fluid and Electrolytes/Acid-base Balance  
|                | Cognition  
|                | Elimination  
|                | Gas Exchange  
|                | Hormonal Regulation  
|                | Immunity/Cellular Regulation  
|                | Infection/Inflammation  
|                | Intracranial Regulation  
|                | Mobility  
|                | Mood and Affect  
|                | Nutrition  
|                | Pain  
|                | Perfusion  
|                | Psychosis  
|                | Sensory Perception  
|                | Sexuality/Reproduction  
|                | Stress and Coping  
|                | Tissue Integrity |
| III. Caring    | Culture and Spirituality  
|                | Development  
|                | Family Dynamics  
|                | Functional Ability |
| IV. Collaboration | Health Care Organizations  
|                  | Economics  
|                  | Communication  
|                  | Collaboration & Care Coordination  
|                  | Health Promotion  
|                  | Health Disparities |
| V. Curiosity   | Informatics  
|                | Evidenced Based Practice  
|                | Health Care Quality |
### COURSE SEQUENCING: AS DEGREE, VOCATIONAL NURSING

<table>
<thead>
<tr>
<th>Required Prerequisite for Vocational Nursing Program</th>
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<tbody>
<tr>
<td>Required Prerequisite</td>
<td>ENG-1A or ENG-1AX</td>
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<tr>
<td>Required Prerequisite</td>
<td>MAT-123</td>
</tr>
<tr>
<td>Required Prerequisite</td>
<td>HES-120¹</td>
</tr>
<tr>
<td>Required Prerequisite</td>
<td>BIO-11*</td>
</tr>
<tr>
<td>Required Prerequisite</td>
<td>PSY-2*</td>
</tr>
<tr>
<td>Required Prerequisite</td>
<td>LIB-6</td>
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**Semester 1**

<table>
<thead>
<tr>
<th>Required Major Course</th>
<th>NUTR-51 * or NUTR-1</th>
<th>Essentials of Nutrition or Nutrition</th>
<th>3</th>
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<tbody>
<tr>
<td>Required Major Course</td>
<td>NVN/NRN 70 or PSY 25</td>
<td>Growth and Development Across the Lifespan or Developmental Psychology: Lifespan</td>
<td>3</td>
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<tr>
<td>Required Major Course</td>
<td>NVN 110</td>
<td>Foundations for Success for Vocational Nursing Students</td>
<td>1</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>NVN-119</td>
<td>Vocational Nursing Theory I: Fundamentals</td>
<td>4</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>NVN-119.1</td>
<td>Vocational Nursing Clinical I: Fundamentals</td>
<td>4</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>NVN-130 A</td>
<td>Basic Pharmacology A</td>
<td>1</td>
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</table>

**Semester 2**

<table>
<thead>
<tr>
<th>Required Major Course</th>
<th>NVN 121</th>
<th>Vocational Nursing Theory II: Health Promotion and Maintenance Across the Lifespan</th>
<th>6.5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required Major Course</td>
<td>NVN 121.1</td>
<td>Vocational Nursing Clinical II: Health Promotion and Maintenance Across the Lifespan</td>
<td>6.5</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>NVN 130 B</td>
<td>Basic Pharmacology B</td>
<td>1</td>
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</table>

**Semester 3**

<table>
<thead>
<tr>
<th>Required Major Course</th>
<th>NVN 123</th>
<th>Vocational Nursing Theory III: Coordination of Care</th>
<th>6.5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required Major Course</td>
<td>NVN 123.1</td>
<td>Vocational Nursing Clinical III: Coordination of Care</td>
<td>6.50</td>
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</table>

**REQUIRED MAJOR COURSE**

<table>
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<tr>
<th>NVN 130 C</th>
<th>BASIC PHARMACOLOGY C</th>
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</table>

Subtotal Semester 3 14 units

Degree Total 60 units

¹Prerequisite and requisite courses marked with an asterisk must be completed within five (5) years of entering the vocational nursing program per California Code of Regulations, Title 16: Professional Regulations, Division 25: Board of Vocational Nursing and Psychiatric Technicians of the State of California.

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

VN course descriptions are found in the Hartnell College Catalog VN Course Descriptions
### COURSE SEQUENCING: CERTIFICATE OF ACHIEVEMENT, VOCATIONAL NURSING

<table>
<thead>
<tr>
<th>Required Prerequisite for Vocational Nursing Program</th>
<th>Required Prerequisite</th>
<th>Course Title</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required Prerequisite</td>
<td>ENG-1A or ENG-1AX</td>
<td>College Composition and Reading/Multicultural Perspectives.</td>
<td>3 (4)</td>
</tr>
<tr>
<td>Required Prerequisite</td>
<td>MAT-121 or MAT-106r</td>
<td>Elementary Algebra Integrated Mathematics</td>
<td>(5) 3</td>
</tr>
<tr>
<td>Required Prerequisite</td>
<td>HES-120¹</td>
<td>American Heart Association Basic Life Support for Health Care Professionals</td>
<td>(0.5)</td>
</tr>
<tr>
<td>Required Prerequisite</td>
<td>BIO-11*</td>
<td>Introductory Human Anatomy &amp; Physiology</td>
<td>4</td>
</tr>
<tr>
<td>Required Prerequisite</td>
<td>PSY-2*</td>
<td>General Psychology</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Subtotal Preadmission</td>
<td>13 units</td>
</tr>
</tbody>
</table>

**Semester 1**

| Required Major Course                              | NUTR-51 * or NUTR-1  | Essentials of Nutrition or Nutrition | 3 (3) |
| Required Major Course                              | NVN/NRN 70 or PSY 25 | Growth and Development Across the Lifespan or Developmental Psychology: Lifespan | 3 (3) |
| Required Major Course                              | NVN 110              | Foundations for Success for Vocational Nursing Students | 1 |
| Required Major Course                              | NVN-119              | Vocational Nursing Theory I: Fundamentals | 4 |
| Required Major Course                              | NVN-119.1            | Vocational Nursing Clinical I: Fundamentals | 4 |
| Required Major Course                              | NVN-130 A            | Basic Pharmacology A | 1 |
|                                                    |                      | Subtotal Semester 1 | 16 units |

**Semester 2**

| Required Major Course                              | NVN 121              | Vocational Nursing Theory II: Health Promotion and Maintenance Across the Lifespan | 6.5 |
| Required Major Course                              | NVN 121.1            | Vocational Nursing Clinical II: Health Promotion and Maintenance Across the Lifespan | 6.5 |
| Required Major Course                              | NVN 130 B            | Basic Pharmacology B | 1 |
|                                                    |                      | Subtotal Semester 2 | 14 units |

**Semester 3**

| Required Major Course                              | NVN 123              | Vocational Nursing Theory III: Coordination of Care | 6.5 |
| Required Major Course                              | NVN 123.1            | Vocational Nursing Clinical III: Coordination of Care | 6.5 |
| Required Major Course                              | NVN 130 C            | Basic Pharmacology C | 1 |
|                                                    |                      | Subtotal Semester 3 | 14 units |

**Certificate of Achievement Total** 57 units

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¹Prerequisite and requisite courses marked with an asterisk must be completed within five (5) years of entering the vocational nursing program per California Code of Regulations, Title 16: Professional Regulations, Division 25: Board of Vocational Nursing and Psychiatric Technicians of the State of California.

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

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

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

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

**PROGRAM OUTCOMES**

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

Upon successful completion of the Respiratory Care (RCP) program a student will

1. Comprehend, apply, and evaluate information necessary to practice as a respiratory care practitioner (cognitive) as evidenced by their ability to  
   a. evaluate data to assess the appropriateness of prescribed respiratory care.  
   b. participate in the development and modification of respiratory care plans in a variety of settings.  
   c. provide patient, family, and community education.

2. Perform the skills competently as a respiratory care practitioner (psychomotor) as evidenced by their ability to  
   a. apply problem-solving strategies in the patient care setting.
b. Perform respiratory therapeutic and diagnostic procedures interventions in a timely manner consistent with patient safety and infection control standards.

3. Practice professional attitudes and behavior (affective) as evidenced by their ability to
   a. demonstrate ethical and professional behaviors.
   b. demonstrate effective oral and written communication skills.
   c. interact effectively with other members of the healthcare team.
   d. Communicate effectively in diverse groups while respecting beliefs and values of all persons.

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

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

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

1. **Provide patient-centered care.** Identify, respect, and care about people. Differences, values, preferences, and expressed needs; relieve pain and suffering; coordinate continuous care; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of health lifestyles, including a focus on population health

2. **Work in interdisciplinary teams.** Cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable

3. **Employ evidence-based practice.** Integrate best research with clinical expertise and patient values for optimum care, and participate in learning and research activities to the extent feasible

4. **Apply quality improvement.** Identify errors and hazards in care; understand and implement basic safety design principles, such as standardization and simplification;
continually understand and measure quality of care in terms of structure, process, and outcomes in relation to patient and community needs; and design and test interventions to change processes and systems of care, with the objective of improving quality.

5. **Utilize informatics.** Communicate, manage knowledge, mitigate error, and support decision making using information technology (IOM, 2003, p. 45-46)

