ASSOCIATE DEGREE NURSING

Student Handbook

2019-2020

-Nursing Program Core Values-

Excellence

Integrity • Innovation • Compassion • Respect

Life-Long Learning • Student Centered • Leadership
# Table of Contents

Statement of Commitment ............................................................................................................................... 1

Mission, Philosophy, & Student Learning Outcomes *(Policy I.1)* ................................................................. 2-6

Program Curriculum ........................................................................................................................................... 7

Nursing Master Program Evaluation *(Policy I.2)* ............................................................................................ 8

Nursing Program Evaluation Academic Year 2017-2018 .............................................................................. 9-18

ANA Code of Ethics for Nurses ....................................................................................................................... 19

Academic Honor Code .................................................................................................................................. 20-21

Professional Behaviors ................................................................................................................................ 22

Communications Channels ............................................................................................................................... 23

Board Policy 5401-Student Conduct ............................................................................................................. 24-36

Board Policy 5505-Grade Grievance ............................................................................................................. 37-42

FAQs Regarding Prior Convictions .................................................................................................................. 43-45

Board of Registered Nursing- Policy Statement on Denial of Licensure...................................................... 46-47

Board of Registered Nursing Statutory Authority for Denial of Licensure ................................................ 48-49

Nursing Administration- Faculty & Staff ........................................................................................................ 50

General Information .................................................................................................................................... 51-55

How to obtain Financial Aid .......................................................................................................................... 56

Campus Resources ..................................................................................................................................... 57

Student and Program Policies ......................................................................................................................... 58

Student Input into Nursing Program *(Policy I.3)* .......................................................................................... 59

Credit for Previous Nursing Related Education/Experience *(Policy II.7)* .................................................. 60

Military Personnel Challenge/Advanced Placement *(Policy II.8)* ............................................................ 61-62

Faculty-Student Ratio *(Policy II.9)* ................................................................................................................ 63

Second Year Transfer Student Requirements *(Policy II.10)* ..................................................................... 64

Unsuccessful Theory and/or clinical performance *(Policy II.11)* .............................................................. 65

Examination & Exam Review Process *(Policy III.1)* .................................................................................. 66

Basic Life Support *(Policy III.2)* .................................................................................................................. 67

Nursing Uniform & Professional Appearance *(Policy III.3)* .................................................................... 68-69

Cell Phone Policy *(Policy III.4)* ................................................................................................................... 70

Student Attendance *(Policy III.5)* .................................................................................................................. 71

Counseling Flow Sheet .................................................................................................................................. 72
# Table of Contents Cont’d

<table>
<thead>
<tr>
<th>Policy</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>III.6</td>
<td>Student Illness or Injury</td>
<td>73</td>
</tr>
<tr>
<td></td>
<td>Medical Release &amp; Return to School/ Advisory Statement to the Licensed Health Care Provider</td>
<td>75-80</td>
</tr>
<tr>
<td>III.7</td>
<td>Impaired Nursing Students</td>
<td>81</td>
</tr>
<tr>
<td>III.8</td>
<td>Emotional Health</td>
<td>82-83</td>
</tr>
<tr>
<td>III.9</td>
<td>Make-up Examinations</td>
<td>84</td>
</tr>
<tr>
<td>III.10</td>
<td>Incomplete Grades</td>
<td>85</td>
</tr>
<tr>
<td>III.11</td>
<td>Preceptorship Policy &amp; Procedure</td>
<td>86-89</td>
</tr>
<tr>
<td>III.12</td>
<td>Credit by Examination</td>
<td>90-91</td>
</tr>
<tr>
<td>III.13</td>
<td>Social Media &amp; Use of Technology</td>
<td>92-93</td>
</tr>
<tr>
<td>III.14</td>
<td>Math Competency</td>
<td>94</td>
</tr>
<tr>
<td>III.15</td>
<td>Academic Progression &amp; Grading</td>
<td>95-96</td>
</tr>
<tr>
<td>III.16</td>
<td>Disabled Student Programs &amp; Services</td>
<td>97</td>
</tr>
<tr>
<td>IV.1</td>
<td>Clinical Evaluation &amp; Critical Objectives</td>
<td>98-99</td>
</tr>
<tr>
<td>IV.2</td>
<td>Standard Precautions</td>
<td>100-101</td>
</tr>
<tr>
<td>IV.3</td>
<td>Skills &amp; Computer Lab Policy</td>
<td>102</td>
</tr>
<tr>
<td>V.2</td>
<td>Eligibility for Pinning Ceremony</td>
<td>103</td>
</tr>
<tr>
<td>VI.4</td>
<td>Student Grade Notification</td>
<td>104</td>
</tr>
<tr>
<td>VI.7</td>
<td>Student Feedback</td>
<td>105</td>
</tr>
<tr>
<td>II.6</td>
<td>Acceptance Statement</td>
<td>106-109</td>
</tr>
</tbody>
</table>
STATEMENT OF COMMITMENT

Nursing is both a stressful and rewarding career. In the course of the Nursing Program, you will have many class and clinical objectives to fulfill in order to be successful.

Care plans and other learning activities are required to fulfill course expectations. These are not done during scheduled class hours, and are considered to be homework assignments that will require extra hours of work.

You will need to make time allowances for this work. It is recommended that you discuss these requirements with family members, so they can be understanding and supportive of your academic needs. Commitment to attaining your goal is your responsibility.

It is recommended that you work less than 20 hours a week. If work is financially necessary, it should be planned for weekend and/or holiday time only, preferably in a field that can directly help you in nursing.

Success in the Saddleback College Nursing Program requires:

1. A commitment by the student to make education the top priority during enrollment.
2. A willingness to seek assistance as necessary.
3. The student to take responsibility for his/her own learning by completing readings and assignments on time.

Your faculty wishes you every success. We will work closely with you to help you become the successful nurse you wish to be.
ASSOCIATE DEGREE NURSING PROGRAM

(Policy 1.1)

MISSION, PHILOSOPHY AND STUDENT LEARNING OUTCOMES

The Saddleback College Associate Degree Nursing Program’s mission, beliefs, philosophy and outcomes are congruent with that of Saddleback College and South Orange County Community College District.

THE SADDLEBACK COLLEGE NURSING PROGRAM MISSION IS TO:

- provide high quality, innovative education,
- support student success,
- instill in the learner the need for life-long learning and professional development, and
- prepare competent entry level registered nurses to provide quality patient-centered care

The Saddleback College Associate Nursing Program Mission is aligned with the mission, vision, values, strategic goals and directions of Saddleback College. In addition, the nursing program’s philosophy subscribes to the following beliefs about people and health, nursing, education, and educators, and the teaching/learning process in nursing.

Beliefs about People and Health

- A person is a complex being with biopsychosocial needs that is capable of adapting to internal and external changing environments,
- a person’s health status exists along a continuum,
- Maslow’s hierarchy of human needs is used to prioritize health care needs,
- Erikson and other developmental theorists are used to determine and prioritize psychosocial needs,
- health status is influenced by the person’s development stage, their individual needs, lifestyle choices, culture, race, ethnicity and gender and
- the nursing faculty affirms their belief in the worth and dignity of all persons and the right of the health care consumer to make informed choices regarding personal health.

Beliefs about Nursing and Nursing Process

- Nursing is an art and science integrating the biological and behavioral sciences as well as the humanities,
  - nursing encompasses caring practices, ethical principles, and advocacy within the framework of the nursing process,
  - nursing utilizes theoretical concepts to apply the principles of critical thinking, clinical reasoning, and clinical judgment to apply the nursing process to promote safe, high quality patient-centered care,
- nursing provides culturally competent care to diverse populations in the United States.
nursing recognizes that quality patient-centered care encompasses the whole person: body, mind, and spirit,
the nurse promotes physical, mental, and spiritual wellness by teaching and through example,
the goal of nursing is to provide safe patient-centered care to promote effective outcomes using the nursing process
nursing process is a systematic, dynamic approach to provide care that includes assessment, diagnosis, planning, implementation and evaluation.
nursing integrates effective communication skills (verbal, nonverbal, interpersonal, and communication technology) into the professional nursing role,
nursing stresses health education, health promotion, and illness prevention for the individual and family across the health/illness continuum, and
nursing functions effectively with inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.

Beliefs about Education and Educators

- education inspires and develops a community of diverse learners dedicated to achieving their full potential in a global society,
- educators provide access to learning opportunities that promote student success, intellectual growth, individual expression, and character development,
- educators have a responsibility to recognize previous education and experience of the learner
- educators promote and foster lifelong learning,
- education takes into consideration the learner’s cultural and ethnic background, learning abilities, life experiences, and special needs,
- educators stress high ethical standards, moral values, and integrity that provide a strong foundation upon which to develop professional and personal behaviors,
- education promotes a dynamic environment of innovation and collegiality,
- the educational process occurs through a variety of methods such as the use of technology, simulation, role modeling and role-playing, mentoring, coaching, collaborative teaching and learning, lecture/discussion, case studies, laboratory, and experiential learning,
- educators provide students with a general education gives them an opportunity to develop to their fullest potential- personally and professionally, and,
- educators support the freedom to teach and the guarantee of equal educational opportunity for all persons.

Beliefs about the Teaching/Learning Process in Nursing

- it is the right and responsibility of nurse educators to utilize their knowledge and skills freely to assist students to reach their highest potential,
- students are expected to bring to the nursing program a desire to learn, initiative and self-direction, an open and inquiring mind, a commitment to the profession, and a belief in the worth and dignity of all persons,
• students are responsible for their own learning; the instructors’ major role is to coach, facilitate, role model, and mentor,

• differences in learning styles and in the rate of learning must be considered in the educational process.

• the most effective learning environment is created by a collegial relationship between faculty and students,

• teaching and learning in nursing is built on evidence-based practice and the transfer of information from theory to practice utilizing the nursing process,

• nursing education fosters critical thinking with the development of clinical reasoning and judgment to make clinical decisions

• the nursing faculty accepts the responsibility to maintain expertise in current nursing practice and application of educational theory

• the nursing faculty is responsible for the development and evaluation of the nursing curriculum.

STUDENT LEARNING OUTCOMES

Course Student Learning Outcomes: are learner oriented expectations, written in measurable terms that describe the knowledge, skills, or behaviors students should demonstrate at the end of the course. Course student learning outcomes are aligned with program student learning outcomes and support students’ achievement of End of Program Student Learning Outcomes and overall Program Outcomes.

End of Program Student Learning Outcomes: describe the knowledge, skills and behaviors derived from the program mission, philosophy and beliefs, organizing framework, curriculum and clinical experiences that students should be able to demonstrate at the end of the program. Four End of Program Student Learning Outcomes are the culmination of nursing education in the associate degree nursing program at Saddleback College.

Program Outcomes: are described in the annual Nursing Program Evaluation (Systematic Evaluation Plan) and represent key measurable assessments of program quality and effectiveness and plans for improvement.

I. End of Program Student Learning Outcome: the graduate will integrate biopsychosocial concepts and theories, critical thinking, clinical reasoning, and clinical judgment to apply the nursing process to promote quality patient-centered care.

First Year Student Learning Outcomes:
The Student will:

- utilize biopsychosocial concepts and theories and principles of critical thinking, critical reasoning, and clinical judgment to apply the nursing process for beginning level clinical decision making, and
- apply the nursing process and principles of health teaching, health promotion, illness prevention, and restorative or end of life care to provide quality nursing care to the individual health care consumer.

Second Year Student Learning Outcomes:
The Student will:

- integrate biopsychosocial concepts and theories, critical thinking, critical reasoning, and clinical judgment to apply the nursing process to make clinical decisions for managing the care of individuals, families, and groups of health care consumers, and
- synthesize the nursing process with principles of health teaching, health promotion, illness prevention and restorative or end of life care to provide quality nursing care to the individual healthcare consumer and family members across the life span.
II. End of Program Student Learning Outcome: the graduate will promote and maintain a safe environment by integrating current evidence-based practice, the nursing process, and skill competency to deliver quality health care.

First Year Student Learning Outcomes:  
The Student will:  
  o apply evidence-based nursing principles to safely provide nursing care and skills

Second Year Student Learning Outcomes:  
The Student will:  
  o apply evidence-based nursing principles to safely provide comprehensive nursing care for patients and families in acute and complex care situations.

III. End of Program Student Learning Outcome: the graduate will communicate effectively with patients, families, and the inter-professional health care team to achieve quality patient care.