**DEFINITIONS**

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

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

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


### RESPIRATORY CARE PRACTITIONER COURSE SEQUENCING

<table>
<thead>
<tr>
<th>Semester 1</th>
<th>Required Major Course</th>
<th>Course Code</th>
<th>Course Name</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>RCP 110</td>
<td>Foundations for Success</td>
<td></td>
<td>1.5</td>
</tr>
<tr>
<td></td>
<td>RCP 50</td>
<td>Respiratory Care Responsibilities</td>
<td></td>
<td>1.5</td>
</tr>
<tr>
<td></td>
<td>RCP 51</td>
<td>Pharmacology and Medication Administration</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>RCP 52</td>
<td>Cardiopulmonary Anatomy and Physiology</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>RCP 53</td>
<td>Foundational Skills</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>RCP 54</td>
<td>Supervised Practice: Foundations</td>
<td></td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>RCP 110</td>
<td>Foundations for Success</td>
<td></td>
<td>1.5</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Subtotal Semester 1</strong></td>
<td></td>
<td><strong>9.5 units</strong></td>
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<table>
<thead>
<tr>
<th>Semester 2</th>
<th>Required Major Course</th>
<th>Course Code</th>
<th>Course Name</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>RCP 60</td>
<td>Diagnostic Studies and Respiratory Care</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>RCP 61</td>
<td>Respiratory Therapeutics</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>RCP 62</td>
<td>Cardiopulmonary Pathophysiology</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>RCP 63</td>
<td>Beginning Clinical Experience</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>RCP 64</td>
<td>Supervised Practice: Beginning</td>
<td></td>
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</tr>
<tr>
<td></td>
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<td><strong>12.5 units</strong></td>
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<table>
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<th>Required Major Course</th>
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<th>Course Name</th>
<th>Units</th>
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<tbody>
<tr>
<td></td>
<td>RCP 70</td>
<td>Neonatal and Pediatric Respiratory Care</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>RCP 71</td>
<td>Basic Mechanical Ventilation</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>RCP 72</td>
<td>Neurologic and Traumatic Conditions</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>RCP 73</td>
<td>Intermediate Clinical Experience</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>RCP 74</td>
<td>Supervised Practice: Intermediate</td>
<td></td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Subtotal Semester 3</strong></td>
<td></td>
<td><strong>11.5 units</strong></td>
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</tbody>
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<table>
<thead>
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<th>Course Name</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>RCP 80</td>
<td>Advanced Life Support</td>
<td></td>
<td>1.5</td>
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<tr>
<td></td>
<td>RCP 81</td>
<td>Advanced Mechanical Ventilation</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>RCP 82</td>
<td>Clinical Reasoning Seminar</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>RCP 83</td>
<td>Advanced Clinical Experience</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>RCP 84</td>
<td>Supervised Practice: Advanced</td>
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<td>0.5</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Subtotal Semester 4</strong></td>
<td></td>
<td><strong>11 units</strong></td>
</tr>
</tbody>
</table>

| Major Course Total | 44.5 units |

Course Descriptions are in the [Hartnell College Course Catalog](#) and on the [Nursing and Allied Health](#) website.
EMERGENCY MEDICAL TECHNICIAN AND HEALTH SCIENCES

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

EMT DEPARTMENT OF TRANSPORTATION CURRICULUM STATEMENT

COURSE POLICIES AND GUIDELINES
The EMT-basic course curriculum is extremely demanding, requiring students to demonstrate competency in cognitive, psychomotor, and affective domains. Students demonstrate the ability to work well with other students, instructional staff, pre-hospital/clinical personnel, and patients. During this course, the student is expected to work hard and be thoroughly challenged.

Field EMTs are self-reliant, motivated, and work as a team member when providing care to the ill or injured. To achieve competence, students study at least two hours for every classroom hour to keep pace with the information being delivered. It is strongly recommended that students incorporate a team approach to learning by establishing study groups.

It is expected that students come prepared for lecture and skills classes by studying the topics before the lecture and practicing skills outside the classroom setting. It should be noted that students prepare academically for work in which they are responsible for the lives and wellbeing of individuals, crew partners, and themselves. It is the responsibility of the instructors to provide a classroom environment intended to help students gain proficiency and confidence in knowledge and skills required to function as an EMT. After successful completion of the EMT-basic course and the National Registry of Emergency Medical Technician (NREMT) cognitive examination, the student is considered a “safe beginner” in the challenging field of pre-hospital emergency care.

ATTENDANCE
The EMT curriculum is taught to standards set by the State of California. A minimum number of academic hours is required for successful completion. Certain lectures are mandatory. Compulsory requirements allow for no more than eight (8) hours of absence during the entire
course. More than eight (8) hours of absence results in the student being ineligible for the NREMT Cognitive examination. Attendance is taken at the beginning and end of each class. Students who leave during the class are marked absent for that class period. It is the responsibility of the student to adjust their personal circumstances and work schedules to meet the minimum State and Hartnell College requirements for attendance.

There is no tolerance for disruptive behavior or distractions during classroom sessions, clinical observations, or ambulance ride-along.

**CONVICTIONS**

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

**PRIOR DENIAL, SUSPENSION, OR REVOCATION OF CERTIFICATION**

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

**OPEN DOOR POLICY**

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

**AMBULANCE EMERGENCY ROOM OBSERVATION GENERAL INFORMATION**

Student learning outcomes include successful completion of requisite clinical hours and patient contacts to qualify for certification. American Medical Response is the primary 911 ambulance provider in Monterey County and is used for ambulance ride-along experiences. Natividad and Salinas Valley Memorial Hospital are used for emergency room observations. The student must maintain a 70% in the course to participate in these observations. The student must comply with all regulations imposed by clinical partners, including appropriate dress and hygiene. Students who show up unprepared, late, or exhibiting behaviors that might place themselves or others at risk may be sent home by the preceptor.
EMT 53 COURSE PREREQUISITE

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

EMT 53 COURSE DESCRIPTION

EMT-53 follows the state-mandated EMT curriculum. The classroom setting, and clinical rotations provide opportunities to gain proficiency in the theoretical knowledge and in the application of basic life support skills required to function as an EMT. Upon completion of course requirements, students are issued a Course Completion Certificate that is required for EMT certification through the California Emergency Medical Services Agency.

Course descriptions can be located in the Hartnell College Course Catalog and on the Nursing and Allied Health website EMT Course Descriptions.
PUBLIC HEALTH SCIENCE

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

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

The Associate in Science Degree in Public Health for Transfer is an articulated curricular track for students who wish to transfer to baccalaureate degree programs at a California State University campus in areas such as public health, health science, kinesiology with a health education or a health and wellness promotion concentration, collaborative health and human services with community health option, and related fields. Course descriptions are in the Hartnell College Course Catalog and on the Nursing and Allied Health website: HES Course Description. American Public Health Association (2017). What is public health. Retrieved from What is public health?

PROGRAM OUTCOMES

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

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

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

To earn this degree, students must meet the following requirements:

- Complete 60 CSU-transferable semester units.
- Achieve a minimum grade point average (GPA) of at least 2.0 in all CSU-transferable coursework. While a minimum of 2.0 is required for admission, some majors may require a higher GPA. Please consult with a counselor for more information.
- Complete a minimum of 18 semester units in an “AA-T” or “AS-T” major as detailed in the degree section of the catalog. All courses in the major must be completed with a grade of “C” or better or a “P” if the course is taken on a “pass-no pass” basis (title 5 § 55063).
- Certify completion of the California State University General Education-Breadth pattern (CSU GE Breadth) (see page 80 of the Hartnell College Catalog for more information)
- No additional local Associate degree requirements are applied.

### Public Health Science

<table>
<thead>
<tr>
<th>REQUIRED MAJOR COURSES</th>
<th>Course No.</th>
<th>Course Title</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required Major Course</td>
<td>BIO-10</td>
<td>General Biology</td>
<td>4</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>BIO-5</td>
<td>Human Anatomy with lab</td>
<td>4</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>BIO-6, 6L.</td>
<td>Human Physiology and lab</td>
<td>5</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>CHM-22 or CHM-1A</td>
<td>The Science of Chemistry General Chemistry I</td>
<td>4 (5)</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>HED-2</td>
<td>Individual Health</td>
<td>3</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>HES-1</td>
<td>Introduction to Public Health</td>
<td>3</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>MAT-13</td>
<td>Elementary Statistics</td>
<td>5</td>
</tr>
<tr>
<td>Required Major Course</td>
<td>PSY-2</td>
<td>General Psychology</td>
<td>3</td>
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</table>

**SUBTOTAL UNITS** (31-32)

<table>
<thead>
<tr>
<th>REQUIRED MAJOR ELECTIVES (Select 1)</th>
<th>Course No.</th>
<th>Course Title</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required Major Elective</td>
<td>ECO-1</td>
<td>Principles of Macroeconomics</td>
<td>3</td>
</tr>
<tr>
<td>Required Major Elective</td>
<td>ECO-5</td>
<td>Principles of Microeconomics</td>
<td>3</td>
</tr>
<tr>
<td>Required Major Elective</td>
<td>HES-2</td>
<td>Health and Social Justice</td>
<td>3</td>
</tr>
<tr>
<td>Required Major Elective</td>
<td>HES-3</td>
<td>Drugs, Health, and Society</td>
<td>3</td>
</tr>
<tr>
<td>Required Major Elective</td>
<td>FCS-23</td>
<td>Nutrition</td>
<td>3</td>
</tr>
<tr>
<td>Required Major Elective</td>
<td>PSY-15</td>
<td>Human Sexuality</td>
<td>3</td>
</tr>
<tr>
<td>Required Major Elective</td>
<td>SOC-1</td>
<td>Introduction to Sociology</td>
<td>3</td>
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</tbody>
</table>

**SUBTOTAL UNITS** 3

### REQUIRED GENERAL EDUCATION COURSES

(Students can double count General Education courses with major courses.)

<table>
<thead>
<tr>
<th>Choose either A. CSU-GE or B. IGETC for the General Education pattern</th>
<th>Minimum units to meet CSU-GE breadth certification requirements (39 units)</th>
<th>39</th>
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<tbody>
<tr>
<td>Minimum units to meet IGETC (34 – 37.00 units) certification requirements</td>
<td></td>
<td>34-37</td>
</tr>
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</table>

Public Health Science Required Major Courses and Electives 34-35
Students planning to transfer should follow the requirements of the four-year university. Information on course equivalencies and major preparation requirements for the UC and CSU systems are available online at Assist Online Student-Please consult with a Hartnell College counselor Transfer Information System.

**NURSING AND ALLIED HEALTH ELECTIVE COURSES**

NRN-60.1-60.4 Simulation for Nursing and Allied Health: The simulation and interprofessional courses are designed so that students may practice basic clinical skills and techniques, engage in clinical reasoning, and make collaborative clinical decisions in the safe environment of the NAH on-campus clinical settings. Each experience has a designated focus or a target population (e.g. adult/older adult with physiological and psychological conditions; multi-system failure; and maternal-newborn and pediatric health and wellness). *In 2020, the simulation and interprofessional courses are suspended until further notice because of the pandemic.*

NRN-70/NVN-70 Growth and Development across Lifespan is a required course for VN students. It is one of the lifespan courses that meets the Hartnell ADN Registered Nursing program requirements and is an elective course for students in a variety of disciplines, including baccalaureate science, nursing programs. The focus is on promotion of wellness across the lifespan and how illness affects the accomplishment of developmental tasks.

The nursing and respiratory care programs offer student success courses each semester with objectives that align with the current coursework. These courses are designed for students interested in reinforcing content presented during the semester.

The vocational and registered nursing programs offer supervised skills practice courses.