First Year Student Learning Outcomes are:  
The Student will:  
  o utilize communication skills (verbal, nonverbal, interpersonal, and communication technology) as he/she learns to practice in the professional nursing role, and  
  o apply principles of time management, organization, delegation, and priority setting to provide care for the health care consumer in collaboration with other members of the inter-professional health care team.

Second Year Student Learning Outcomes:  
The Student will:  
  o integrate communication skills (verbal, nonverbal, interpersonal, and communication technology) into the practice of the professional nursing role,  
  o use information technology to communicate, manage knowledge, mitigate error, and support decision-making  
  o collaborate with inter-professional health care team members to manage and coordinate care for patients and families across the health/illness continuum and healthcare continuum.

IV. End of Program Student Learning Outcome: the graduate will demonstrate the knowledge, skills, and attitudes required of the professional nurse as defined by the California Nurse Practice Act and standards of nursing practice.

First Year Student Learning Outcomes:  
The Student will:  
  o assume responsibility and accountability for learning and nursing actions as they are guided in the role of the professional nurse,  
  o utilize developmental theories, concepts of diversity, and culturally competent care for cultural groups in the United States to apply the nursing process to patients  
  o recognize and report legal and ethical dilemmas and potential barriers to safe quality care and  
  o act as a patient advocate

Second Year Student Learning Outcomes:  
The Student will:
• assume responsibility and accountability for lifelong learning and nursing actions as they take on the role of
  the professional nurse,

• synthesize developmental theories and concepts of diversity, and culturally competent care for cultural groups
  in the United States to apply nursing process to patients and families across the life span,

• continuously improve the quality and safety of health care by recognizing and reporting potential areas of risk
  or harm, including legal and ethical dilemmas, and,

• integrate critical thinking, clinical reasoning and clinical judgment to make clinical decisions that support and
  advocate for patients and families based upon ethical and legal principles.

Saddleback College Nursing Program Model Description
The Saddleback College Curriculum model is a graphic representation of the program mission, which is to
prepare competent entry-level registered nurses to provide quality patient centered care. The model’s
constructs of nursing process, professional role, safe environment and communication skills are
interrelated and represent the End of Program Student Learning Outcomes. Each construct integrates the
knowledge, skills and attitudes required to practice as an entry-level registered nurse. The philosophical
underpinnings of Knowles adult learning theory guide the teaching and learning process supporting the
program mission.

Reviewed: 10/17, 9/18
Revised: 9/13/, 4/17
Saddleback College
Division of Health Sciences and Human Services
ASSOCIATE DEGREE NURSING PROGRAM CURRICULUM

PREREQUISITE COURSES

<table>
<thead>
<tr>
<th>Course ID</th>
<th>Title</th>
<th>Units</th>
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<tbody>
<tr>
<td>BIO 11</td>
<td>Human Anatomy</td>
<td>4</td>
</tr>
<tr>
<td>BIO 15</td>
<td>General Microbiology</td>
<td>5</td>
</tr>
<tr>
<td>BIO 12</td>
<td>Human Physiology**</td>
<td>4</td>
</tr>
<tr>
<td>ENG 1A</td>
<td>English 1A</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td><strong>Total Units</strong></td>
<td>17</td>
</tr>
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**Human Physiology must have been completed within the last 7 years.
*Freshman Composition 3 unit equivalent course will be accepted

REQUIRED CORE COURSES (Effective August 2007)

<table>
<thead>
<tr>
<th>Semester</th>
<th>Course ID</th>
<th>Title</th>
<th>Units</th>
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<tbody>
<tr>
<td>I</td>
<td>N 160 *</td>
<td>Pharmacology</td>
<td>3.00</td>
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<tr>
<td></td>
<td>N 165 *</td>
<td>Lifecycle I: Fundamentals of Aging</td>
<td>1.50</td>
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<td></td>
<td>N 170</td>
<td>Nursing Process</td>
<td>7.50</td>
</tr>
<tr>
<td></td>
<td>N 171</td>
<td>Mental Health Nursing</td>
<td>3.00</td>
</tr>
<tr>
<td>II</td>
<td>PSYC 1 *</td>
<td>Introduction to Psychology</td>
<td>3.00</td>
</tr>
<tr>
<td></td>
<td>N 161 *</td>
<td>Lifecycle II: Growth &amp; Development</td>
<td>1.50</td>
</tr>
<tr>
<td></td>
<td>N 172</td>
<td>Medical-Surgical Nursing</td>
<td>8.50</td>
</tr>
<tr>
<td>III</td>
<td>N 173</td>
<td>Nursing Care of Children &amp; Families</td>
<td>3.50</td>
</tr>
<tr>
<td></td>
<td>N 174</td>
<td>Women's Health Nursing</td>
<td>3.50</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>7.00</td>
</tr>
<tr>
<td>IV</td>
<td>Comm 1(or)</td>
<td>Communication Fundamentals (or)</td>
<td>3.00</td>
</tr>
<tr>
<td></td>
<td>Comm 5</td>
<td>Interpersonal Communication</td>
<td></td>
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<tr>
<td></td>
<td>N 176</td>
<td>Advanced Nursing</td>
<td>8.00</td>
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<td></td>
<td></td>
<td>11.00</td>
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<td><strong>Total Units</strong></td>
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<td><strong>46.00</strong></td>
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RECOMMENDED COURSES

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<th>Title</th>
<th>Units</th>
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<tr>
<td>FN 161</td>
<td>Nutrition for Health Occupations</td>
<td></td>
</tr>
<tr>
<td>FN 50</td>
<td>Fundamental of Nutrition</td>
<td></td>
</tr>
<tr>
<td>N 202</td>
<td>Success Strategies in Nursing</td>
<td></td>
</tr>
<tr>
<td>N 263</td>
<td>Skills Lab Basic (must be enrolled in nursing program)</td>
<td></td>
</tr>
<tr>
<td>N 267</td>
<td>Skills Lab Basic (must be enrolled in nursing program)</td>
<td></td>
</tr>
<tr>
<td>HSC 228</td>
<td>Calculations for Medication Administration</td>
<td></td>
</tr>
<tr>
<td>N 245</td>
<td>IV Therapy Techniques for Nurses</td>
<td></td>
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<tr>
<td>HSC 217</td>
<td>Cardiac Dysrhythmias</td>
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<tr>
<td>HSC 226</td>
<td>Advanced Cardiac Life Support</td>
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<tr>
<td>SE 101</td>
<td>Introduction to Therapy &amp; Rehabilitation</td>
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<tr>
<td>HSC 201</td>
<td>Medical Terminology</td>
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</table>

GENERAL EDUCATION REQUIREMENTS

*American Institutions                                        3 units
*Fine Arts and Humanities (1 course each from Group A and Group B) 6 units
*Life Skills                                                  Waived
*Survey and Assessment of Fitness (KNES 107)                   1 unit

Demonstration of Mathematics and Reading Competency required as listed in the College Catalog. Information Competency for Nursing is met with N176. Effective Fall 2009, one Math class beyond Beginning Algebra (Math 353) will be required unless Math 353(previously 251) was completed summer 2009 or earlier.

If Psych 7 was taken prior to August 2007, it will be grandfathered into the program as a substitute for N161.
*Courses can be taken prior to entry into the program

NOTE: *N160, *N161, *GERO 101, *PSYCH I, and *Speech 1 or 5 must be completed with a minimum grade of “C” or better prior to or concurrent with the semester for which they are listed
Saddleback College
ASSOCIATE DEGREE NURSING PROGRAM
(Policy I.2)

NURSING PROGRAM EVALUATION

The Nursing faculty shall review and evaluate the total Nursing Program on a yearly basis via committee structure according to the Master Program Evaluation Plan and Timeline (see attached). Members of standing and ad hoc committees will review and evaluate the following areas according to NLN guidelines and State Board regulations:

a. Philosophy, Purpose, Objectives and Nursing Model

b. Faculty

c. Students, including admission and selection procedures and attrition and retention of students.

d. Curriculum

e. Resources, Facilities, and Services

f. Performance of graduates (see RN Regulations #14229H)

g. Administration

h. Employer of graduates

Nursing policies will also be included for review and updating.

A written report of findings and recommendations will be submitted to the Nursing Program Director for review and inclusion on faculty meeting agenda for discussion and action.
### SADDLEBACK COLLEGE ASSOCIATE DEGREE NURSING PROGRAM
#### Nursing Program Evaluation (Systematic Plan of Evaluation)
**Academic Year 2017-2018 Final**

<table>
<thead>
<tr>
<th>Component</th>
<th>Committee/Person/Group Responsible</th>
<th>Means of Assessment and Expected Level of Achievement (ELA)</th>
<th>Summary of Data Collected (Actual level of Achievement)</th>
<th>Use of Results Actions/Timeframe (For Program Development, Maintenance, Revision, or Improvement)</th>
</tr>
</thead>
</table>
| **EOPSLO 1**  
The graduate will integrate biopsychosocial concepts and theories, critical thinking, clinical reasoning, and clinical judgment to **apply the nursing process** to promote quality patient-centered care. | **Person/Committee/Group Responsible**  
N176 faculty team |  
**Interval of Analysis**  
Every semester and aggregate each academic year  

100% of Students will submit 3 care plans that meet objectives as described in the N176 care plan Grading Rubric and as referenced in the clinical evaluation  
At least 90% of students will meet SLO 1 r/t nursing process and clinical judgement as described on the 176 clinical evaluation tool.  

Fall 17  
100% of students submitted 3 care plans that met objectives, but several students needed to complete more than 3 care maps to demonstrate proficiency.  
100% of students demonstrated the ability to utilize nursing process and clinical judgement per the N 176 clinical evaluation while providing patient care.  

Spring 18  
100% of students submitted 3 care plans that met objectives  
100% of students demonstrated the ability to utilize nursing process and clinical judgement per the N 176 clinical evaluation while providing patient care.  

| | | | | |
| | | | | Continue to provide workshops at the beginning of the semester to review the nursing process.  
| Continue to encourage enrollment in N202 for all incoming students for extra help with nursing process.  
| Refer to Student Success Coordinator and peer mentors to assist in synthesis of the nursing process.  
| Spring 2019 – determine how many students submitted more than 3 care plans to demonstrate proficiency.  |

**Use of Results**  
**Actions/Timeframe** (For Program Development, Maintenance, Revision, or Improvement)  

- Continue referrals to skills lab coordinator for remediation on safe practice: physical assessment, medication administration and communication.  
- Encourage students to:  
  - enroll in summer sills lab class,  
  - to take advantage of skills review in WOW week, and |

| **EOPSLO 2**  
The graduate will promote and maintain a **safe environment** by integrating current evidence-based practice, nursing process, and **skill competency** to deliver quality health care. | **Person/Committee/Group Responsible**  
N176 lead faculty and faculty team |  
**Interval of Analysis**  
Every semester and aggregate each academic year  

At least 80% of students will correctly answer questions r/t to nursing interventions for respiratory distress/respiratory failure.  
95% of students will meet SLO 2 r/t providing safe care on the 176 clinical evaluation tool.  

Fall 17  
88.7% of students answered questions correctly r/t to nursing interventions for respiratory distress/respiratory failure.  
98.2% of the students provided safe nursing care, 1 student dismissed due to safety issues in the clinical setting.  

| | | | | |
| | | | | Continue referrals to skills lab coordinator for remediation on safe practice: physical assessment, medication administration and communication.  
| Encourage students to:  
|  - enroll in summer sills lab class,  
<p>|  - to take advantage of skills review in WOW week, and |</p>
<table>
<thead>
<tr>
<th>Component</th>
<th>Committee/Person/Group Responsible</th>
<th>Means of Assessment and Expected Level of Achievement (ELA)</th>
<th>Summary of Data Collected (Actual level of Achievement)</th>
<th>Use of Results Actions/Timeframe (For Program Development, Maintenance, Revision, or Improvement)</th>
</tr>
</thead>
</table>
| EOPSLO 3  | Person/Committee/Group Responsible  
N176 faculty team | 95% of N 176 students will meet SLO3 r/t communication, the use of information technology and collaborative care on the 176 clinical evaluation tool by the end of the first 8 weeks of N176. | Spring 18  
82% of students answered questions correctly r/t to nursing interventions for respiratory distress/respiratory failure.  
100% of the students provided safe nursing care in N 176 clinical | to identify deficits and remediate before clinical starts |
|          | Interval of Analysis Every semester and aggregate each academic year | Fall 17  
100% of the students successfully communicated, used information technology and provided collaborative care.  
Spring 18  
100% of the students successfully communicated used information technology and provided collaborative care. | Clinical faculty will continue to model effective clinical communication during rotation. |
|          |                                    |                                                             | Faculty will practice SBAR with students on daily rounds in clinical  
Consider professional development activity r/t soft skills with Nursing HWI or Linda by spring 2019.  
Request resources by Jan 2019 to make it possible to increase the use of Information Tech in Smart IV pumps, bar code scanners and EHR patient documentation.  
Consider implementing IPE or simulations with EMTs Medical Assistants and Paramedics to practice “hand off communication.” |
| Component | Committee/Person/Group Responsible | Interval of Analysis | Means of Assessment and Expected Level of Achievement (ELA) | Summary of Data Collected | Use of Results Actions/Timeframe  
(For Program Development, Maintenance, Revision, or Improvement) |
|-----------|-----------------------------------|----------------------|------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------|
| EOPSLO 4  | Person/Committee/Group Responsible  
N176 faculty team | Every semester and aggregate each academic year | 95% of students will meet SLO4 r/t the role of the professional nurse on the 176 clinical evaluation tool  
100% of the students will research and write an APA paper on an assigned topic as it pertains to Professional Development and Nursing Role that is relevant current and accurate as evaluated by the grading rubric for the paper. | Fall 17  
100% of students successfully met the professional role competencies SLO4 r/t the role of the professional nurse on the 176 clinical evaluation tool  
100% of students submitted their written professional development paper. The quality of writing varied significantly.  
Spring 18  
100% of students successfully met the professional role competencies SLO4 r/t the role of the professional nurse on the 176 clinical evaluation tool  
100% of students submitted their written professional development paper. The quality of writing varied significantly. | Continue to introduce students to the Nurse Practice Act in N170 and emphasize throughout subsequent courses each semester.  
Continue to include professional development components throughout the N176 course.  
Continue to attend BRN meetings with N 176 students each semester.  
Encourage student to take elective pre-nursing class N204 which exposes students, in theory, to the registered nurse role. Utilize various assignments to stress importance of professional role.  
Consider requiring students to meet with a reference librarian to increase the quality of the papers, since advisory feedback from academic partners emphasizes the need for increased proficiency with APA format and professional writing. |
<table>
<thead>
<tr>
<th>Component</th>
<th>Committee/Person/Group Responsible</th>
<th>Means of Assessment and Expected Level of Achievement (ELA)</th>
<th>Summary of Data Collected (Actual level of Achievement)</th>
<th>Use of Results Actions/Timeframe (For Program Development, Maintenance, Revision, or Improvement)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance on the NCLEX</td>
<td>Person/Committee/Group Responsible</td>
<td>ELA = &gt; 90% of all graduates will pass the NCLEX (1st attempt).</td>
<td>2017/2018 NCLEX success = 98% of first-time candidates (105 students). Based on graduates testing from current academic year.</td>
<td>Continue to utilize standardized texting as a benchmark for success on NCLEX. Continue to encourage students to attend NCLEX review courses. Continue to support students with grant funding to offset cost of review course for students with standardized benchmark scores below 90% for predictor of success in passing.</td>
</tr>
<tr>
<td>Program Completion Monitor Completion per BRN and ACEN guidelines</td>
<td>Person/Committee/Group Responsible</td>
<td>NCSBN / Mountain Measurement or BRN report</td>
<td>Completion per BRN guidelines 95.5% (107/112)</td>
<td>Continue - Student Success Coordinator, peer mentoring, and nursing tutors at the LRC are all factors that contribute to favorable program completion rates. Continue to utilize multi-criteria selection process and correlate to successful completion and retention throughout the program.</td>
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<tr>
<td>Job Placement Graduate Survey Perkins Core Indicators</td>
<td>Person/Committee/Group Responsible</td>
<td>Employment ELA = 80% of students are employed within 12 months of graduation. Job placement is evaluated each semester through a group effort using a combination of emails, phone calls and faculty reports from clinical areas.</td>
<td>Based on email survey: 60/112 responses (53.6%). Responses for working in nursing 49/60 = 81.7%.</td>
<td>Will continue to solicit employment information using personal email and electronic surveys. College Office of Research is working with Director and Dean to improve survey responses</td>
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</tbody>
</table>
# Nursing Program Evaluation (Systematic Plan of Evaluation)

## Academic Year 2017-2018 Final

<table>
<thead>
<tr>
<th>Component</th>
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<tbody>
<tr>
<td><strong>Nursing Program Goal:</strong> Produce graduates who demonstrate the knowledge skills and behaviors of a competent entry-level professional nurse.</td>
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<td>Continued work on approving attrition rate (school initiated):</td>
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<tr>
<td>Graduates will successfully meet <strong>End of Program Student Learning Outcomes (EOPSLOs)</strong> for the nursing program.</td>
<td>Person/Committee/Group Responsible: Director - Each nursing team, nursing faculty and Educational Effectiveness committee</td>
<td>Interval of Analysis: Every semester</td>
<td>Student success is measured each semester by course completion for each theory and clinical nursing course. ELA for success = program attrition &lt; 15% per academic year.</td>
<td>Early referrals to Student Success Coordinator. Anne Lawson, full-time professor, is the current coordinator. As students are referred, Prof Lawson reviews student work one-on-one, connects students with peer mentors, refers to LRS for tutoring, and assists students in identifying study skills for success through the program.</td>
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<td>Tutoring by prior and current nursing students in the LRC, supported by institution.</td>
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<td>Consider care plan/mapping workshop and skills workshops in the week prior to the start of each semester.</td>
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<td>Elective classes to support supplemental learning include: drug calculations, lab interpretation, IV skills. Referrals to these classes are part of remediation and re-entry plans, as well as electively to strengthen skills and abilities.</td>
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<td>Again, completing Pharmacology and Gero are strongly encouraged.</td>
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### Other Program Components

**Fall 17 total = 8**
- Theory attrition (T) = 1
- Clinical attrition (C) = 3
- Personal (P) = 4
- LVNs = 0

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**Spring 18 total = 7**
- Theory attrition = 2
- Clinical attrition = 3
- Personal = 1
- LVNs = 1 (N174 Theory)

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**✓ Total Attrition = 15 = 3.3%**
- F = 8/228 = 3.5%
- S = 7/225 = 3.1%
- Retention = 96.7%
### Institutional Mission

Saddleback College enriches its students and the south Orange County community by providing a comprehensive array of high-quality courses and programs that foster student learning and success in the attainment of academic degrees and career technical certificates, transfer to four-year institutions, improvement of Basic Skills, and lifelong learning.

The nursing program mission and philosophy are congruent with the mission and vision of the institution.

**Person/Committee/Group Responsible**

Educational Effectiveness committee

**Interval of Analysis**

Annually

**THE SADDLEBACK COLLEGE NURSING PROGRAM MISSION IS TO:**

- provide high quality, innovative education,
- support student success,
- instill in the learner the need for lifelong learning and professional development, and
- prepare competent entry level registered nurses to provide quality patient centered care.

**Means of Assessment and Expected Level of Achievement (ELA)**

Nursing Mission Statement is reviewed if changes are made to the college mission statement.

Nursing mission statement is updated for congruency and alignment to the college mission statement.

**Summary of Data Collected (Actual level of Achievement)**

The mission and vision were reviewed during the drafting of the self-study report for BRN reapproval in spring 2017.

No changes were made to the college mission, so the missions remained aligned and congruent.

**Use of Results Actions/Timeframe**

PRIOR to admission into the program.

BRN site displays retention rate. Continue to be transparent and include retention and attrition information on our internal website.

Suggested to have elements from the nursing mission statement incorporated into faculty meetings.

Continue to have regular faculty retreats for comprehensive work on reviewing elements of the program.

### Faculty

All faculty are qualified and provide leadership and support to attain the goals and

**Person/Committee/Group Responsible**

Director of Nursing and Assistant Directors

**Methods of Assessment and Expected Level of Achievement (ELA)**

Faculty evaluations are completed every three years with all faculty in good standing.

Full time tenured faculty evaluations are current, and all faculty are in good standing.

**Use of Results Actions/Timeframe**

Continue to mentor part-time faculty.
<table>
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<tr>
<td>outcomes of the nursing education unit.</td>
<td>Nursing students</td>
<td>Interval of Analysis: Annually for Tenure track probationary faculty. Every three years for full-time faculty. Part-time faculty are evaluated during their first semester and at least every six semesters. All faculty are evaluated as part of course evaluation every semester.</td>
<td>Faculty Licenses and certifications reviewed annually and current. ELA for Class Climate = 3.7 (1 – 5 Likert scale).</td>
<td>Part-time evaluations are current. Two full-time tenured faculty accepted early retirement and one full-time tenured faculty was out on sabbatical for the 17-18 academic year. SharePoint (secure internal drive) is used to house faculty records, including license, CEU, vaccination records, etc. Class Climate scores are above threshold with respect to faculty support through lecture and clinical experiences. Class climate surveys show that faculty are supportive and contribute to student goal achievement</td>
<td>Part-time faculty evaluations to be completed by director and assistant directors. Continue to assign mentors for new full-time faculty. Continue to support faculty professional development through conference attendance. Faculty directed to maintain electronic records.</td>
</tr>
<tr>
<td>Program Admission Generic Students</td>
<td>Person/Committee/Group Responsible</td>
<td>Enrollment Management Committee Interval of Assessment: Applications are evaluated each semester using a multi-criteria scoring system for admission in fall and spring.</td>
<td>ELA ≥ 90% of all students admitted complete. Assess attrition data to identify factors associated with success or failure.</td>
<td>5 students dropped (withdrew) the program in 2017 – 2018 academic year citing various reasons including: “nursing is not for me”, working too many hours and mental health concerns.</td>
<td>Continue to evaluate reasons for withdrawal from program. Continue to refer students to Student Health Center. Consider utilizing grant funding source to alleviate financial burdens for basic survival elements. Continue using multi-criteria selection process for entry to program. Continue to promote N204 (Beginning Nursing Concepts) as it provides information on the...</td>
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<tr>
<td>Component</td>
<td>Committee/Person/Group Responsible</td>
<td>Interval of Analysis</td>
<td>Means of Assessment and Expected Level of Achievement (ELA)</td>
<td>Summary of Data Collected (Actual level of Achievement)</td>
<td>Use of Results (Actions/Timeframe)</td>
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<tr>
<td>Program Admission LVN/Transfer Students</td>
<td>Person/Committee/Group Responsible Enrollment Management Committee</td>
<td>Every semester</td>
<td>ELA ≥ 90% of all students admitted complete.</td>
<td>1/11 (9%) LVN attrition LVN Retention = 90.9%</td>
<td>LVN students assimilate into the program well. They are welcomed by clinical groups and add to the robust discussions in post-conference. They bring forward clinical skills. Approximately 7 LVN students who have completed the transition course still await invitation into the program. Continue to place LVNs into slots as they become available.</td>
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<tr>
<td>Students Satisfaction</td>
<td>Person/Committee/Group Responsible All nursing faculty each theory and clinical course</td>
<td>Every semester</td>
<td>Average student scores in theory and clinical Class Climate surveys Theory/Clinical ELA for Class Climate = 3.7 (1 – 5 Likert scale)</td>
<td>Theory satisfaction &gt; 4.1 on a 1 – 5 scale for all criteria except for ATI.</td>
<td>Lowest scores continue to be on ATI materials. After reviewing multiple semesters of feedback, the Educational Effectiveness committee instituted a pilot with a new online learning platform - HESI. Results for the new program were favorable. Faculty voted to change from ATI to HESI, with implementation in Fall 2018. Continued comments regarding obstacles in some clinical area: like access to meds/med rooms and access to EMR. Some institutions place constraints out of the control of the program.</td>
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<tr>
<td>Students Satisfaction</td>
<td>Person/Committee/Group Responsible N 176 lead faculty</td>
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<td>Student Satisfaction Class Climate surveys ELA for Class Climate = 3.7 (1 – 5 Likert scale)</td>
<td>Student satisfaction with program 4.9 – 5 for all elements (on a 1 – 5 scale).</td>
<td>Students continue to report high satisfaction with the program. Qualitative comments remain overwhelmingly high. Negative</td>
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<td><strong>Interval of Analysis</strong></td>
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<td>feedback related the use of ATI with respect to value for cost. Educational Effectiveness committee developed a pilot plan to evaluate HESI as the computer-based learning platform spring 2018 in N172.</td>
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<tr>
<td><strong>Graduate Program</strong></td>
<td>Person/Committee/Group Responsible</td>
<td>Every semester</td>
<td>Graduate Survey using Class Climate surveys</td>
<td>Due to the low return on Class Climate Surveys, the program did not administer them at the 12-month mark in 2017-18.</td>
<td>The Educational Effectiveness is looking at other methods to collect data. Considering a text survey link with minimal questions to increase responses. Director working with Institutional research to increase responses to survey.</td>
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<td><strong>Satisfaction</strong></td>
<td>Director/Administrative Assistant/</td>
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<td>**Person/Committee/Group</td>
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<td><strong>Graduate Program</strong></td>
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<td><strong>Program Satisfaction</strong></td>
<td>Person/Committee/Group Responsible</td>
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<td><strong>Employers</strong></td>
<td>N 176 lead faculty</td>
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<td><strong>Curriculum</strong></td>
<td>Person/Committee/Group Responsible</td>
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<td><strong>The nursing faculty will</strong></td>
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<td><strong>develop curriculum that</strong></td>
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<td><strong>prepares students to provide</strong></td>
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<td><strong>safe, evidence based, high</strong></td>
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<td><strong>Faculty and nursing</strong></td>
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<td><strong>curriculum committee reviews</strong></td>
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<td><strong>curriculum annually for:</strong></td>
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<td><strong>Lead faculty will bring</strong></td>
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<td>• Review of math competency to standardize rounding, scoring and relevance.</td>
<td>Faculty agree that content on math needs to be relevant to each topic. Scoring for rounding will be consistent to reflect clinical practice.</td>
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<td><strong>suggestions for improvement to the curriculum committee. The committee meets at least twice per semester.</strong></td>
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<td>• Concept mapping/care planning was reviewed and</td>
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<td><strong>Faculty agree that content on math needs to be relevant to each topic. Scoring for rounding will be consistent to reflect clinical practice.</strong></td>
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## Component