<table>
<thead>
<tr>
<th>Elective Courses</th>
<th>Units</th>
</tr>
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<tbody>
<tr>
<td>NVN/NRN 70 Growth &amp; Development across the Lifespan for the Healthcare Professional</td>
<td>3 units</td>
</tr>
<tr>
<td>NRN 225-228: Success Strategies for Registered Nursing Students (per semester)</td>
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</tr>
<tr>
<td>NVN 226-227: Success Strategies for Vocational Nursing (per semester)</td>
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</tr>
<tr>
<td>NRN 50.41-50.44: Supervised Registered Nursing Skills Practice (per semester)</td>
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</tr>
<tr>
<td>NVN 150.1: Supervised Vocational Nursing Skills Practice</td>
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</tr>
<tr>
<td>RCP 225-228: Success Strategies for Respiratory Care Practitioners (per semester)</td>
<td>0.5</td>
</tr>
<tr>
<td>NRN 60.1-60.4: Simulation for Nursing and Allied Health (per semester)</td>
<td>1</td>
</tr>
</tbody>
</table>

Course descriptions can be located on the Hartnell College
INTERPROFESSIONAL EDUCATION

Students in Nursing and Allied Health learn in an interprofessional environment. Faculty optimizes opportunities for students to learn theory and practice clinical skills together. Five core interprofessional competencies for health professionals include the following (IOM, 2003):

- **Provide patient-centered care.** Identify, respect, and care about patients. Differences, values, preferences, and expressed needs; relieve pain and suffering; coordinate continuous care; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of health lifestyles, including a focus on population health.

- **Work in interdisciplinary teams.** Cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable.

- **Employ evidence-based practice.** Integrate best research with clinical expertise and patient values for optimum care and participate in learning and research activities to the extent feasible.

- **Apply quality improvement.** Identify errors and hazards in care; understand and implement basic safety design principles, such as standardization and simplification; continually understand and measure quality of care in terms of structure, process, and outcomes in relation to patient and community needs; and design and test interventions to change processes and systems of care, with the objective of improving quality.

- **Utilize informatics.** Communicate, manage knowledge, mitigate error, and support decision making using information technology.


HARTNELL COLLEGE HEALTH PROFESSIONS PATHWAY PARTNERSHIP

Established in 2010, The Salinas Valley Health Professions Pathways Partnership (SVHPPP) represents an intentional and strategic collaboration among K-12 schools, higher education, alternative education, healthcare employers, workforce investment board, philanthropy, academic supports, Boys & Men of Color (BMoC) advocates and social emotional capacity building partners working to increase and sustain the number of locally grown and locally prepared health care professionals that supply regional health workforce needs and that contribute to strengthening the Salinas Valley’s economic engine. Since 2018, pathway efforts have focused on children who are first-generation to college students and their parents.
CODE OF ACADEMIC AND CLINICAL CONDUCT

ACADEMIC INTEGRITY AND ACADEMIC DISHONESTY

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

Nursing and Allied Health policies are in accordance with the “Standards of Student Conduct Policies” as set forth in the Hartnell College Board Policy (BP5500) and administrative procedure (AP5500), Student Handbook, College Catalog, Schedule of Classes, online orientation, and the Hartnell website. Copies of documents are available at Standards Student Conduct

Student Services Academic Policies (AP) and Board Policies (BP) (5000N series)

- AP5500 Standards of Student Conduct
- AP5520 Student Discipline Procedures
- AP5530 Hartnell Student Grievance Procedures
  - Student Grievance Form - Student Grievance Form
- AP/BP 5140 Disabled Students Programs and Services

Academic Integrity

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

The purpose of the NAH Academic Integrity statement is threefold:

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

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

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

- Unauthorized use of commercial "research" services such as term paper mills.
- Providing information to others without the instructor’s permission or allowing the opportunity for others to obtain information that provides the recipient with an advantage on an exam or assignment.
- Unauthorized communication with fellow students during a quiz or exam.
- Copying material, in part or in whole, from another student’s quiz or exam.
- Permitting another student to copy from a quiz or exam.
- Permitting another person to take a quiz, exam, or similar evaluation in lieu of the enrolled student.
- Using unauthorized materials, information, or study aids (e.g., textbook, notes, data, images, formula list, dictionary, calculator, etc.) in any academic exercise or exam.
- Sharing information on an academic exercise or exam through electronic devices or any other means of communication without authorization to do so.
- Using another student’s collected or measured data in assignments such as computer or lab exercises without the instructor’s permission.
- Using any electronic device to gain access to, alter, and/or use unauthorized information.
- Altering a graded exam or assignment and requesting that it be re-graded. Submission of altered work after grading shall be considered academically dishonest, including but not limited to changing answers after an exam or assignment has been returned or submitting another’s exam as one’s own to gain credit.
- Attempting to hinder the academic work of another student.
- Discussing answers or ideas relating to the answers on a test or other examination with students who have not yet taken the test or examination.
- Using an annotated instructor’s edition of a textbook without authorization.
- Obtaining, making, or distributing copies of a test, examination, or other course material without the instructor’s permission.
- Using notes, cheat sheets, or other devices considered inappropriate under the prescribed testing condition.
- Collaborating with another or others in work to be presented without the instructor’s permission.
- Falsifying records, laboratory work, or other course data.
Knowingly and intentionally assisting another student in any of the above.

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

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

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

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

Facilitating Academic Dishonesty is defined as assisting another to commit an act of academic dishonesty. Facilitating academic dishonesty includes but is not limited to the following:
• Taking a quiz, exam, or similar evaluation in place of another person.
• Allowing one student to copy from another.
• Attending a course posing as another student who is officially registered for that course.
• Providing material or other information (e.g., a solution to homework, a project or other assignments, a copy/screenshot of an exam, exam key, or any test information) to another student with knowledge that such assistance could be used to violate any other sections of this procedure.
• Distribution or use of notes or recordings based on college classes without the express written permission of the instructor for purposes other than individual or group study; this includes, but is not limited to, providing materials for distribution by services publishing class notes. (This restriction on unauthorized use applies to all information distributed or in any way displayed for use in relationship to the class, whether obtained in class, via email, on the internet, or via any other media.)

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

Student Responsibility
Students observing others violating this policy are strongly encouraged to report the misconduct to the instructor, to complete a Behavior Report form, or to address the student(s) directly.

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

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

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

Instructor Disciplinary Action When Cheating/ Plagiarism Occurs
When a student is charged with plagiarism or cheating related to a class and the instructor has reasonable proof or documentation or if the student admits the violation, the instructor may select one or more of the following options:
1. Issue an oral or written notification and warn the student that further acts of this sort will result in additional disciplinary action.
2. Issue a “NP” or a failing grade (“F”) for the assignment in question
3. Issue a lowered course grade.

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

**ETHICAL BEHAVIOR**

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

**CODE OF ETHICS FOR NURSES**

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

1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
2. The nurse’s primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality healthcare.
7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.


**CODE OF ACADEMIC AND CLINICAL CONDUCT FOR NURSING STUDENTS**

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

Students of nursing are responsible to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of healthcare environments. The Code of Academic and Clinical Conduct is based on an understanding that practicing nursing as a student is an agreement to uphold the trust which society has placed in us.

1. Maintain the highest standard of personal and professional conduct.
2. Actively promote and encourage the highest level of ethics within nursing education, the profession of nursing, and the student nurses’ association.
3. Uphold and respect all Bylaws, policies, and responsibilities relating to the student nurses' association at all levels of membership, reserving the right to propose changes and to critique rules and laws.
4. Strive for excellence in all aspects of collaboration, decision making, leadership, and management at all levels of the student nurses' association.
5. Use only legal, ethical, and human rights standards in all association decisions and activities in accordance with NSNA’s Core Values.
6. Ensure the proper use of all association funds and resources in accordance with the fiduciary responsibilities set forth in NSNA Bylaws, policies and state/federal law.
7. Ensure impartiality and prevent conflicts of interest, neither provide nor accept personal compensation to or from another individual while serving as members of student nurses’ associations.
8. Maintain the confidentiality of privileged information entrusted or known to me by virtue of an elected or official position in the student nurses association.
9. Affirm and support diversity and inclusion by refusing to engage in or condone unjust discrimination because of race, sex, sexual orientation, gender identity, age, citizenship, religion, national origin, disability, illness, legal status, or personal attributes.
10. Uphold integrity in personal, professional, and academic life by refraining from and reporting any form of dishonesty, using proper established channels of communication and reporting as set by the policies of the organization in question.
11. Always communicate internal and external association statements in a truthful and accurate manner by ensuring that there is accuracy in the data and information used by the student nurses' association.
12. Cooperate in every reasonable and proper way with association volunteers and staff by working with them to advocate for student rights and responsibilities and the advancement of the profession of nursing.
13. Use every opportunity to improve faculty and student understanding of the role of the student nurses' association.
14. Use every opportunity to raise awareness of the student nurses' association mission, values, purpose, and goals at the school, state and national chapter level as defined in bylaws and policies.


**CODE OF ETHICS FOR THE LICENSED PRACTICAL/VOCATIONAL NURSE**

Nursing Practice Standards for the Licensed Practical/ Vocational Nurse were updated in December of 2015 and can be found at Nursing Practice Standards for the Licensed Practical/Vocational Nurse.

The National Association of Licensed Practical Nurses lists the legal and ethical standards is as follows:

The Licensed Practical/Vocational Nurse:

1. Shall hold a current license to practice nursing as an LP/VN in accordance with the law of the state wherein employed.
2. Shall know the scope of nursing practice authorized by the Nursing Practice Act in the state wherein employed.
3. Shall have a personal commitment to fulfill the legal responsibilities inherent in good nursing practice.
4. Shall take responsible actions in situations wherein there is unprofessional conduct by a peer or other health care provider.
5. Shall recognize and have a commitment to meet the ethical and moral obligations of the practice of nursing.
6. Shall not accept or perform professional responsibilities which the individual knows she/he is not competent to perform.

**AMERICAN ASSOCIATION OF RESPIRATORY CARE STATEMENT OF ETHICS AND PROFESSIONAL CONDUCT**

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

1. demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals.
2. Promote and practice evidence-based medicine
3. seek continuing educational opportunities to improve and maintain their professional competence and document their participation accurately.
4. perform only those procedures or functions in which they are individually competent, and
which are within their scope of accepted and responsible practice.

5. respect and protect the legal and personal rights of patients, including the right to privacy, informed consent and refusal of treatment.

6. divulge no protected information regarding any patient or family unless disclosure is required for the responsible performance of duty authorized by the patient and/or family, or required by law.

7. provide care without discrimination on any basis, with respect for the rights and dignity of all individuals.

8. promote disease prevention and wellness.

9. refuse to participate in illegal or unethical acts.

10. refuse to conceal, and will report, the illegal, unethical, fraudulent, or incompetent acts of others.

11. follow sound scientific procedures and ethical principles in research

12. comply with state or federal laws which govern and relate to their practice.

13. avoid any form of conduct that is fraudulent or creates a conflict of interest, and shall follow the principles of ethical business behavior.