### Quality Patient Centered Care for Patients and Families in Contemporary Health Care Environments
- Professional standards, guidelines and competencies
- Rigor and currency
- Organization and best practice standards
- Appropriate clinical placements

### Means of Assessment and Expected Level of Achievement (ELA)
- ELA Changes/modifications will be discussed and voted upon during meetings with a majority rule.
- Gerontology elements and aspects to be highlighted throughout each course.
- Core curriculum was reviewed and revised to include subjects taught in each core nursing course.

### Summary of Data Collected (Actual Level of Achievement)
- Implemented earlier in the program.
- Core curriculum was reviewed and revised to include subjects taught in each core nursing course.

### Use of Results
- Mapping is now introduced during N170 – fundamentals.
- Gerontology concepts must be incorporated across the curriculum.
- Looking to demonstrate clinical application. Perhaps incorporating evaluation tools, NANDAs, sub-sections for gero considerations on med sheets and physical/psychosocial evaluation tools.

## Resources

### Person/Committee/Group Responsible
- Nursing Resource committee, Assistant Directors/Director

### Interval of Analysis
- Annually

### Means of Assessment and Expected Level of Achievement (ELA)
- ELA Resources are adequate for faculty/ course and program development. Student input from end of semester meetings is used to make decisions regarding resources.

### Summary of Data Collected (Actual Level of Achievement)
- Grant and other funding $31,494 to directly benefit students. Provided support for equipment, technical elements, clinical skills specialists, NCLEX review classes, and faculty development.
- Scholarship funding $22,589 in direct support of student educational needs.
- Faculty Development funds $1,200 per faculty/academic year for professional development.

### Use of Results
- Continue to secure funding in support of student success. Many students attribute their ability to be successful in the program to the financial support provided through a variety of funding sources.
- Faculty continues to attend conferences and workshops to enhance teaching abilities and to remain proficient in their content area.
Provisions of the Code of Ethics for Nurses *

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, or 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 optimum patient 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 health care.
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.

*Interpretive Statements can be found in the Code of Ethics for Nurses Book with Interpretive Statements published through the American Nurses Association.
Saddleback College
ASSOCIATE DEGREE NURSING PROGRAM

ACADEMIC HONOR CODE

Saddleback College students are responsible for regulating their own conduct in accordance with the Code of Conduct set by the District Board of Trustees. The Code of Conduct is outlined in the Student Handbook, which is free to all students. It is each student’s responsibility to adhere to an academic honor code, which upholds the integrity of the institution and the educational process so that all students have an equal opportunity to demonstrate their academic abilities. Academic dishonesty will not be tolerated. Academic dishonesty includes, but is not limited to:

Cheating

Cheating is any act or attempted act of fraud, deception or distortion of the truth by which a student misrepresents mastery or understanding of academic information or material. Cheating includes, but is not limited to:

- The use of unauthorized sources of information during tests. This would include, but is not limited to, crib sheets, electronic devices, dictionaries, texts, and/or other aids excluded by the instructor. It also includes any act or the use of any item which would be deemed as cheating by a reasonable person.

- Looking at another student’s exam or using another’s exams, assignments, or other work, or allowing another student to do so.

- Completing an exam or assignment for another person or allowing another person to complete any part of an assignment or exam for one’s self.

- Altering graded class work and resubmitting that work for reconsideration.

- Engaging in any kind of unauthorized assistance or communication with another person during an exam.

- Purchasing, copying, accepting, stealing, or otherwise obtaining exam information, assignments, or other class work.

Plagiarism

Plagiarism is the inclusion in total or part of another’s words, ideas, work, material, or data as one’s own. Plagiarism includes, but is not limited to:

- Quoting or paraphrasing materials without citing the source in some acceptable manner and submitting those materials as one’s own work.
• Copying, using or borrowing another’s ideas, assignments, test answers, lab work, research, report, term paper, computer program, file or data, etc., and submitting it as one’s own work or allowing another student to do so.

• Submitting as one’s own work, work prepared by others or prepared in collaboration with others.

• Reproducing another’s work so closely that any reasonable person would, after careful evaluation of the circumstances, conclude that plagiarism has occurred.

**Falsification/Fabrication**

Any act of inventing or altering information in order to deceive is considered falsification or fabrication. Falsification or fabrication includes, but is not limited to:

• Inventing and submitting of falsified, fabricated, or fictitious information or falsely attributing the source as coming from another person or material.

• Falsifying signatures on required forms or other academic records.

• Using another person’s identification, falsifying one’s identification, or representing one’s self as another person. Changing official academic records or documents, without going through a proper approval process.

• Knowingly misrepresenting successful completion of prerequisites.

* See Saddleback College Catalog for Sanctions and Disciplinary Actions.

** See Policy III.15 Academic Progression and Grading for statement specific to nursing students.
Saddleback College
Health Sciences, Human Services

Professional Behaviors

The HSHS Division faculty of Saddleback College believes that students must demonstrate accountability and responsibility for their own behavior in the classroom, and during externships, field experiences and clinical rotations. In their professional role, students are expected to model the values of human dignity and integrity in all care rendered and in all professional relationships.

1. When a student’s personal behaviors constitute a conscious disregard or indifference to the health, safety and/or well-being of a patient, client, family, instructor, or colleague, the student may be dismissed from the class and the division program.

2. When the student’s behaviors include, but are not limited to, one or more of the following unprofessional behaviors, Administrative Regulation 5401 will be followed and the student will not be eligible for readmission to the Saddleback College HSHS Division Program:
   a. violation of HIPAA, or client or patient confidentiality
   b. academic dishonesty as defined in the Saddleback College student handbook
   c. assault, battery or intent to harm another person
   d. disruption or distraction in the educational setting; willful disobedience
   e. harassment or threatening behavior; defiance of authority
   f. emotional outbursts in clinical/field care settings
   g. misrepresentation of oneself in a field experience, facility or patient care setting
   h. failure to show respect for the standards set forth by Saddleback College

Student Signature Date

Adopted 4/07
COMMUNICATION CHANNELS

It is expected that the student will first follow all campus/district communication channels in an attempt to resolve concerns. Students have the right to contact the California Board of Registered Nursing (BRN) and/or the National League for Nursing Accrediting Commission (NLNAC) with concerns regarding the educational program.

SADDLEBACK COLLEGE FACILITY

College President

Vice President
Student Services

Division Dean

Nursing Program
Director of Nursing

NURSING INSTRUCTOR

Primary Nurse Team Leader
Staff Nurse

HEALTH CARE

Nursing Services Administrator

Director of Nursing
Education/Administrative Liaison

Nurse Manager

STUDENT

Students may use the following resources to obtain information or to seek clarification regarding nursing issues:

California Board of Registered Nursing (BRN)
1747 Market Boulevard Suite 150
Sacramento, CA 95834
916/322-3350

Accreditation Commission for Education in Nursing (ACEN) formerly NLNAC
3343 Peachtree Road N.E., Suite 850
Atlanta, GA 30326
404/975-5000
I. GENERAL PROVISIONS

A. Application of the Regulations – General

Requirements for student conduct are set forth in the California Education Code, Title 5 of the California Code of Regulations, policies of the Board of Trustees, and in the California Penal Code. These regulations have been established pursuant to Board Policy 5401 and are intended to be consistent with California law.

B. Application of the Regulations to the Conduct of Applicants for Admission or Readmission

Admission or readmission to the colleges programs and activities of the District may be denied to any person who, while not enrolled as a student, commits such acts against district or college property, staff or students, which are subject to expulsion pursuant to these regulations. Any such conduct that occurred while not enrolled as a student and that could be the basis for denying admission or readmission under this paragraph must be related to activity within the South Orange County Community College District.

C. Confidentiality

Proceedings under this policy shall be confidential. Disciplinary records are “educational records” as defined in the federal Family Educational Rights and Privacy Act (FERPA) and may be released without student permission only in limited circumstances. In addition, “Whenever there is included in any student record information concerning any disciplinary action taken by a community college in connection with any alleged sexual assault or physical abuse…or threat of sexual assault, or any conduct that threatens the health and safety of the alleged victim, the alleged victim of that sexual assault or physical abuse shall be informed within three days of the results of the disciplinary action by the community college and the results of any appeal. The alleged victim shall keep the results of the disciplinary action and appeal confidential.”

D. Delegation

Whenever a power of duty is granted to an employee or office under these regulations, the power or duty may be exercised or performed by another officer or employee who is authorized to do so by delegation, except that the authority of an instructor to remove a student from a class may not be delegated.
E. Record of Disciplinary Action

Disciplinary action and the reasons therefore shall be recorded on the student’s discipline records and shall be subject to access, review and comment by the student as authorized by federal and state law.

Disciplinary information will remain on the student’s record unless expunged in accordance with state and federal law. It shall not be released to prospective employers unless the student consents to such a release in writing. Disciplinary information will be released to other third parties, including law enforcement agencies, as required or authorized by state or federal law.

For a minimum of five calendar years after the recording of disciplinary information, the student’s records may be used by district officials in determining an appropriate sanction of any subsequent disciplinary action or for any other district-related purpose. If action is taken by the disciplinary officer the record will be kept indefinitely.

F. Technical Departures From This Policy

Nothing in this section shall be construed to prohibit, where an immediate suspension is required in order to protect lives or property and to ensure the maintenance of order, interim suspension pending a hearing, provided that a reasonable opportunity be afforded the suspended person for a hearing within 10 days.

Technical departures from this policy and errors in its application will not be grounds to void the District’s right to take disciplinary action against a student, unless in the opinion of the disciplinary officer, departures or errors prevented a fair determination of a particular case.

G. District Activity

No student shall be removed, suspended, or expelled unless the conduct for which the student is disciplined is related to district services, activities or attendance.

H. Fees

No suspended or expelled student will be refunded any fees previously paid by or for the student.

II. DEFINITIONS

A. Day: is any day on which the District administrative offices are open for business, unless otherwise specified.

B. Disciplinary Officer: is the campus administrative officer, appointed by the President of the college, to respond to student disciplinary problems.

C. District: the South Orange County Community College District (SOCCCD) is a multi-campus district comprised of Saddleback College and Irvine Valley College. “District”
(refers to all locations and employees, procedures, policies, and practices of the SOCCCD).

D. **Expulsion:** Permanent denial of all district privileges

E. **Probation:** A status that may include the student’s exclusion from participating in privileges or extracurricular district and college activities for a specified period of time. Student organizations and individual students may be subject to disciplinary probation. If a student violates any condition of probation or is charged again with a violation of the standards of student conduct during the probationary period, it shall be grounds for revocation of the student’s probationary status and for instituting further disciplinary action. The imposition of disciplinary probation includes the notification to the student in writing of the reason for and the conditions of probation.

F. **Reprimand:** Reprimand is censure for the violation of a specific rule of conduct.

G. **Suspension:** The exclusion from student status, or the exclusion of other privileges or activities for a specified period of time.

H. **Warning:** A written notice to the student that the continuation, repetition or specific conduct may be a cause for subsequent disciplinary action.

III. STUDENT CONDUCT

Students may be disciplined for one or more of the following causes related to college activity or attendance:

A. Disruptive behavior, willful disobedience, habitual profanity or vulgarity, or the open defiance of the authority of, district or college personnel.

B. Assault, battery, or any threat of force or violence upon a student, district or college personnel, or an authorized college visitor.

C. Willful misconduct resulting in injury or death to a student or college or district personnel or an authorized visitor, or willful misconduct resulting in damage, defacing, theft, or other injury to any real or personal property owned by the District, or district personnel, or students in attendance at the colleges or programs of the District.

D. The unlawful use, sale, or possession on district property or presence on district property while under the influence of any controlled substance or any poison classified as such by state or federal law.

E. Smoking in an area where smoking has been prohibited by law or by policy of the Board of Trustees or administrative regulation.

F. Disorderly, lewd, indecent, or obscene conduct on district property or at district sponsored or supervised functions.

G. Sexual assault (as defined in Board Policy 5404) on any student or employee of the District, on-campus or off-campus grounds or facilities maintained by the District.
H. The possession or use of any firearms, explosives, dangerous chemicals, deadly weapons, or other potentially harmful implements or substances while on district property or at a district-sponsored function without the prior authorization of the disciplinary officer.

I. The obstruction or disruption, on or off campus, of any educational or administrative process or function of the District.

J. Physical abuse, on or off campus property, of the person or property of any member of the campus community or of members of his or her family or the threat of such physical abuse when related to a district program or activity.

K. Misrepresentation of oneself or of an organization as an agent of the District.

L. Soliciting or assisting another to do any act which would subject a student to discipline.

M. Use, possession, or distribution of alcoholic beverages and/or illegal narcotics/drugs on district premises, or at district-sponsored events, or appearance on district property or at district sponsored events while under the influence of alcohol or illegal narcotics/drugs unless otherwise provided by law and district policy.

N. Unauthorized recording, dissemination, and publication of academic presentations or materials. This prohibition applies to a recording made in any medium.

O. Actions of force or threat of force to injure, intimidate, oppress or threaten because of the other person’s race, color, religion, ancestry, national origin, disability, gender, or sexual orientation, or because of the perception that the other person has one or more of these characteristics.

P. Academic dishonesty, including, but not limited to falsification, plagiarism, cheating or fabrication, which compromises the integrity of an assignment, a college record or a program.
   a. Falsification involves any conduct in academic work, records or programs that is intended to deceive, including, but not limited to, the following acts:
      1. Forging signatures on official documents such as admissions cards and financial aid applications.
      2. Changing or attempting to change official academic records without proper sanction.
      3. Misrepresenting or falsifying successful completion prerequisites.
      4. Providing false information, such as immigration materials, during the admission or matriculation process.
      5. Falsifying one’s identification or falsely using another’s identification.
      6. Logging in or otherwise gaining access to a computer, computer network or protected web site using the password or identity of another.
      7. Citation of data or information not actually in the source indicated.
8. Including in a reference list of works cited a text or other information source which was not used in constructing the essay, paper or other academic exercise.

9. Submission in a paper, lab report or other academic exercise of falsified, invented, or fictitious date or evidence, or deliberate and knowing concealment or distortion of the true nature, origin, or function of such data or evidence.

10. Submitting as the student’s own work any academic exercises (e.g., written work printing, sculpture, etc.) prepared totally or in part by another.

11. Taking a test for someone else or permitting someone else to take a test for a student.

b. Plagiarism is any conduct in academic work or programs involving misrepresentation of someone else’s words, ideas or data as one’s original work, including, but not limited to, the following:

1. Intentionally representing as one’s own work the work, words, ideas or arrangement of ideas, research, formulae, diagrams, statistics, or evidence of another.

2. Taking sole credit for ideas and/or written work that resulted from a collaboration with others.

3. Paraphrasing or quoting material without citing the source.

4. Submitting as one’s own a copy of or the actual work of another person, either in part or in entirety, without appropriate citation (e.g., term-paper mill or internet derived products).

5. Sharing computer files and programs or written papers and then submitting individual copies of the results as one’s own individual work.

6. Submitting substantially the same material in more than one course without prior authorization from each instructor involved.

7. Modifying another’s work and representing it as one’s own work.

c. Cheating is the use of any unauthorized materials, or information in academic work, records or programs, the intentional failure to follow express directives in academic work, records or programs, and/or assisting others to do the same including, but not limited to, the following:

1. Knowingly procuring, providing, or accepting unauthorized examination materials or study aids.

2. Completing, in part or in total, any examination or assignment for another person.

3. Knowingly allowing any examination or assignment to be completed, in part or in total, for himself or herself by another (e.g., take-home exams or on-line assignments which have been completed by someone other than the student).

4. Copying from another student’s test, paper, lab report or other academic assignment.

5. Copying another student’s test answers.

6. Copying, or allowing another student to copy, a computer file that contains another student’s assignment, homework lab reports, or computer programs and submitting it, in part or in its entirety, as one’s own.

7. Using unauthorized sources of information such as crib sheets, answers stored in a calculator, or unauthorized electronic devices.
Storing answers in electric devices and allowing other students to use the information without the consent of the instructor.

8. Employing aids excluded by the instructor in undertaking course work.
9. Looking at another student’s exam during a test.
10. Using texts or other reference materials (including dictionaries) when not authorized to do so.
11. Knowingly gaining access to unauthorized data.
12. Altering graded class assignments or examinations and then resubmitting them for regarding or reconsideration without the knowledge and consent of the instructor.

Q. Contravention of Copyright Laws

S. Violation of District Board Policies and Administrative Regulations

IV. DISCIPLINARY PROCEDURES

A. Initiation of the Disciplinary Process

A request for disciplinary action may be initiated in writing by district employees. When there is a violation of the Student Code of Conduct, the following procedures will be followed:

1. If the conduct occurred in the classroom, the instructor may remove the student from his or her class for that day and the next class meeting if the student interfered with the instructional process. Removal must be reported to the disciplinary officer immediately. If the student is a threat to himself or herself or to others, the instructor must contact Campus Police immediately. If the student removed is a dependent minor, the instructor shall request that the student’s parent or guardian attend a parent conference regarding the removal. Upon removal of a student, the instructor will give the student verbal and/or written notice of the reasons for the removal.

a. The instructor, victim or witness (es) shall submit a written report on the appropriate college designed form (i.e., Incident Report form) to the disciplinary officer. The report will include (a) date and time of the conduct, (b) location, (c) names of witnesses, and (d) a detailed explanation of the alleged misconduct.

b. If the incident involves a matter of academic dishonesty, the instructor will give notice to the student within ten days of the discovery of the alleged impropriety.

c. If the incident was not a matter of academic dishonesty, a meeting between the student and the disciplinary officer will be conducted as soon as possible. At this meeting, evidence of the alleged violation(s) will be presented to the student. The student will be advised of the potential consequences.

d. If the student elects not to attend this meeting, the student waives his or her right to provide a response to the allegations.
e. The student may elect to drop the course, in accordance with existing policies, but this action will not necessarily terminate the process outlined above.

2. If the conduct did not occur in the classroom, the college employee discovering the conduct will report the incident to the disciplinary officer and submit a written report on the appropriate form (i.e., Incident Report form). The report will include (a) date and time of the conduct, (b) location, (C) names of witnesses, and (d) a detailed explanation of the alleged misconduct.

3. When the report of alleged misconduct is sent to the disciplinary officer, the officer will evaluate the information to determine if it alleges a violation of the District’s student conduct policy and/or regulations. If the disciplinary officer determines the report supports such allegations, a meeting will be requested with the student to provide the student an opportunity to respond to the allegations.

4. The disciplinary officer will review all documentation related to the case to make a determination if further disciplinary action is required.

5. The disciplinary officer will send a notice by mail to the student charged with the violation. This notice will include a written explanation of the incident and the charges that have been made (i.e. the specific conduct involved and the specific regulations(s) alleged to have been violated.

6. The disciplinary decision is final and it is immediately in effect unless it involves termination of State and/or local financial aid, suspension, or recommendation of expulsion, in which case the student may appeal the decision to the Disciplinary Hearing Panel within ten days. In cases referred to the Panel by the disciplinary officer or in cases where the decision is appealed to the Panel, the procedures in Section V will be followed. The student may, in writing, accept the penalty of suspension or expulsion without further hearing and without admitting participation in the conduct charged.

B. Range of Disciplinary Actions

1. **Verbal reprimand:** A warning that the conduct is not acceptable.

2. **Written reprimand:** Becomes part of the student file for a minimum of five years or longer at the discretion of the disciplinary officer and is considered in the event of future violations.

3. **Mental Health Clearance:** Mental health clearance may be required before a student is readmitted to a particular class or allowed to be on district property. The campus chief administrative officer (or designee) must receive a letter from a licensed mental health professional stating that in his or her professional judgment, the student will no longer continue the behavior which gave rise to the disciplinary action or that the student’s presence on campus is not a threat.
to himself or herself or others. The mental health professional must be licensed by the State of California. The student shall bear the cost and expense of obtaining mental health clearance.

4. **Disciplinary Probation:** A specific period of conditional participation in campus and academic affairs, which may involve any or all of the following:

   a. Ineligibility for all student government roles;
   b. Removal from any student government position;
   c. Revocation of the privilege of participating in district and/or student-sponsored activities;
   d. Ineligibility for membership on an athletic team;
   e. Limitation of courses and/or instructors the student may take;

5. **Suspension:** The Board of Trustees or the disciplinary officer may suspend a student for cause as provided in Section III. Suspension may involve:

   a. Removal from one or more classes for the remainder of the academic term.
   b. Removal from all classes and activities of the District for one or more terms. During this time, the student may not be enrolled in any class or program within the District

6. **Expulsion:** The Board of Trustees may expel a student for cause as provided in Section III when other means of correction fail to bring about proper conduct or when the presence of the student causes a continuing danger to the physical safety of the student or others. Expulsion will be accompanied by a hearing conducted by the Disciplinary Hearing Panel.

**V. DISCIPLINARY HEARING PANEL FOR SUSPENSION OR EXPULSION**

If the disciplinary officer refers the case for a hearing with the Disciplinary Hearing Panel or the student appeals the disciplinary officer’s decision to the Disciplinary Hearing Panel, the following process will be followed:

A. **Notice Letter**

   The disciplinary officer or designee will mail a written notice of the hearing to the student (and to the parent or guardian if the student is a dependent minor). This notice will include:

   1. A statement of the charges. The statement will describe the specific facts alleged as a basis for violation of these regulations.
   2. The time and place of the hearing.
   3. Notification of the student’s right to be accompanied and represented by an advocate. If the advocate is an attorney, the student must inform the disciplinary officer in writing of the name and address of the attorney at least
five days before the time set for the commencement of the hearing. Failure to do so will constitute good cause of a continuance of the hearing.

4. Notification that the hearing body may consider the student’s previous disciplinary and academic record.

5. Notification that the student may request that one of the members of the Disciplinary Hearing Panel be a student of the district. This request must be made in writing to the disciplinary officer at least five (5) days in advance of the hearing.

The notice letter may be amended at any time. If an amendment requires that the student prepare a substantially different defense, the disciplinary officer may postpone the hearing for a reasonable time, not to exceed ten days.

B. Composition of Disciplinary Hearing Panel

1. If the student is represented by an attorney, the District will also be represented by an attorney. The Disciplinary Hearing Panel will consist of a student (if requested), a faculty member of the college, and a district administrator. If a student is requested to serve on the panel, the request will include permission for the records to be disclosed to the student member of the panel. Where the charged student does not request a student member on the hearing panel, the Disciplinary Hearing Panel will consist of two college faculty members, one district administrator and a campus police officer, if requested by the disciplinary officer.