14. promote healthcare delivery through improvement of the access, efficacy, and cost of patient care.

15. encourage and promote appropriate stewardship of resources.

16. work to achieve and maintain respectful, functional, beneficial relationships and communication with all health professionals. It is the position of the AARC that there is no place in a professional practice environment for lateral violence and bullying among respiratory therapists or between healthcare professionals.


CODE OF ETHICS FOR EMERGENCY MEDICAL TECHNICIANS

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

- To conserve life, alleviate suffering, promote health, do no harm, and encourage the quality and equal availability of emergency medical care.

- To provide services based on human need, with compassion and respect for human dignity, unrestricted by consideration of nationality, race, creed, color, or status; to not judge the merits of the patient’s request for service, nor allow the patient’s socioeconomic status to influence our demeanor or the care that we provide.

- To not use professional knowledge and skills in any enterprise detrimental to the public well-being.
To respect and hold in confidence all information of a confidential nature obtained in the course of professional service unless required by law to divulge such information.

To use social media in a responsible and professional manner that does not discredit, dishonor, or embarrass an EMS organization, co-workers, other health care practitioners, patients, individuals or the community at large.

To maintain professional competence, striving always for clinical excellence in the delivery of patient care.

To assume responsibility in upholding standards of professional practice and education.

To assume responsibility for individual professional actions and judgment, both in dependent and independent emergency functions, and to know and uphold the laws which affect the practice of EMS.

To be aware of and participate in matters of legislation and regulation affecting EMS.

To work cooperatively with EMS associates and other allied healthcare professionals in the best interest of our patients.

To refuse participation in unethical procedures, and assume the responsibility to expose incompetence or unethical conduct of others to the appropriate authority in a proper and professional manner.


RESPONSIBILITIES OF NURSING AND ALLIED HEALTH STUDENTS

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

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

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

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

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

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

Student representation is required on the following committees:

- **Nursing and Allied Health Faculty Committee**: Class representatives participate in departmental decision-making. Membership: all faculty and elected students from each academic program.

- **Policy and Procedure Committee**: Students participate in the creation, review, and revision of NAH policies and procedures. Meetings are coordinated by the faculty chair and occur regularly throughout the academic year. Membership: Faculty chair, faculty, and student representatives from each academic program.

- **Curriculum Committee**: Students assist with course outlines, course content, and program planning. Membership: Faculty chair, all faculty, and student representatives from each academic program.

- **Accreditation and Program Evaluation Committee**: Students assist with evaluation of textbooks, resources, student learning outcomes, and program evaluations. Membership: Faculty chair, all faculty, and student representatives from each academic program. Students assist with issues related to skills lab and simulation lab experiences. Membership: Faculty chair, assigned faculty, and student representatives from each academic program.

- **Pinning Committee**: Students and faculty plan the Pinning Ceremonies. The committee works within the framework of the pinning policy. Membership: faculty advisors, pinning chair, interested VN, ADN, and RCP students.

- **Community Advisory Boards**: Community members, faculty, and interested students meet one to two times a year to discuss program performance and to generate initiatives to meet community demand. Membership: Dean, faculty, selected students, and representatives from all partnering agencies.
STUDENT RESOURCES AND SUPPORT SERVICES

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

HARTNELL COLLEGE STUDENT SUPPORT SERVICES
2020: Because Campus is closed until further notice, student support services are offered online.

AB540/Undocumented Students (Dreamers)
Hartnell College is committed to supporting all students regardless of their residency status. We provide specialized services for Dreamer students through the Center for Achievement and Student Advancement (Mi CASA).
Building B 204A  831.755.6723

Academy for College Excellence (ACE)
The ACE Program is a cohort-based program for first-time college students or older adults experiencing transition. Students gain skills that will help them be successful when taking courses, choosing their career and managing school, work and their personal lives.
AB540/Undocumented students are welcome and encouraged to participate in ACE.
Building D-383  831.755.6723

American Indian Services
Each year, the Bureau of Indian Affairs (BIA) provides grants to help eligible Native American students meet their college costs. To be eligible for the BIA educational grant, students must
- Be at least one-fourth American Indian, Eskimo, or Aleut as certified by a tribal group served by the BIA.
- Have a completed FAFSA and completed BIA form.
- Be enrolled in 12 units or more per semester.
Building B, Main Floor  831.755.6806

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

Counseling Center
Building B, First Floor 831.755.6820 Counseling Center

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

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

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

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

Building B-101 831.755.6760 DSPS

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

Building B 831 755.6860 EOPS
Financial Aid Office
Financial Aid assists eligible students in meeting educational costs while attending school. The primary responsibility for meeting college costs rests with the student and his/her family. Hartnell College offers programs to provide assistance for students with documented financial need. This office provides assistance with grant, loans, scholarships, and registration fee waivers. Students are encouraged to call or visit the Financial Aid Department for more information.
Building B-121  831.755.6806  Financial Aid

Guardian Scholars Program
The Guardian Scholars Program (GSP) is committed to helping current and former foster youth students complete their educational goals by providing comprehensive support services. The GSP is dedicated to provide referrals, academic and personal counseling, career guidance, school supplies and textbook assistance, educational and life skills workshops, campus services, and other support services.
Building N-30  831.755.6796  Guardian Scholars Program

Hartnell College Scholarship Office
The scholarship office assists students seeking scholarship information. Available Scholarships from outside sources are advertised continuously throughout the school year. Scholarships awards are based on academic achievement, financial need, extracurricular activities, or other criteria. Applicants are responsible for carefully reading the scholarship material and providing the required documentation, including letters of recommendation and/or personal statements. Scholarship deadlines and instructions for completion are clearly indicated.
Building B  831.755.6806  Scholarships

HEP – High-School Equivalency Program
HEP is funded by the US Department of Education, Secondary Education – Office of Migrant Education. HEP is designed to assist migrant and seasonal farm workers and their immediate family members to obtain a HSE and either an Associate Degree, Vocational/Technical Certificate, improve employment, military service, or apprenticeship, Certificate of Skills Acquisition, Certificate of Achievement, or an Associate Degree. Services include
- HSE Curriculum delivered through cohorts
- Supplemental academic support/tutoring
- Curriculum that is regularly reviewed and adjusted by HEP Advisory Committee
- Academic advising and enrollment assistance for an associate degree
- Career/workplace readiness
Building A-117  831.770.7070  HEP Program

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**Job Bank**
The Job Bank provides a current on-line listing of on and off campus employment opportunities.
Phone: 831.759.6007  
Hartnell College Job Bank

**Library**
Library and Resource Center contains resources and services that includes the following services: circulation, computer and media, reference, technical, and the Information Competency Center.
Building A  831.759.6078
Hartnell College Library and Resource Center

**Mathematics Engineering Science Achievement (MESA)**
MESA is an academic support program for educationally disadvantaged students who are seeking a bachelor’s degree in a science, technology, engineering, or mathematics (STEM) field. Services include computer access, study space, tutoring, personal counseling, field trips, and a textbook loan program. Online applications are available each semester.
Building S-106  831.770.6131
MESA

**Mentoring Programs for Women & Men**
Hartnell College offers two formal mentoring and life skills programs: Women’s Educational Leadership Initiative (WELI) and Men’s Institute for Leadership and Education (MILE) Program.
Both programs offer scholarships, mentoring, and leadership training to help men and women succeed academically and personally. Students meet with trained, professional mentors who can offer advice and connections in specific life areas. MILE and WELI participation requires an application process in spring of each year. Dreamer (AB540/Undocumented) students are welcomed. Transgender students may self-identify. Students are selected based upon academic achievement in context of adversity, financial need, and leadership potential. Other eligibility requirements may apply.
Building B-204A  831. 755.6723
WELI and MILE Programs

**Mi CASA Services for Dreamers**
MiCAS is a one-stop resource and a safe space for Dreamers. Students can get assistance with AB540 Affidavit and Deferred Action for Childhood Arrivals (DACA), educational planning and counseling, scholarship and financial aid assistance, peer mentoring and social activities, referrals to other campus services through the Dreamer Ally network, and advocacy and support services
Building B-204A  831. 755.6723
Dreamers
Office of Student Life
The goals of the Office of Student Life are to improve student life and facilitate communication between students, faculty, and staff.
Building C 831. 755.6734 Office of Student Life

Transfer and Career Center
The Transfer and Career Center provides guidance in university transfer information, career exploration, and job preparation.
Building C-132 831.759.6007 Transfer and Career Center

TRIO and Upward Bound
TRIO and Upward Bound are federally funded student retention/transfer pathway programs. They provide fundamental support and motivation to participants in their efforts to successfully complete high school and obtain a college education. TRIO and Upward Bound students participate in a variety of academic year and summer program activities at Hartnell College designed to help them reach their full academic and personal potential. In order to increase the rates at which participants enroll in and graduate from institutions of postsecondary education, our Upward Bound programs provide instruction in math, laboratory science, composition, literature, and foreign language.
Building N-11, D-14 831.759.6086, 831.759.6013 Trio and Upward Bound

Tutorial Services
Tutorial services are available to all students free of charge. Students wishing to use the tutorial services and students who wish to become tutors are encouraged to apply at the tutorial sign-in desk. Application documents can be downloaded from the website below. Tutorial assistance is available for both day and evening students.
Building A-214 831.755.6738 Hartnell College Tutorial Center

Veterans' Services
Hartnell College is approved as an institution of higher learning for veterans and veterans’ dependents entitled to educational assistance. The Veteran’s office staff provides assistance to Veterans and dependents in planning educational programs, referrals to community agencies, and facilitate transition from military to student life at Hartnell. Additional services include computers and printing for student use, Veteran’s Book Lending, on site tutors, and Veterans Club activities.
Building C-138 831.755.6909 Veterans Service Center
NAH GENERAL INFORMATION (ALPHABETICAL ORDER)

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

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

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

CAMPUS SAFETY & EMERGENCY NOTIFICATION
Life-Threatening Emergency: 911
Non-Life-Threatening Emergency: Campus Safety: 755.6888
Non-Emergencies and parking information: 770.7001 or 770.7003
Facility Emergency Notice: Emergency Information
The Campus Safety Department is operational 24 hours a day, year-round, and exists to provide safety and security for students, staff, faculty, and visitors. Their responsibilities govern College property. Staff members have no police powers. Safety Officers are responsible for a full range of public safety services, including all crime reports and enforcement of college safety regulations. They have a mobile telephone-radio system, which provides them with the capability of summoning a police officer if one is required.