2. The disciplinary officer will, after conferring with the associated student body, academic senate, and administrative cabinet, compile lists of persons who may be appointed when it is necessary to convene a Disciplinary Hearing Panel. The disciplinary officer will appoint members to the Disciplinary Hearing from the approved list of names.

3. The hearing will be convened within ten days of the date that written notice of the proposed disciplinary action is mailed to the student, unless the disciplinary officer grants a written request for a continuance by the student upon a showing of good cause.

C. Hearing Preparation

1. The disciplinary officer will be responsible for making the necessary arrangements for the hearing, including scheduling a room, providing for an official record of the hearing, and notifying the student and members of the Disciplinary Hearing Panel.

2. Prior to the hearing, the Disciplinary Hearing Panel shall be given copies of these procedures. The disciplinary officer will select a chairperson. The chairperson will preside over the hearing and make any necessary procedural rulings.
D. The Hearing

1. **Confidentiality:** The hearing will be closed and be kept confidential by all parties.
2. **Security:** Appropriate security measures will be taken at the hearing by the campus police department.
3. **Witnesses/Record of Hearing:** Witnesses will be excluded except when testifying. The District employee who was involved in or a witness to the incident shall be invited to attend and participate in the hearing, and may be present for the entire proceedings. The administration’s representative and the student shall be entitled to call and question witnesses. Panel members may ask questions at any time when recognized by the chairperson. With the concurrence of the panel, witnesses may be recalled and questioned by hearing participants. A record of the hearing shall be kept for ten years.
4. **Opening:** The chairperson will call the hearing to order, introduce the participants, and announce the purpose of the hearing. An orderly hearing shall be maintained and disruptive participants shall be ejected or excluded.
5. **Charges:** The chairperson shall distribute copies of the charges to the members of the committee, read the charges aloud, and ask the student whether the charges have been received. If the response is affirmative, the hearing will proceed. If the response is negative, the administration may present evidence that the charges were duly served. The chairperson will decide to proceed with the hearing. In cases where a hearing does not proceed, a hearing shall be rescheduled within ten days.
6. **Burdens of Proof and Production of Evidence:** The administration bears the burden of proving that each charge is true based on a preponderance of the evidence. The administration has the initial burden of producing evidence to prove each charge. The student may present evidence to refute the administration’s charges. In the case of expulsion, any recommendation of the hearing panel must include a finding that other means of correction have failed to bring about proper conduct, or that the presence of the student causes a continuing danger to the physical safety of the student or others, and/or district property.
7. **Arguments:** Both the administration and student shall be afforded an opportunity to present or waive an opening statement (i.e. the administration will outline the charges and the facts to be established). The student may reserve an opening statement until after administration has presented the case for the college. If the student charged does not appear, either in person or by representation, or should the student leave or be ejected during the hearing, the hearing will proceed and the Panel will make its recommendation as though the student had been present.
8. **Evidence:** After the opening statements, the administration and the student will have the opportunity to call witnesses and present relevant evidence. Technical rules of evidence will not apply, but evidence may be admitted and given probative effect only when such evidence constitutes that which reasonable persons are accustomed to rely on in the conduct of serious affairs. Hearsay evidence is admissible, but may not, by itself, be used to support a finding of the panel. The Chairperson will make all rulings as to the conduct of the hearing and the admissibility of evidence. The Panel will not consider any arguments concerning the constitutionality or legal validity of campus regulations or statewide policy. In cases where the hearing involves a charge of sexual assault, the victim has the right to exclude past sexual history as part of the testimony unless such history is offered as evidence of the character or trait of character of the victim as described in California Evidence Code.

9. **Deliberations:** The administration and then the student will make closing arguments. Both may waive closing arguments. The panel will retire to deliberate. Deliberations will be limited to panel members. The panel will reach its decision based only on the record of the hearing and will not consider matters outside the record. The Hearing Panel may accept the disciplinary officer’s recommendation, impose a lower sanction, or impose a higher sanction. Within two days after the hearing, the chairperson will notify the student of the Hearing Panel’s disciplinary decision. This report will include the specific findings of fact concerning each charge and the disciplinary action supported by a majority vote of the panel.

10. **Decision to Suspend.** In the case of a decision to suspend, notice of the decision will be mailed to the student, placed on the student’s district records and copied to the disciplinary officer for enforcement of suspension decision. The decision may be appealed in writing to the college president only on the limited grounds as provided in Section VI. Hearing Panel decisions must be appealed within ten business days.

11. **Recommendation to Expel;** In the case of a recommendation to expel, notice of the recommendation shall be forwarded to the campus chief administrative officer or designee for recommendation to and final action by the Board of Trustees.

   a. Within thirty calendar days of the recommendation to expel, the Board of Trustees will notify the student or parent in case of a dependent minor, of the Board’s intent to conduct a closed session meeting to consider the recommendation for expulsion. Notification will be made by registered or certified mail or by special mail service. Within forty-eight hours of receipt of the notice, the student or parent of a dependent minor may request in writing that the hearing be held in public session. When a written request to have the matter heard in public session is served upon the Clerk or Secretary of the Board, the meeting will be conducted in public session, except in cases where the discussion conflicts with the right
b. The Board of Trustees may accept the recommendation to expel, impose a lesser sanction, or refer the matter back to the Hearing Panel for further consideration. Final action of the Board of Trustees will be taken at a public meeting but consist solely of a general announcement that a student, without being named, has been disciplined after a closed session vote taken with respect to the discipline.

VI. APPEAL PROCESS

The student has the right to appeal the decision of the instructor of the disciplinary officer.

A. Appeal of an Academic Dishonesty Decision

1. The student has the right to file an appeal of a decision regarding academic dishonesty to the dean of the department or school in which the alleged dishonesty occurred. The appeal must be in writing and received by the dean within ten working days of the informal meeting. The appeal must be in writing and received by the dean within ten working days of the informal meeting with the instructor. A grade, however, is not a disciplinary action but an evaluation of work, and is not subject to appeal except as provided in the grade grievance process as set forth in Board policy.

2. The dean may request that the instructor submit a written statement supporting his or her position.

3. Within thirty days of receipt of the request of appeal, the dean will arrange a meeting with the instructor and the student. If the instructor is no longer employed by the District, or is unavailable because of sabbatical or other leave, the dean shall appoint another instructor in the same disciplinary area to assume the responsibilities of the instructor.

At the meeting, the evidence of academic dishonesty will be presented and every effort will be made to resolve the matter. In the absence of a resolution, the student may elect to follow the appropriate grievance or disciplinary appeal procedure as specified in Board policies and regulations.

B. Appeal of Hearing Panel Decision to Suspend or Recommendation to Expel

The student may appeal a Hearing Panel decision in writing to the college president, within ten days of the decision/recommendation. The basis for the appeal will include evidence to support one or more of the following factors:

1. The decision lacks substantial basis in fact to support the findings,

2. There is substantial incongruity between the proposed sanction and findings,
3. There is substantial unfairness in the proceedings which has deprived the student of a fair and impartial process; and/or

4. There is newly discovered critical evidence, that despite due diligence on the part of the student, was not known at the time of the hearing.

The college president or the president’s designee may decide the issue based solely on the written appeal. The decision will be final except in the case of expulsion where final action shall be taken by the Board of Trustees.

References:
California Education Code Sections 72122, 76030, 76037, 76210-76249, 66017, 66300, 76234
California Penal Code 422.6
California Evidence Code Section 1103
Family Rights and Privacy Act 34 C.F. R. 99.31

Adopted: 3-21-88  Revised: 8-30-00  Revised: 7-9-09
Revised: 8-1-91  Revised: 4-13-06
Revised: 10-28-9  Revised: 9-14-06  Revised: 7-19-12
GRADE GRIEVANCE POLICY

I. GENERAL PROVISIONS

A. Grade Grievance

By law, the instructor is solely responsible for the grades assigned; no instructor may be directed to change a grade except in certain narrow circumstances authorized by California Education Code.

B. California Education Code

When grades are given for any course of instruction taught in a community college district, the grade given to each student shall be the grade determined by the instructor of the course and the determination of the student’s grade by the instructor, in the absence of mistake, fraud, bad faith, or incompetence, shall be final.

This policy provides the procedures for challenging grades given in any course of instruction offered in the District. This policy does not apply to the following:

1. The challenge process for prerequisites, co-requisites, advisories, and limitations on enrollment.

2. Student discipline.

3. Employee discipline.

4. Challenges to established district policies and administrative regulations.

5. Financial claims against the District.

II. DEFINITIONS

A. Mistake: an unintentional act, omission or error by the instructor or the college.

B. Fraud: a deception deliberately practiced in order to secure unfair or unlawful gain.

C. Bad Faith: an intent to deceive or to act in a manner contrary to law and/or a grade assigned because of a student’s protected characteristics contrary to Education Code and Title 5, California Code of Regulations. If, pursuant to the discrimination and harassment complaint procedure it is determined that a grade was the results of
discrimination or harassment the grade may be changed as a remedy for the discrimination or harassment.

D. **Incompetence**: a lack of ability, legal qualification, or fitness to discharge a required duty.

E. **Day**: Unless otherwise provided, day shall mean any day on which the District administrative offices are open for business. The deadlines contained herein may be modified by mutual agreement of the parties.

F. **Student**: A currently enrolled student or a former student. Former students shall be limited to grievances relating to course grades to the extent permitted by Education Code Section and the provisions herein.

G. **Respondent**: Any person claimed by a grievant to be responsible for the alleged grievance.

H. **The College President**: The President of the College or a designated representative of the College President.

I. **Ombudsperson**: The College President shall appoint an employee who shall assist students in seeking resolution by informal means. This person shall be called an ombudsperson.

III. **INFORMAL RESOLUTION**

Any student who believes he or she has a grade grievance shall make a reasonable effort to resolve the matter on an informal basis prior to requesting a grievance hearing, and shall attempt to resolve the problem with the faculty member with whom the student has the grievance or that person’s dean or designee. If informal resolution of the problem is not possible, the student may elect to pursue a formal grievance pursuant to the procedures herein.

IV. **FORMAL GRIEVANCE PROCESS**

A. **Written Statement of Grievance**

Any student who believes he or she has a grade grievance shall file a written, signed Statement of Grievance form stating the basis for the grade grievance with the appropriate dean or designee no later than 45 days after the student knew or should have known of the grade in the course. The dean or designee shall provide a copy of the written Statement of Grievance form to the affected faculty member within 5 days after the form has been filed. The Statement of Grievance must be filed whether or not the student has initiated efforts at informal resolution, if the student wishes the grievance to become official. The faculty member shall not engage in any conduct that may be construed as retaliation for filing the grievance. Filing a grievance is a protected activity.
B. Request for a Grievance Hearing

The student may request a grievance hearing after the written Statement of Grievance form has been filed. A request for a grievance hearing shall be filed with the appropriate dean or designee on a Request for Grievance Hearing form within 30 days after filing the Statement of Grievance.

The student may withdraw his/her written Statement of Grievance and/or Request for a Grievance Hearing at any time. The notice of withdrawal shall be in writing and filed with the appropriate dean or designee. The dean or designee shall notify the affected faculty member in writing within 5 days that the student has withdrawn the grievance and no further action may be taken.

C. Grievance Hearing Panel

1. The Grievance Hearing Panel shall consist of the appropriate dean or designee, a representative appointed by the Associated Student Government and a faculty member appointed by the Academic Senate.

2. Within 15 days following receipt of the Request for Grievance Hearing, the Hearing Panel shall meet to select a Chair and to determine on the basis of the Statement of Grievance whether there is sufficient grounds for a hearing. During the summer, given that many faculty and most students are not on campus, it may not be possible to convene a Hearing Panel in 15 days, but it will be scheduled no later than 15 days after the first day of fall semester instruction.

3. The determination of whether the Statement of Grievance presents sufficient grounds for a hearing shall be based on the following:

   a. The Statement of Grievance contains facts which, if true, would constitute a grievance under these procedures and;

   b. The grievant is a student as defined in these procedures and;

   c. The grievant is personally and directly affected by the alleged grievance and;

   d. The grievance was filed in a timely manner and;

   e. The grievance is not, based on the allegations contained in the written grievance, frivolous, without foundation or filed for the purposes of harassment. In determining whether a grievance is frivolous, without foundation or filed for purposes of harassment, the panel shall not at this phase, consider facts outside the grievance.

4. If the Grievance Hearing Panel determines that the written Statement of Grievance does not meet each of the aforementioned requirements, within 5 days of the Hearing Panel decision, the Chair shall notify the student in writing that the Request for a Grievance Hearing has been rejected. The notice shall contain the specific reasons for the rejection of a hearing and the procedures for appeal (See Section
5. If the Grievance Hearing Panel determines that the written Statement of Grievance meets each of the aforementioned requirements, the Chair shall schedule a grievance hearing no later than 45 days from the decision of the Hearing Panel. All parties to the grievance shall be notified in writing by the Chair of the date, time and location of the grievance hearing 10 days prior to the grievance hearing. During the summer, given that many faculty and most students are not on campus, it may not be possible to convene the grievance hearing within 45 days. It will be scheduled no later than 30 days after the first day of fall semester instruction, or 45 days after the first panel, whichever comes later.

D. Hearing Procedures

1. The decision of the Grievance Hearing Panel Chair shall be final on all matters the conduct of the hearing unless there is a vote of a majority of the other members of the panel to the contrary.

2. Each party to the grievance may call witnesses and introduce oral and written testimony relevant to the issues alleged in the grievance. Formal rules of evidence shall not apply. Any relevant evidence shall be admitted. The parties shall exchange exhibits and lists of witnesses 5 days prior to the hearing.

3. Unless the Grievance Hearing Panel determines to proceed otherwise, each party to the grievance shall be permitted to make an opening statement. Thereafter, the grievant shall make the first presentation, followed by the respondent. The grievant may present rebuttal evidence after the respondent’s evidence. The burden shall be on the grievant to prove by a preponderance of the evidence that the facts alleged are true and that a grievance has been established as specified above.

4. Each party to the grievance may represent himself or herself or may be represented by a person of his or her choice. A party shall not be represented by an attorney unless notification is presented to the Chair 10 days prior to the date of the hearing. If one party is permitted to be represented by an attorney, any other party shall have the right to be represented by an attorney. The Chair of the Hearing Panel may continue the hearing in order to accommodate counsel upon a showing of good cause. The Hearing Panel may also request legal assistance through the College President. Any legal advisor provided to the Hearing Panel sits in an advisory capacity but shall not be a member of the Panel nor vote with it.

5. Hearing shall be closed and confidential. Witnesses shall not be present at the hearing when not testifying.

6. The hearing shall be recorded by the Hearing Panel Chair by recording or stenographic recording and this document shall be the only recording made of the proceedings. No witness who refused to be recorded may be permitted to give testimony. At the onset of the hearing the Chair shall ask each person present to identify themselves by name and thereafter shall ask witnesses to identify themselves.
themselves by name. The recording shall remain in the custody of the College at all times, unless released to a professional transcribing service. Any party may request a copy of the recording at their own expense.

7. All Testimony shall be taken under oath administered by the Chair. Written statements of witnesses under penalty of perjury shall not be used unless the witness is unavailable to testify. A witness who refuses to be tape recorded shall be considered to be unavailable.

E. Hearing Panel Decision

Within 15 days following the close of the hearing, the Grievance Hearing Panel shall prepare a written decision which shall include specific factual findings regarding the grievance and the specific conclusions regarding whether a grievance has been established as defined above. Where appropriate the decision shall articulate the factual basis for any credibility determinations necessary to the panel’s decision. The Hearing Panel decision shall also include a specific statement regarding the relief to be afforded the grievant if any. The Hearing Panel decision shall be based only on the record of the hearing, and not on matters outside the record. The record consists of the written Statement of Grievance, any written response by the respondent and the oral and written evidence produced at the hearing.

V. APPEAL PROCESS

A. Written Statement of Appeal

1. Within 10 days following the Grievance Hearing Panel decision regarding the merits of the grievance, any party to the grievance may file a written Statement of Appeal with the College President. The written Statement of Appeal shall state the specific basis for the appeal and shall be sent to all parties.

2. All parties may submit a written response to the appeal to the College President within 10 days of the filing of the written Statement of Appeal.

3. The College President shall review the record of the hearing and the documents submitted in connection with the appeal, but shall not consider any matters outside the formal record. The College President may decide to sustain, reverse or modify the decision of the Grievance Hearing Panel. The College President’s decision shall be in writing and shall include a statement of reasons for the decision. The College President’s decision shall be final.

4. The decision on appeal shall be reached within 20 days after receipt of the appeal documents. Copies of the College President’s decision shall be sent to all parties.

5. Within 10 days following the Grievance Panel’s decision regarding whether the Statement of Grievance warrants a formal Grievance Hearing, any party to the grievance may file a written Statement of Appeal with the College President.
College President shall review the Statement of Grievance and the Request for a Grievance Hearing in accordance with the requirements for a grievance provided herein but shall not consider any other matters. The College President’s decision whether to grant a grievance hearing shall be final and not subject to further appeal. The filing of an appeal pursuant to this provision shall stay all proceedings on the underlying grievance until a decision is reached by the College President. If the College President’s decision is that the matter shall proceed to a hearing the time lines shall be extended by the period of time the matter was under consideration with the College President.

References:
California Education Code, Section 7622(a), 66250, 66270
Title 5, California Code of Regulation, Section 593000 et. Seq.

Adopted: 04-16-15
The Board of Registered Nursing (BRN) receives numerous questions from applicants regarding prior convictions. Following are the most frequently asked questions to assist applicants. Please refer to the license application instructions for a complete description of reporting requirements.

1. **What convictions or license discipline must be reported on the application?**
   All convictions must be reported, except for minor traffic violations with a fine that is greater than $1,000 and does not involve alcohol or drugs. Both misdemeanor and felony convictions must be reported, and “driving under the influence” must be reported. Convictions must be reported even if they have been expunged under Penal Code Section 1203.4. Also, offenses must be reported even if the applicant has successfully completed a diversion program under the Penal or Vehicle Codes. All prior or current disciplinary action against a health-care related license must be reported, whether it occurred in California or in another state or territory.

2. **Can a person obtain a license as a registered nurse if they have a misdemeanor or felony conviction on their record?**
   The BRN reviews all prior convictions substantially related to the qualifications, functions or duties of a registered nurse. Each application is evaluated on a case-by-case basis. (Please refer to the Policy Statement on Denial of Licensure.) The BRN considers the nature, severity, and regency of the offenses, as well as rehabilitation and other factors. The Board cannot make a determination for approval or denial of licensure without evaluating the entire application and supporting documentation.

3. **Is there any specific conviction that will automatically disqualify an applicant from receiving a license?**
   No. There is not any one specific type of conviction that will disqualify an applicant. Again, the Board must review, on a case-by-case basis, all convictions and supporting documentation to determine if an application will be approved or denied.

4. **Do I have to report charges if I completed a court diversion program and charges were dismissed?**
   Yes. Offenses must be reported to the Board even if a court diversion program has been completed. (Business and Professions Code section 492)

5. **What type of documentation do I need to submit in support of my application if I have a prior conviction or license discipline?**
   In addition to the documents required for licensure the BRN will require:

   **Written Statement:**
   - A written statement from the applicant, in their own words, describing the incident(s), date(s) incident(s) occurred, outcome (ex. paid fine, placed on probation, court ordered...
classes or rehabilitation), and any rehabilitative efforts or changes to prevent future occurrences.

Certified Arrest/Incident Reports:
NOTE: Court documents DO NOT include arrest reports and MUST be requested separately.

- Contact the arresting agency for this report. The arresting agency is the agency that conducted the arrest and/or issued the citation (ex. Highway Patrol, Police Department, Sheriff’s Office). If the arrest documents are purged or unavailable, please provide a letter or proof from the arresting agency which confirms that information.
- If the arrest is for DUI ensure the Blood/Breath Alcohol Content (BAC) is included in the report.

Certified Court Documents:
- Contact the court to get a certified copy of all court documents pertaining to the conviction(s) including satisfaction/compliance with all court ordered probation orders.

Evidence of Rehabilitation:
- Include completion certificates of court ordered/voluntary rehabilitation.

Reference Letters for Alcohol or Drug Related Convictions:
- Recent, dated letters from professionals in the community; for example, AA/NA Sponsor, counselor, probation officer, employer, instructor, etc. who can address an awareness of the past misconduct and current rehabilitation; for example, use/non-use of alcohol/drugs. The letters must be signed and dated by the author of the letter within the last year.

Reference Letters for all other Convictions:
- Recent, dated letters from professionals in the community; for example, counselor, probation officer, employer, instructor, etc. who can address an awareness of the past misconduct and current rehabilitation; honesty/integrity, management of anger/stress. The letters must be signed and dated by the author of the letter within the last year.

Work Performance:
- A copy of a recent work evaluation or review which may or may not be from a health-related agency.

NOTE: FOR TRAFFIC CITATIONS > $1,000.00
- A letter of explanation is all that is required

6. Can I receive an Interim Permit if my application is under review because of convictions?
No. If your application is referred to the Enforcement Program for review, you will not be allowed to receive an Interim Permit until the review has been completed, and a final decision has been made regarding your application.

7. How long will it take to review the information that I submit with my application?
The normal processing time is approximately 4 to 6 weeks. This assumes that all requested information for licensure and for the Enforcement Program has been received.

8. I am licensed in another state and want to receive my temporary license ASAP. Can I obtain a temporary license by coming to the Board’s office if I have prior conviction(s) or out of state disciplinary action on my record?
   No. Temporary licenses are not issued until all conviction, discipline, rehabilitation, and other evidence is fully evaluated.

9. How can I help facilitate how quickly my prior conviction or license discipline is reviewed?
   The BRN strongly encourages all individuals with a conviction or discipline history to be fully prepared with information regarding their background, as specified in the policy statement on denial of licensure and the BRN application for licensure. Otherwise, your request for a license will experience a delay.

10. How do I appeal the denial of my application for licensure?
    You have the right to appeal the license denial, and to have an administrative hearing, under the provisions of Section 485(b) of the Business and Professions Code. You must submit the appeal in writing to the Board office within 60 days from the service of the notice of denial. If you do not submit an appeal in writing to the Board, you will automatically waive your right to a hearing, and your application will be deemed denied.

    Should you appeal, and the denial is upheld, the earliest date to reapply is one year from the date of service of the notice of denial.

11. What will happen if I choose not to appeal the application denial?
    If you select not to appeal the application denial, you will be allowed to reapply for licensure one year from the date of the service of the notice of denial.
POLICY STATEMENT ON DENIAL OF LICENSURE

The California Board of Registered Nursing protects the public by screening applicants for licensure in order to identify potentially unsafe practitioners. Statutory authority for denial of licensure is set out in Business and Professions Code Sections 480-487, 492, 493, 496, 810, 820-828, 2750-2765, and 2795-2797.

The law provides for denial of licensure for crimes or acts, which are substantially related to nursing qualifications, functions, or duties. A crime or act meets this criterion if, to a substantial degree, it evidences present or potential unfitness to perform nursing functions in a manner consistent with the public health, safety, or welfare (California Code of Regulations, Section 1444).

The Board may deny licensure on the basis of:

- Conviction of crime substantially related to the practice of nursing.
- Any act involving dishonesty, fraud, or deceit with intent to substantially benefit self or another or to substantially injure another.
- Any act which is grounds for revocation of a license.
- Making a false statement on the application for license.
- Breach of examination security.

The Board considers most convictions involving sex crimes, drug crimes, and crimes of violence to be substantially related to nursing practice. Board regulations list examples of such crimes or acts to include, but not be limited to:

- Assultive and abusive conduct.
- Failure to comply with mandatory reporting requirements.
- Theft, dishonesty, fraud and deceit.
- Convictions or acts resulting in registration under Section 290 of the Penal Code.

If the Board determines that an act or crime is substantially related to the practice of nursing, then it is the responsibility of the applicant to present sufficient evidence of rehabilitation.

When considering denial of license, the Board takes into account the following criteria to evaluate the rehabilitation of the applicant. (California Code of Regulations, Section 1445).

1. Nature and severity of the acts or crimes.
2. Additional subsequent acts.
3. Recency of acts or crimes.
4. Compliance with terms of parole, probation, restitution, or other sanctions.
5. Evidence of rehabilitation submitted by applicant.