The Campus Safety Department works closely with the Salinas Police Department. The Salinas Police Department responds to the campus when immediate support is needed since the campus is within the City of Salinas. The Salinas Police Department generously provides assistance when requested. The Campus Security kiosk and office are open from 8:00 am to 5:00 pm. Students are advised to contact campus security for assistance with reporting on-campus crimes and emergencies. An officer will respond and obtain medical assistance if necessary. The officer will call a specified college contact to the scene. Blue Light posts are located prominently on campus.

Campus Safety Status Information: To obtain information, call the campus safety and facilities emergency status bulletin telephone number: 831.796.6222. From a campus line, simply dial 6222.
**CANVAS COURSE MANAGEMENT SYSTEM**

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

**CELL PHONES**

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


**CHILDCARE**

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

**CLINICAL COURSE STUDENT EXPECTATIONS**

The following are some of the expectations for a clinical experience:

1. Students are expected to provide safe, ethical, and professional care at a level commensurate with their academic level.
2. Students are expected to arrive a few minutes before scheduled class time. For further information, please refer to NAH Policy #3 Attendance.
3. An ongoing list of student absences and tardies is kept in the student files. Students must complete alternative assignments for all hours of each clinical course.
4. Students receive a “Performance Improvement Plan” (PIP) when at risk for failure. The PIP includes the learning objective in question, the student’s performance indicator/behavior or the perception by others about the performance, identified deficiency, expected student outcomes, and available resources. The instructor and student generate the PIP with a timeline. Successful completion of the PIP is required to progress in the academic program.
   a. When indicated, the student cannot return to the clinical setting until the PIP is successfully completed.
   b. Alternate assignments are assigned when indicated.
5. A student who has not met clinical course outcomes receives a failing grade (No Pass) for the course.
6. Interactions that place an individual at risk are grounds for dismissal.
7. A student demonstrating a suspected or actual substance abuse problems or behaviors that are a possible risk to the student or others, or conditions that impair functioning will be removed from the clinical setting immediately. For further information, please refer to #8 Student Impairment Policy in the Nursing and Allied Health Policy and Procedure Manual.

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

Mailboxes
All students have a “mailbox folder.” Students and faculty utilize these files to send memos, return assignments, etc. Students should check their mailbox at least twice per week. Faculty mailboxes are accessed by the administrative staff only.

E-Mail
Hartnell College uses standardized email communication for Hartnell College students. Email communication between students and the College is restricted to official Hartnell College email addresses; correspondence using personal email addresses is not allowed. Hartnell College Gmail accounts can be accessed at Email Instructions for Students.

Faculty email addresses are listed on the Hartnell College website: Faculty Staff Directory
Students must identify themselves at the end of the email and demonstrate professional communication standards. Response times are not guaranteed, but instructors strive to respond to student communications as soon as possible. Students are encouraged to check for messages at least three times a week. Course faculty may recommend an even greater frequency.

Public student information is electronically accessible via the campus online directory. The protected directory does not produce lists but is publicly available. Students who do not want to be listed need to contact the College to make the request.

COMPUTERS
Computers for student use are located throughout campus. All files saved to the Hartnell College desktops are purged every 24 hours.
1. Laptops and Tablets
   Personal laptops and tablets are used in the classroom, skills lab, and simulation labs. Laptops and tablets are available for use. Most locations on campus have sufficient electrical outlets. Since 2020, students can receive a laptop or tablet on loan while instruction is online.
2. Software and Computerized Resources
   Students need software that is compatible with electronic copies of textbooks, interactive
resources, online simulated electronic health records. Online standardized practice exams that are used throughout the programs might have additional software requirements.

3. Hotspots
   Students with limited connectivity can receive a Wi-Fi hotspot while instruction is online. Applications are available on the Hartnell College website.

**CRIMINAL BACKGROUND CHECKS**

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

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

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

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

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

**DRUG SCREENING**

Students receive general information about the required 10-panel urine drug screening upon
acceptance into the program. Testing must be completed within 30 days prior to the first clinical experience. A copy of the results must be submitted to NAH. Positive results may involve additional screening. A negative test will suffice for the entire enrollment period unless a clinical agency alters their drug screening policy, there is a break in enrollment as defined as nonattendance for any part of a semester or longer, or at the request of a faculty member or clinical agency administrator. A positive drug screen may exclude a student from admission or advancement. A description of the drug screening procedure is found in the NAH Policy and Procedure #8: Student Impairment.

**EMERGENCY EVACUATION**

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

**EMERGENCY PREPAREDNESS**

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

**EMPLOYMENT WHILE A STUDENT**

Students must determine how many hours they can work while meeting the requirements of the academic program. Faculty cannot modify course times, assignments, or clinical experiences because of a student’s job. Upon completion of the first semester nursing courses, students qualify for the California nurse aide/assistant certification examination.

**EXAMINATIONS: TESTING GUIDELINES**

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

**EXAMINATIONS: REVIEW**

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

**EXAMINATIONS: SPECIAL TESTING ACCOMMODATIONS**

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

**EXAMINATIONS: STANDARDIZED ASSESSMENTS**

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

**FINANCIAL RESPONSIBILITY**

Hartnell College NAH assumes no responsibility for the personal financial arrangements of students. Financial aid, scholarships, emergency funds, and financial counseling are available. Students should refer to “Financial Assistance” in the Hartnell College catalog or contact the Financial Aid Department.

**FUNDRAISING AND SOLICITATION OF DONATIONS**

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

The Hartnell NAH club provides the means for fundraising for NAH students. Prior written approval from the Advancement and Development Office is required for each separate fundraising activity or drive. See the complete policy: Hartnell College Governing Board Policies and Administrative Procedures.

**GRADING POLICY**

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

**IMMUNIZATIONS**

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

Student health records are submitted at the time of enrollment and updated when necessary. Students validate their immunization and tuberculosis screening status by providing official immunization records and lab reports from healthcare providers. Immunization records, physical exam reports, and American Heart Association BLS cards are placed in the students’ files for easy retrieval when requested by clinical agencies.

**LICENSE ELIGIBILITY**

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

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

- **Nursing:**
  
  Upon completion of a nursing academic program, graduates are eligible to take the licensure exam (NCLEX). Specific NCLEX test information is available from the National Council of State Boards of Nursing.  
  
  Eligibility for licensure as an RN or an LVN is the responsibility of each student. Students are referred to the boards of nursing in the state in which they plan to practice.
  
  Contact Information:
  
  California Board of Registered Nursing  
  1625 North Market Blvd. Suite 11-217  
  Sacramento, CA. 95834-1924 (916) 322-3350.  
  California Board of Registered Nursing

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

- **Respiratory Care:**
  
  Upon completion of the respiratory care academic program, graduates are eligible to take the certification exam from the National Board of Respiratory Care. Specific NBRC test
information is available at The National Board for Respiratory Care. Eligibility for licensure as a respiratory care practitioner is the responsibility of each student. Students are referred to the Boards of Respiratory Therapy in the state in which they plan to practice.

Contact Information:
Respiratory Care Board of California
3750 Rosin Court, Suite 100
Sacramento, CA 95834
Main Telephone: (916) 999-2190; (866) 375-0386. Respiratory Care Board of California

- **Emergency Medical Technician:**
  Upon completion of the emergency medical technician program, graduates are eligible to take the certification exam from the NREMT. Specific NREMT test information is available from the National Registry for Emergency Medical Technicians at National Registry for Emergency Medical Technicians. Eligibility for licensure as an emergency medical technician is the responsibility of each student. Students are referred to the Boards of Emergency Medical Technician in the state in which they plan to practice. The California Emergency Medical Services Authority contact information is as follows:
The Emergency Medical Services Authority
10901 Gold Center Drive, Suite 400 Rancho Cordova, CA 95670
EMSA Main Phone Number: (916) 322-4336 FAX: (916) 322-1441
Paramedic Licensure: (916) 323-9875 Licensure Fax: (916) 324-2875

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

**Medication Administration Errors**
A medication error is defined as a situation in which one or more of the seven “rights” of medication administration is violated. The seven rights are the following:

1. Right person
2. Right drug
3. Right dosage
4. Right route
5. Right time
6. Right documentation
7. Right of refusal
A student who has made a medication error meets with the clinical instructor, agency staff, and/or Assistant Director of Nursing/Director of Clinical Director of Education. After a thorough analysis of the situation and collaboration with the Assistant Director or Nursing or Director of Clinical Education and the dean, the instructor initiates a course of action based on procedures required by the agency, standards set in the Hartnell NAH Policy and Procedure Manual, and principles of Just Culture (see below).

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

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


**NONCOMPLIANCE WITH PROGRAM POLICIES**
Noncompliance with the policies and procedures of Hartnell College, Hartnell College Nursing and Allied Health or clinical affiliates may be grounds for academic failure.

**NOTICE OF ACADEMIC STANDING**
Students receive a *Notice of Academic Standing* from the instructor of record for each course. The notice serves as an early alert to the student; it does not predict failure. The *Notice of Academic Standing* includes the current percentage and current grade. Faculty alerts students to
the Hartnell College semester withdrawal date and resources available for student success. The Notice of Academic Standing is signed by the student and placed in the student file. Copies may be sent to the Dean and the success course instructor.

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

**PHOTOCOPYING AND SUPPLIES**
Multi-function device machines are located around campus. A fee for service is deducted from the student’s CAT Card. Student supplies are not available in the NAH office.

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

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

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

**STUDENT FILES AND RECORDS**
Essential academic and health information for students is stored according to privacy and confidentiality standards for five years after the student graduates or withdraws from the program. Permanent records are kept by Admissions and Records.
NAH student files are stored in locked cabinets. Students may request access to their files through the dean. Students must keep their personal/contact information current in case emergency notification is necessary. NAH student files may include, but are not limited to, the following:

1. Application(s)/Transcripts
2. Acceptance of Course Responsibility form
3. High Fidelity Simulation form
4. AHA BLS Provider certification
5. Correspondence to and from the student (case-specific)
6. Clinical evaluation tools
7. Confidentiality form
8. Licensure for vocational-to-registered nurses
9. Performance Improvement Plans
10. Notification of Academic Standing form
11. Student Information sheet
12. Immunization records, physical examination form, and medical releases
13. Disclosure for DSPS
14. Immunization records
15. Correspondence to and from the student or healthcare provider(s)

TEXTBOOKS AND LEARNING MATERIALS
Textbooks and popular reference books are available in the library and sold at the Hartnell College Bookstore located in the Student Center. Textbooks may be purchased online at the Hartnell Bookstore. The Hartnell College Bookstore accepts all major credit cards, CAT Cards, personal checks, financial aid vouchers, debit cards, and cash.

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

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

1. submit an official transcript from the transferring college with a request for transcript evaluation to the admissions office.
2. submit a copy of the official transcript from the transferring college to Hartnell College Admissions and Records and the NAH office.
3. comply with all clinical requirements as outlined in the respective admissions policies found in the NAH Policy & Procedures

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

**UNIFORMS**
Specific uniform requirements, selected by a faculty/student committee, are detailed in the NAH Policy #7B Dress Code: Students. Patches and the particular lab coat and uniform brand and style number may be obtained from the administrative assistant or from the staff at JT HealthCare Uniforms 918 South Main Street, Salinas. Telephone: 831.424.9439. Hartnell does not benefit from the sale of uniforms or patches. Students may choose an alternate supplier.

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

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

**VISITORS**
Children are not allowed in the skills lab areas unless they are part of a clinical experience. Minors must always be accompanied. Restrictions are in place for the following reasons:
- Safety: Faculty and staff cannot take responsibility for the safety of minors and visitors in the classrooms.
- Confidentiality: Visitors watching students perform skills may violate students’ rights to confidentiality and privacy **FERPA**
ON CAMPUS CLINICAL EXPERIENCES: SKILLS AND SIMULATION LABS GENERAL INFORMATION REVIEW

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

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

SARS TRAK™
To receive credit practicing nursing skills during open lab courses, students must log in and out of the computerized tracking system called SARS TRAK™. The computer is located in B-216. Instructions are in B-216 and in course syllabi for which it is used. RCP and EMT are not required to track practice hours unless directed by faculty.

CLEANLINESS AND MAINTENANCE OF EQUIPMENT, SUPPLIES, AND CLASSROOMS
Everyone is responsible for preserving equipment, supplies, and learning environments. Environments must be left in a manner that is clean and available for full use by others. This includes, but is not limited to, putting away supplies and equipment, wiping down tables, and putting away chairs. Gum, food, and snacks must be enjoyed in areas away from the equipment. Liquids for consumption must be in closed containers.

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

EQUIPMENT AND SUPPLIES
Most supplies used for skills practice are included in the student’s supply kit. There are limited quantities of practice supplies available. Requests for skills lab equipment or competency set-ups must be made at least one day in advance to the Operational Specialist or the lab instructor.

INDIVIDUAL ASSISTANCE
Students desiring individual help from an instructor should make an appointment through Canvas. Non-scheduled one-to-one assistance is dependent on instructor availability.
SIMULATION LEARNING
The NAH simulation lab is a place for practice in a setting that closely replicates a healthcare environment. There is a variety of mannequins and task trainers with varying levels of realism. Students participate in interprofessional simulation learning experiences, which include reflection and evaluation. Simulated learning experiences require signed written acknowledgement of confidentiality and use of recording media.

RESOURCE MATERIALS
Textbooks, journals, and equipment are among the resources available for student use. Additional materials are in Building A.
OFF-CAMPUS CLINICAL EXPERIENCES INFORMATION  
(ALPHABETICAL ORDER)  

**ACCIDENT INSURANCE**
Student accident insurance is the responsibility of the student. Student injuries occurring at the clinical facility/agency during assigned clinical time must be reported immediately to the clinical instructor/preceptor so that the agency’s protocol for work-related injuries is followed. The injured student completes the appropriate accident forms from Hartnell College as soon as possible. The forms are obtained from campus security.

**HEALTH INSURANCE**
Hartnell College does not provide personal health insurance coverage for students.

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

**PROFESSIONAL PRACTICE INSURANCE**
Although students are encouraged to carry professional malpractice insurance, Hartnell College Nursing and Allied Health does not require it. Students are encouraged to research individual insurance plans and consult with insurance professionals.

**PROFESSIONAL BEHAVIOR**
Students, while on campus, in clinical settings, or when representing the Hartnell College NAH, must conduct themselves in a professional manner. Comportment must reflect favorably upon the student, Hartnell College NAH, and Hartnell College. Students are expected to assume responsibility for their actions and are held accountable for them. Behaviors that result in deleterious effects to the academic environment and/or endanger the health or safety of peers, instructors, clients, or other healthcare team members may be grounds for academic failure. Students are disciplined for academic dishonesty and unprofessional conduct. Unprofessional conduct includes, but is not limited to the following:

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

**PROFESSIONAL RISKS**

Interactions with clients in a healthcare environment carry inherent health and safety risks, including exposure to infectious and communicable diseases. Students receive information about lowering risks to self and others and learn skills to implement appropriate precautions. Students are always required to practice standard precautions.

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

**CHRONIC HBV INFECTIONS**
No student is discriminated against because of hepatitis B or C status. All healthcare providers should practice standard precautions, which are designed to prevent HBV transmission, both from individuals to HCP and from HCP to individuals. Those who have HBV levels 1000 IU/mL or 5000 genomic equivalents/mL or higher should not perform exposure-prone procedures. **Ask the Experts Hepatitis B**

The Center for HIV Law & Policy. In the 15 years since these policies were put in place, the limited ways in which HIV transmission is a genuine risk, and the absence of such risk to health care patients, has been solidly confirmed. **Guidelines for HIV-Positive Health Care Workers, the Center for HIV Law & Policy**
SAFE/UNSAFE BEHAVIORS IN LEARNING ENVIRONMENTS (ON- AND OFF CAMPUS)

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

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

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

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

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

Increased safety and surveillance may be needed in certain clinical situations. Unsafe clinical practice is characterized by behavior that threatens or violates the physical, biological, or emotional safety of the client, family, students, faculty, staff, or self. The NAH Student Handbook and Policy and Procedure Manual delineate the minimum safety expectations/guidelines in the clinical setting.

Definition of Unsafe

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

Unsafe conduct is that behavior which is likely to cause injury to others by any act, practice, or omission that fails to conform to the accepted standards and which results from conscious disregard for the health and welfare of the others and includes, but is not limited to, the conduct listed as follows:
- Violating the confidentiality, or releasing information or knowledge concerning the client, except where required by law.
- Failing to assess and evaluate a client's status or failing to implement appropriate interventions which might be required to stabilize a client's condition or prevent complications.
- Knowingly or consistently failing to report or document a client's symptoms, responses, progress, medications, and/or treatments; failing to make entries; destroying entries; and/or making false entries in records pertaining to the giving of medications or treatments.
- Failing to follow the policy and procedure for disposal of medications in effect at the facility at which the student is assigned.
- Diverting, in connection with the professional practice, medications, supplies, equipment, or personal items of the client, employer, or any other person or entity.
- Failing to administer medications and/or treatments in a timely, responsible manner.
- Failing to take all precautionary measures necessary to prevent the loss of, or unauthorized appropriation of, medication(s)/equipment.
- Passing or attempting to pass a forged, altered, or falsified prescription.
- Attempting to perform clinical decisions or procedures, or both, in which the student is untrained by experience or education and without appropriate guidance and supervision by a licensed professional or instructor.
- Causing, suffering, permitting, or allowing physical or emotional injury to the client or failure to report the same in accordance with the incident reporting procedure in effect where the student is assigned.
- Expressly delegating care functions or responsibilities to a person who lacks the ability or knowledge to perform the function or responsibility in question.
- Leaving a student assignment without notifying appropriate personnel.
- Failing to report to NAH, within a reasonable time of the occurrence, any violation of duly promulgated rules, regulations, or prescriptions.
- Providing any information for admission that is false, deceptive, or misleading, or failing to disclose any information that could affect the decision on admission or licensure (felony conviction).
- Failing to meet stated competencies within each course, such that a hazard to a client may occur.
- Falsifying information, written or verbal.
- Reporting to assigned clinical areas under the influence of psychoactive drugs.

**Student Impairment**

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

Hartnell instructors are responsible for identifying, addressing, and documenting problematic behavior, impairment, or actual disability. Instructors complete one of Hartnell’s Behavior Report Forms online. A student whose behavior presents as a threat to the safety of others or self is removed from the clinical setting. The faculty addresses the behavior with the student and stipulates actions needed to return to the clinical or learning environment (e.g., doctor’s note stating the student is safe to return to class/clinical). The instructor immediately notifies the dean and/or appropriate personnel of an incident that threatens or violates the physical, biological, or emotional safety of students, clients, families, peers, or staff members. The team will develop further plans of action in collaboration with the dean, students, and student support providers to make efforts to change behavior to meet course expectations by seeking assistance from faculty and/or healthcare providers. A verbal and/or written warning of problematic behavior with a Performance Improvement Plan that includes recommendations, timetable, and resources is completed by the instructor and reviewed by the team.

The student is responsible to read and seek clarification of Hartnell College Catalog and academic policies and procedures such as Hartnell College NAH Student Handbook and Policy and Procedure Manual (#8 Student Impairment). The student is responsible for notifying faculty of record if unable to provide safe care for assigned clients in the clinical setting or if unable to meet course objectives because of a disability or impairment. The individual must seek diagnosis and/or treatment (from a healthcare professional) for any condition that may result in unsafe situations. The student is expected to withdraw with “W” before the deadline to repeat the course if unwilling/unable to change behavior to meet course expectations. If the student fails to withdraw from the course after the last day to withdraw, the student will be dismissed from the academic program.

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

Unsafe or unprofessional behavior may also be identified in the classroom, skills lab, and/or simulation learning environments. For further information please refer to the following resources:

- NAH Policy and Procedure Manual - #8 – Student Impairment
Unsafe or unprofessional behavior noted in, but not limited to, the clinical, classroom, skills lab, and/or simulation learning environment may result in the following:

- Immediate removal from the clinical site
- Performance Improvement Plan
- An evaluation conference that includes members of the Hartnell College support services
- Academic failure

**Social Media**

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

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

Health examination requirements include the following:

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

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

**Tuberculosis Testing:**
- Must always be current during the program.
- A 2-step process is used for the first Tuberculin Skin Test (TST). The first TST is placed and may/may not be read. One week to one month later, the second TST is placed and read within 48-72 hours. The size of reaction to the second TST must be measured in millimeters and recorded. After the initial test, the TST is a one-time procedure and must be repeated annually.
- The tuberculosis (TB) blood test may be used instead of the TST. It must be repeated annually. The types of TB Blood tests are the following:
  - QuantiFERON® – TB Gold In-Tube test (QFT–GIT)
  - SPOT® TB test (T–Spot)
- A 2-step process is used if the student switches to a TST after receiving a QuantiFERON the year before.
- Positive TB test:
  - A chest X-Ray is required only if the TB skin test is positive.
  - A history of a positive TB skin test requires a report of a negative chest X-ray.
  - Students with positive TB skin tests complete a Tuberculosis Questionnaire on admission and annually.
  - Students must report symptoms of TB, such as fevers, cough, night sweats, and recent weight loss to the clinical instructor. If positive for any of the above symptoms, a new X-ray is required.

IMMUNIZATIONS: HCP GUIDELINES FOR STUDENT INOCULATIONS

- Measles/Mumps/Rubella – Two combination-MMR vaccines, given 4 weeks apart, or a measles titer showing proof of antibodies to measles.
- Hepatitis B – If previously unvaccinated, 2-dose series of Heplisav-B at 0 and 1 month or a 3-dose series of either Engerix-B or Recombivax HB at 0, 1, and 6 months. Because students perform tasks that may involve exposure to blood or body fluids should be tested for hepatitis B surface antibody (anti-HBs) 1-2 months after dose #2 of Heplisav-B or dose #3 of Engerix-B or Recombivax HB to document immunity.
- Influenza – One dose of influenza vaccine annually. Inactivated injectable vaccine is given IM except when using the intradermal influenza vaccine. Live attenuated influenza vaccine (LAIV) is given intranasally.
- Varicella-zoster (chickenpox) – Two 2 doses of varicella vaccine, 4 weeks apart if no serologic proof of immunity, prior vaccination, or diagnosis/verification of a history of varicella or herpes zoster (shingles) by a healthcare provider.
- Tetanus, diphtheria, pertussis – One dose of Tdap if no previous Tdap and to pregnant student healthcare workers with each pregnancy. TD boosters every 10 years

Immunization Action Coalition (2017). Healthcare personnel vaccination recommendations. CDC Vaccine Recommendations

BASIC LIFE SUPPORT (BLS) PROVIDER CERTIFICATION

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

CRIMINAL BACKGROUND CLEARANCE

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

URINE DRUG SCREEN

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

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

Disability is defined as (1) physical or mental impairment that substantially limits one or more of the major life activities of such individuals; (2) a record of such impairment; or (3) being regarded as having such impairment. Disabilities include, but are not limited to physical, visual, hearing, medical and long-term disabilities, mental health disorders (anxiety), attention deficit disorders (ADD), attention deficit/hyperactivity disorders (ADHD), or other learning disabilities.

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

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

TECHNICAL STANDARDS

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

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

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

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

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Standards</th>
<th>Examples</th>
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<tbody>
<tr>
<td>Acquiring fundamental knowledge</td>
<td>● Ability to learn in classroom and educational settings&lt;br&gt;● Ability to find sources of knowledge and acquire the knowledge&lt;br&gt;● Ability to be a life-long learner&lt;br&gt;● Novel and adaptive thinking</td>
<td>● Acquire, conceptualize and use evidence-based information from demonstrations and experiences in the basic and applied sciences, including but not limited to information conveyed through online coursework, lecture, group seminar, small group activities and physical demonstrations&lt;br&gt;● Develop health care solutions and responses beyond that which is rote or rule-based</td>
</tr>
<tr>
<td>Developing communication skills</td>
<td>● Communication abilities for sensitive and effective interactions with patients (persons, families and/or communities)&lt;br&gt;● Communication abilities for effective interaction with the health care team (patients, their supports, other professional and non-professional team members&lt;br&gt;● Sense-making of information gathered</td>
<td>● Accurately elicit or interpret information: medical history and other info to adequately and effectively evaluate a client or client’s condition&lt;br&gt;● Accurately convey information and interpretation of information using one or more means of communication (verbal, written, assisted, and/or electronic) to clients and the health care team&lt;br&gt;● Effectively communicate in teams&lt;br&gt;● Determine a deeper meaning or significance in what is being expressed</td>
</tr>
</tbody>
</table>
| **Interpreting data** | ● Ability to observe patient conditions and responses to health and illness  
● Ability to assess and monitor health needs  
● Computational thinking  
● Cognitive load management | ● Connect with others to sense and stimulate reactions and desired interactions  
● Obtain and interpret information from assessment maneuvers  
● Obtain and interpret information from diagnostic representations of physiologic phenomena during a comprehensive assessment of clients  
● Obtain and interpret information from assessment of a client’s environment and responses to health across the continuum  
● Obtain and interpret for evaluation information about responses to clinical action  
● Translate data into abstract concepts and to understand data-based reasoning |
| **Integrating knowledge to establish clinical judgment** | ● Critical thinking, problem solving and decision-making ability needed to care for persons, families and/or communities across the health continuum and within (or managing or improving) their environments – in one or more environments of care  
● Intellectual and conceptual abilities to accomplish the essentials of the academic program  
● New-media literacy  
● Transdisciplinary Design mindset | ● Accomplish, direct or interpret assessment of persons, families and/or communities and develop, implement and evaluate of plans of care or direct the development, implementation and evaluation of care  
● Critically assess and develop content that uses new media forms, and to leverage these media for persuasive communication  
● Literacy in and ability to understand concepts across disciplines  
● Model knowledge about what is between, across, and beyond disciplines  
● Represent and develop tasks and work processes for desired outcomes |
| **Incorporating appropriate professional attitudes and behaviors into nursing practice** | ● Concern for others, integrity, ethical conduct, accountability, interest and motivation  
● Acquire interpersonal skills for professional interactions with a diverse population of individuals, families, and communities  
● Acquire interpersonal skills for professional interactions with clients, their supports, other health care professionals and team members  
● Acquire skills necessary for promoting change necessary for quality health care  
● Cross-cultural competency  
● Virtual collaboration | ● Maintain effective, mature, and sensitive relationships with clients, students, faculty, staff and other professionals under all circumstances  
● Make proper judgments regarding safe and quality care  
● Function effectively under stress and adapt to changing environments inherent in clinical practice  
● Demonstrate professional role in interactions with clients, intra- and inter-professional teams  
● Operate in different cultural settings (including disability culture)  
● Work productively, drive engagement, and demonstrate presence as a member of a virtual team |

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

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

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

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

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

- **Setting RN Educational Standards:** Establishes educational standards for nursing programs
- **Approving California Nursing Programs:** Approximately 120 approved nursing programs meet BRN educational standards.
- **Evaluating Licensure Applications:** Evaluates whether the applicant meets all licensure requirements. To be licensed, the applicant must
  - complete educational requirements
  - pass a national licensing examination
  - be cleared through a background check for conviction of any crime which might make the applicant ineligible for licensure
- **Issuing and Renewing Licenses:** The license must be renewed every two years
- **Issuing Certificates:** The BRN issues certificates to eligible public health nurses, nurse practitioners, nurse anesthetists, nurse midwives, and clinical nurse specialists.
- **Taking Disciplinary Action:** The BRN may take disciplinary action against the nurse's license for a violation of the Nurse Practice Act. Grounds for discipline focus on behaviors that place clients at risk of harm. Disciplinary action is dependent on the nature and severity of the violation and what is necessary to protect the public; the disciplinary action becomes a part of the RN's file and is accessible to the public.
- **Managing a Diversion Program:** The BRN's Diversion Program is an alternative to the
discipline process for nurses whose practice may be impaired due to chemical dependency or mental illness. This confidential program protects the public while enabling the nurse to be rehabilitated.

*Operating an Online License Verification System:* The BRN's online License Verification system allows the consumer to validate the status of a nurse's license to learn if the person is licensed as an RN and if:
  - the license is active, inactive, or lapsed
  - the nurse has any BRN certificates
  - there is any disciplinary action against the license

**BRN Regulations**
The BRN regulates more than 450,000 California registered nurses providing healthcare services in a variety of settings. Regardless of the title or setting, the registered nurse's practice is governed by the BRN. Titles used in clinical practice include
  - nurse anesthetist (CRNA)
  - nurse midwife (NMW)
  - clinical nurse specialist (CNS)
  - nurse practitioner (NP)
  - public health nurse (PHN)

**Settings where registered nurses practice include**
  - health departments
  - health maintenance organizations
  - home health agencies
  - schools
  - private practice
  - hospitals and skilled nursing facilities

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

**BRN CONTACT INFORMATION**
Board of Registered Nursing (BRN)
P.O. Box 944210, Sacramento, CA 94244-2100
(916) 322-3350
TTY for the Hearing Impaired: (800) 326-2297 CA Board of Registered Nursing
BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS

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

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

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

BVNPT Consumer Protection
To protect the public, the BVNPT

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

The Board is responsible for examination and licensure of over 9,500 VN applicants and 1,000 PT applicants annually. The Board contracts with the National Council of State Boards of Nursing, Inc. for the year-round computer-adaptive vocational nurse licensure examination (NCLEX) administered at over 200 test centers nationwide. After an application has been approved, the applicant receives an Authorization to Test. The applicant is then responsible for scheduling an appointment for the NCLEX-PN.
A licensed vocational nurse is an entry-level healthcare provider who is responsible for rendering basic nursing care. A vocational nurse practices under the direction of a physician or registered nurse. The licensee is not an independent practitioner.

**BVNPT Curricular Requirements:**
Licensed vocational nursing programs must consist of 1,530 total instructional hours:
- Theory: 576 hours, which includes 54 hours of pharmacology for nurses
- Clinical: 954 hours

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

**Employment:**
There are more than 200,000 licensed vocational nurses in California providing healthcare services in a variety of settings. Regardless of setting, the vocational nurse's practice is governed by the BVNPT.
- Acute Medical/Surgical Hospitals
- Long Term Care, Skilled Nursing Facilities, Home Care Agencies
- Outpatient Clinics and Ambulatory Surgery Centers
- Doctor's Offices
- Dialysis Centers
- Blood Banks
- Psychiatric Hospitals
- Correctional Facilities
- School Districts
- Vocational Nursing Programs

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

**Contact Information**
Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive, Suite 205
Sacramento, CA 95833
(916) 263-7800  CA Board of Vocational Nursing and Psychiatric Technicians
ACCREDITATION COMMISSION FOR EDUCATION IN NURSING, INC.

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

Hartnell College’s nursing programs received initial national accreditations in March 2017. The Hartnell ADN program was the 25th ADN program in California to receive ACEN accreditation. The Hartnell VN program was the 1st VN program in California to receive this accreditation. The next continued accreditation site visit is scheduled for fall 2021.

CONTACT INFORMATION
ACEN
3343 Peachtree Rd NE #850, Atlanta, GA 30326
(404) 975-5000 ACEN
COMMISSION ON ACCREDITATION FOR RESPIRATORY CARE

The Hartnell College Respiratory Care Practitioner Program holds continuing accreditation from the Commission on Accreditation for Respiratory Care (CoARC). CoARC’s mission is to serve the public by ensuring high quality respiratory care education through accreditation services. The respiratory curriculum is dynamic and ever-changing.

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

CONTACT INFORMATION
Commission on Accreditation for Respiratory Care
1248 Harwood Road Bedford, TX 76021-4244
(817) 283-2835 COMMISSION ON ACCREDITATION FOR RESPIRATORY CARE.
RESPIRATORY CARE BOARD OF CALIFORNIA

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

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

RCB Regulations
The RCB regulates California respiratory care practitioners. More than 29,000 RCP licenses have been issued in the State of California. Regardless of the title or setting, the RCPs practice is governed by the Respiratory Care Board.
Settings where Respiratory Care Practitioners practice include
- health departments and health maintenance organizations
- home health agencies
- schools and private practice
- hospitals and skilled nursing facilities

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

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

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

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

GENERAL DENIAL
Certification of individuals convicted of certain crimes present an unreasonable risk to public health and safety. Thus, applications for certification by individuals convicted of the following crimes will be denied in all cases.

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

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

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

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

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

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

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

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

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

- Development of statewide standards for all prehospital personnel
- Development, adoption, implementation, and maintenance of regulations for each level of personnel
- Resolution of policy issues and development of policies as necessary
- Provision of technical assistance regarding regulations and policies to LEMSAs, pre-hospital care providers including fire agencies and ambulance companies, EMS personnel, persons seeking required training, and training program administrators
- Review and approval of Statewide Public Safety Emergency Medical Responder (EMR), EMT and Refresher Training Programs
- Maintenance and technical assistance for the statewide Emergency Medical Services Personnel Registry, a database providing the certification and licensure status for all EMS personnel in California.
CONTACT INFORMATION
The Emergency Medical Services Authority
10901 Gold Center Drive, Suite 400, Rancho Cordova, CA
EMSA Main Phone Number: (916) 322-4336
Paramedic Licensure: (916) 323-9875
Licensure Fax: (916) 324-2875
PROFESSIONAL NURSING ORGANIZATIONS

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

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

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

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

**Organization for Associate Degree Nursing**
OADN is the leading advocate for associate degree nursing education and practice and promotes academic progression of graduates in furthering education to reach their maximum professional potential. OADN collaborates with national nursing organizations to ensure the voice of associate degree nursing remains at the forefront to promote academic progression. Association of Associate Degree Nursing

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

**NATIONAL ASSOCIATION FOR PRACTICAL NURSE EDUCATION AND SERVICES, INC.**
The National Association for Practical Nurse Education and Service, Inc. (NAPNES) is the world’s oldest LPN/LVN Association. NAPNES is dedicated to promoting and defending the practice, education and regulation of Licensed Practical Nurses (LPN), Licensed Vocational Nurses (LVN), Practical Nursing Educators, Practical Nursing Schools, and Practical Nursing Students. NAPNES has constituent state members throughout the U.S. NAPNES is the organization that is responsible for the legislation that provides for the licensure, and education of practical nursing in the United States. Founded in 1941 by Practical Nursing Educators, NAPNES has become a multi-disciplinary organization that welcomes not only LPNs/LVNs, but also RNs, MDs, student practical nurses, practical nursing educators, practical nursing schools, agencies, organizations, lay community and other individuals that are interested in promoting the professional practice, and education of practical nurses.

**ADDITIONAL PROFESSIONAL NURSING ORGANIZATIONS**
Additional professional organizations can be researched at the following websites:

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

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

**CALIFORNIA SOCIETY FOR RESPIRATORY CARE**
The California Society for Respiratory Care (CSRC), as an affiliate of the American Association of Respiratory Care (AARC), is a non-profit professional organization, whose mission is to represent and support our members through public and legislative advocacy, educational opportunities, and to continuously strive for excellence in the cardiopulmonary profession. By these means, the CSRC is committed to health, healing, and disease prevention in the California community. California Society for Respiratory Care
HARTNELL COLLEGE
NURSING AND ALLIED HEALTH PROGRAM FORMS

STUDENT ACCEPTANCE OF COURSE RESPONSIBILITIES

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

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

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

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

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

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

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

Student Name (print)
Student Signature
Date
HARTNELL COLLEGE  
NURSING AND ALLIED HEALTH PROGRAM  

CONFIDENTIALITY AGREEMENT

Students in Nursing and Allied Health academic programs participate in simulated patient care experiences and environments. Simulation experiences are designed for learning and improving performance in client care situations. Student participation may be active or observational.

Simulation exercises involve equipment, documents, and situations with clients, family members, caregivers, healthcare personnel, faculty, and others.

Students are expected to maintain strict confidentiality about events and procedures that take place during the simulation experience. Material that must remain confidential includes information obtained prior to the actual simulation, during the simulation, and during the debriefing portion of the simulation. Students cannot share information regarding their experiences or the performances of others.

- I agree to maintain strict confidentiality about details of the scenarios, my performance, performance of participants, and other events regarding the simulation exercises.

VIDEOTAPING AND RECORDING

- I understand that my simulation experiences may be video and/or audio recorded and used during the debriefing portion of the simulation exercise with participating faculty and students. I understand that recordings will be deleted following completion of the learning activity.

Signature ___________________________________________________________

Print Name ___________________________________________________________

Date ___________________________
HARTNELL COLLEGE NURSING AND ALLIED HEALTH PROGRAM
NOTICE OF ACADEMIC STANDING

Date:
Course:

Student Name:
Your percentage to date is_____________.

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

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

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

• I know the date to withdraw from this course with a “W.” If I choose not to withdraw, I know that I will earn a “D” or “F” for the course should I fail to achieve a 70% minimum.

• I am aware of the resources available to me by the course instructors, clinical faculty/professional experts, Hartnell College academic counselors, and Hartnell College’s student services. I understand how to access my resources so that I may formulate an educational plan that best addresses my needs.

Student Signature Date
Instructor Signature Date
Original to Student File
Performance Improvement Plan

Date:

Student Name:

Course:

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

<table>
<thead>
<tr>
<th>Learning Objective</th>
<th>Performance/Behavior</th>
<th>Identified Deficiency</th>
<th>Expected Outcomes</th>
<th>Student Outcomes</th>
<th>Resources Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>(#)</td>
<td>(Data)</td>
<td>(Data)</td>
<td>(Expected performance)</td>
<td></td>
<td>(Resources specific to performance)</td>
</tr>
</tbody>
</table>

Student’s Plan for achieving the outcomes/goals:

Summary:

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

Student/Date  ______________________________________________________

Instructor/Date  __________________________________________

Dean, NAH/Date  __________________________________________
Hartnell College Nursing and Allied Health 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 support the challenge.

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

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

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

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

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
Hartnell College Nursing and Allied Health

AUTHORIZATION FOR BACKGROUND CHECKS, DRUG SCREENING AND DISSEMINATION OF RESULTS

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

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

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

• I understand that maintaining health clearances and a current AHA BLS for Providers card are contractual requirements with the agencies. I understand that expired clearances disqualify me from attending clinical classes, which might result in a clinical failure caused by an inability to complete clinical course objectives.

• I authorize dissemination of a letter confirming compliance with background check, drug screens, and health screens to clinical agency liaisons as deemed necessary. I understand that Hartnell College will provide the actual records to the requesting party if the requesting party is required by federal or state law or regulations to produce background information to which the student records relate.

Printed Name ____________________________________________ Date _____________

Sign.____________________________________ ID Number ____________Circle: RCP RN VN
Faculty, students, and administrative staff share the responsibility of ensuring the honesty and fairness of the intellectual environment at Hartnell College. This statement on academic integrity applies to NAH students at Hartnell College. All students are expected to adhere to the highest standards of ethical behavior expected of healthcare professionals.

The purpose of the Academic Integrity statement is threefold:

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

**Definitions**

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

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

Unauthorized use of commercial "research" services such as term paper mills.
Providing information to others without the instructor’s permission or allowing the opportunity for others to obtain information that provides the recipient with an advantage on an exam or assignment.

- Unauthorized communication with fellow students during a quiz or exam.
- Copying material, in part or in whole, from another student’s quiz or exam.
- Permitting another student to copy from a quiz or exam.
- Permitting another person to take a quiz, exam, or similar evaluation in lieu of the enrolled student.
- Using unauthorized materials, information, or study aids (e.g., textbook, notes, data,
images, formula list, dictionary, calculator, etc.) in any academic exercise or exam.

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

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

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

**Fraud, Misrepresentation, and Lying** are defined as intentionally making an untrue statement or deceiving. Fraud, misrepresentation, and lying include but are not limited to the following:

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

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

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

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

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

**Facilitating Academic Dishonesty** is defined as assisting another to commit an act of academic dishonesty. Facilitating academic dishonesty includes but is not limited to the following:

● Taking a quiz, exam, or similar evaluation in place of another person.
● Allowing one student to copy from another.
● Attending a course posing as another student who is officially registered for that course.
● Providing material or other information (e.g., a solution to homework, a project or other assignments, a copy/screenshot of an exam, exam key, or any test information) to another
student with knowledge that such assistance could be used to violate any other sections of this procedure.

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

**Upholding Academic Integrity**

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

**Student Responsibility**

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

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

- use, copy or paraphrase the results of another person’s work and represent that work as his/her own, regardless of the circumstances.
- refer to, study from, or copy archival files (e.g., old tests, homework, or client assignments) that were not approved by the instructor.
- copy another’s work or to permit another student to copy his/her work.
- submit work as a collaborative effort if he/she did not contribute a fair share of the effort.
- falsify official or unofficial records related to academic status, clinical requirements, client data, or admission materials.
- intentionally misrepresent self or others

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

- enclose every quotation in quotation marks and acknowledge its source.
- cite the source of every summary, paraphrase, abstraction or adaptation of material originally prepared by another person and any factual data that is not considered common knowledge. Include the name of author, title of work, publication information and page reference.
- acknowledge material obtained from lectures, interviews, or other oral communication by citing the source (name of the speaker, the occasion, the place, and the date).
- cite material from the internet as if it were from a traditionally published source. Follow the APA citation style or requirements of the instructor for whom the work is produced.
**Faculty Responsibility**
Instructors are strongly encouraged to report incidents of student academic misconduct to the Dean of Academic Affairs, NAH in a timely manner so that the incident may be handled fairly and consistently. Proctors and student teaching assistants are expected to report instances of student misconduct to their supervising instructors. Instructors are expected to respond to student concerns about academic dishonesty in their courses.

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

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

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

- I have read and understand the definitions of academic dishonesty and practices to avoid academic misconduct.
- I understand that I am responsible for upholding academic integrity and ethical responsibilities.
- I understand that I have the right to appeal a charge of academic dishonesty. I know to contact the Director of Student Affairs within five working days of notification of a disciplinary action.

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