The Board has developed the following list of suggested evidence of rehabilitation for applicants whose licensure is in question.
It should be noted that the board applies the same denial criteria for applications for interim permits and temporary license as it uses for permanent licensure.

In summary, the Board of Registered Nursing screens applications fairly but cautiously, applying the above criteria. Schools of nursing are encouraged when counseling prospective nursing students to make them aware that there could be potential licensure problems due to serious acts or convictions as described above. In this manner, students have the opportunity to explore other career options prior to investing substantial time in a nursing program if it appears that a prior serious act or conviction may jeopardize licensure due to its substantial relationship to the practice of nursing.

**EVIDENCE OF REHABILITATION**

At the time of application for licensure, the burden of proof lies with the applicant to demonstrate sufficient competent evidence of rehabilitation to establish fitness to perform nursing functions in a manner consistent with public health, safety, and welfare. The following list itemizes types of evidence, which the applicant should consider providing to the Board. The individual or agency that is providing information about the applicant should mail all items directly to the Board.

1. Copies of court documents pertinent to conviction, including documents specifying conviction and sanctions, and proof of completion of sanction.
2. Letter from applicant describing underlying circumstances of arrest and conviction record as well as any rehabilitation efforts or changes in life since that time to prevent future problems.
3. Letters of reference from nursing program instructors concerning attendance, participation, and performance in nursing program.
4. Letters of reference from past and/or current employers.
5. Letters from recognized recovery programs attesting to current sobriety and length of time of sobriety if there has been a history of alcohol or drug abuse.
6. A current mental status examination by a clinical psychologist or psychiatrist. The evaluation should address the likelihood of similar acts or convictions in the future, and should speak to the suitability of the registered nursing profession for the applicant.
7. Letters of reference from other knowledgeable professionals, such as probation or parole officers.
8. Copy of Certificate of Rehabilitation or evidence of expungement proceedings.
9. Evidence of compliance with and completion of terms of probation, parole, restitution, or any other sanctions.
10. For endorsement applicants, copies of:
    a. Formal accusation and determination of other state,
    b. Copies of evidence presented to other state in order to obtain reinstatement of license or reduction or penalty,
    c. Terms of probation and evidence of current compliance if currently on probation in another state.
STATUTORY AUTHORITY FOR DENIAL OF LICENSURE
(Summarized Version of Business & Professions Code)

Grounds for Denial

480  (a) Board may deny a license on the basis of:

(1) Conviction of a crime, after time for appeal, irrespective of a subsequent order under Section 1203.4 of the Penal Code.

(2) Any act involving dishonesty, fraud or deceit with intent to substantially benefit self or another, or substantially injure another.

(3) Any act which is grounds for suspension or revocation of registered nurse’s license.

(b) May not deny license solely on basis of felony conviction if there is certificate of rehabilitation. (Penal Code 4852.01)

(c) May deny license if applicant knowingly made false statement of fact required in application.

Criteria for Related Crimes Required

481  Board must have criteria to assist in considering denial, revocation, and suspension of license in order to determine whether a crime or act is substantially related to nursing qualifications, functions, or duties. (BRN criteria specified in Section 1444 of California Code of Regulations).

Criteria for Rehabilitation Required

482  Board must have criteria to evaluate rehabilitation when considering (a) denial or (b) suspension or revocation of license. Board must consider all competent evidence of rehabilitation furnished by applicant or licensee. (Section 1445 of California Code of Regulations).

Attestations of Good Moral Character Not Required

484  No applicant can be required to submit attestations of good moral character.

Procedure for Board Upon Denial

485  Upon denial the Board must (a) serve a statement of issues or (b) notify the applicant of the denial stating the reasons and the right to a hearing. The right to a hearing is waived if a written request is not received within 60 days.

Reapplication After Denial

486  Upon denial the Board must inform the applicant of the earliest date for reapplication, state that all competent evidence of rehabilitation will be considered upon reapplication, and send a copy of the criteria for rehabilitation.

487  If a hearing is requested it must be conducted within 90 days of request, except for OAH extensions or at applicant’s request.

492  Successful completion of any diversion program under the Penal Code or successful completion of an alcohol and drug problem assessment program under the Vehicle Code does not prohibit the Board from denying or disciplining a license based upon the underlying misconduct.
The record of the conviction of a crime shall be conclusive evidence of the fact that the conviction occurred and the Board may inquire into the circumstances surrounding the crime in order to fix the degree of discipline or to determine if the conviction is substantially related.

Violations of Exam Security

The Board may deny, suspend, revoke, or restrict license on grounds that applicant for licensure subverted or attempted to subvert administration of examination.

REGULATIONS RELATING TO LICENSE DENIAL
(Summarized Version of California Code of Regulations)

1444. Substantial Relationship Criteria

A conviction or act is considered substantially related to the practice of nursing if, to a substantial degree, it evidences present or potential unfitness of a registered nurse to practice in a manner consistent with the public health, safety, or welfare.

Such acts or crimes include, but are not limited to:

(a) Assaultive and abusive conduct under Penal Code Section 11160.
(b) Failure to comply with any mandatory reporting requirements.
(c) Theft, dishonesty, fraud, and deceit.
(d) Conviction or act subject to registration under Penal Code Section 290.

1445. Criteria for Rehabilitation

(a) When considering denial of license, the Board is to consider the following criteria in evaluating the rehabilitation of the applicant and his/her present eligibility for a license.

(1) Nature and severity of acts or crimes.
(2) Evidence of any additional, subsequent acts which also could be considered grounds for denial.
(3) Time that has elapsed since commission of acts or crimes.
(4) Extent to which applicant has complied with terms of parole, probation, restitution, or other sanctions.
(5) Evidence of rehabilitation submitted by applicant.
# NURSING ADMINISTRATION FACULTY AND STAFF

<table>
<thead>
<tr>
<th>TITLE</th>
<th>NAME</th>
<th>LOCATION</th>
<th>EXTENSION (dial 949 - 582 first, then ext.)</th>
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<tbody>
<tr>
<td>Assistant Dean and Nursing Program Director</td>
<td>Domenica Oliveri</td>
<td>HS 235</td>
<td>4701</td>
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<tr>
<td>Professors</td>
<td>Christina Bowles</td>
<td>HS 258</td>
<td>4798</td>
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<td></td>
<td>Jodi Caggiano</td>
<td>HS 251</td>
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<td></td>
<td>Linda Call</td>
<td>HS 205</td>
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<td>Jennifer Nastanski</td>
<td>HS 252</td>
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<tr>
<td></td>
<td>Cindy Gross</td>
<td>HS 252</td>
<td>348-6293</td>
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<td></td>
<td>Barbara Huggins</td>
<td>HS 259</td>
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<td>Lindsay Kapp</td>
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<td>Phillis Kucharski</td>
<td>HS 255</td>
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<td>Anne Lawson</td>
<td>HS 251</td>
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<td>HS 204</td>
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<td>Pat McGinley</td>
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<td>Nahid Meshkin</td>
<td>HS203</td>
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<td></td>
<td>Carolyn Neill</td>
<td>HS258</td>
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<td>Candy Nelson</td>
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<td>Loretta Niccola</td>
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<td>Jacqueline Novak</td>
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<td>Michele Wolff</td>
<td>HS 203</td>
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<td>Assoc. Professors</td>
<td>Division Office, HS 235</td>
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<td>Admin. Assistants</td>
<td>Stacy Anderson</td>
<td>HS 235</td>
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<td>Diana Ramos</td>
<td>HS 235</td>
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<tr>
<td>Support Services/ Evaluators</td>
<td>Julie Cho</td>
<td>Student Services Center, A &amp; R</td>
<td>4346</td>
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<tr>
<td></td>
<td>Jeanne Barnhill</td>
<td>Student Services Center, A &amp; R</td>
<td>4345</td>
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<td>Doris Muchirahondo</td>
<td>Student Services Center, A &amp; R</td>
<td>4346</td>
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<tr>
<td></td>
<td>Vee Ramirez</td>
<td>Student Services Center, A &amp; R</td>
<td>4685</td>
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<tr>
<td>General Counselors</td>
<td></td>
<td>Student Services Center, Room 167</td>
<td>4572</td>
</tr>
</tbody>
</table>

Student Technical Support (949) 582-4363 (M-Th 8-8pm /Fri 8-2pm)
Admissions & Records (949) 582-4555 or go to SSC 102 with your photo ID
Canvas after hours support (844) 303-0343
GENERAL INFORMATION

The ADN Program Student Handbook, prepared by the ADN Faculty, is an adjunct to the College Catalog and the Saddleback College Student Handbook. It provides important information specific to the Associate Degree Nursing Program, and should be kept and reviewed throughout the two years of the Nursing Program.

SPECIAL ACCOMMODATIONS

Saddleback College recommends that students with disabilities discuss academic accommodations with their professors the first day of class. Please refer to Nursing Program Policy III.16 for further clarification.

HEALTH CLEARANCE

Nursing students should strive to maintain a high level of wellness. In order to fulfill objectives for the ADN Nursing Program, students should expect to come in contact with, or be assigned to care for individuals with a variety of communicable diseases including acquired immune deficiency syndrome and hepatitis. Instruction and required learning includes measures to be taken to protect the student and the patient. Prior to the beginning of first semester, a physical examination conducted by a health care provider is required. Immunizations and tuberculosis screening must be current. **Tuberculosis screening must be updated on an annual basis. This is the student’s responsibility. Students will not be able to register for classes without an annual TB clearance. Seasonal flu shots are also required.**

Whenever there is any change in the health status of a student, he/she is responsible for submitting a written statement regarding this change to the ADN Faculty. The student is also expected to keep the ADN Faculty and Director informed in writing when there is any need for on-going health care. Additional tests or records may be required as necessary to verify satisfactory health status during the program. (See Policy III.6)

PREGNANCY CLEARANCE

Upon confirmation of pregnancy, it is required that the student provide the estimated date of delivery calculated by her health care provider, and bring a Medical Clearance form signed (in handbook) by her licensed health care provider outlining the student’s ability to participate in clinical activities as well as time line for these activities. Any restrictions should be identified by the licensed health care provider in writing and submitted to the individual instructor. After delivery and before returning to class and clinical experiences, it is required that the student present an another Medical Clearance Form (in handbook) signed by her licensed health care provider giving approval to resume activities, specifying any restrictions. (See Policy III.6)
CPR – BASIC LIFE SUPPORT REQUIREMENTS

Each student has the responsibility to become certified in basic life support for healthcare providers (CPR), American Heart Association, by the beginning of the program. It is also the student’s responsibility to renew the certificate and maintain its currency annually throughout the course of the program (see Policy III.2).

CONDUCT

Professional conduct requires that the nursing student represent himself/herself as a professional student when involved in authorized ADN Program activities (Professional Behavior Policy). Nursing students are expected to adhere to the ANA Code for Nurses. This includes wearing the uniform with an emblem, name pin and picture ID card when representing Saddleback College. The SOCCCD also has an Administrative Regulation Board Policy 5401.

In order to maintain a safe environment for the patient and the student the instructor has the unquestioned authority to take immediate corrective action in the clinical area with regard to student conduct, safety, and performance. Any student whose conduct, clinical performance, or health is in question may be required to leave the clinical facility.

Students will abide by individual clinical agency policies and procedures. Students are directly responsible to the instructor for all assigned time. It is required of each student to report to the faculty member and/or person in charge whenever leaving or returning to the clinical site.

TRANSPORTATION

Each student is responsible for his/her own transportation and parking. Instructors are not permitted to transport students in their private cars. Students are encouraged to carpool and should not rely on only one means of transportation. Student assignments to the hospital and clinical cannot be made on the basis of carpools.

CHANGES IN NAME, TELEPHONE NUMBER AND/OR ADDRESS

Any change of name, address, or telephone number must be done through MySite. Also notify division office so changes can be made in the files.
ACADEMIC GRADING, PROGRESSION AND RE-ENTRY

1. All nursing classes follow the same grading policy and consist of the following percentages for each letter grade:

<table>
<thead>
<tr>
<th>Letter</th>
<th>Percentages</th>
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<tbody>
<tr>
<td>A</td>
<td>90-100%</td>
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<tr>
<td>B</td>
<td>80-89%</td>
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<tr>
<td>C</td>
<td>75-79%</td>
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<tr>
<td>D</td>
<td>60-74%</td>
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<tr>
<td>F</td>
<td>59% and below</td>
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Using the scale listed below, the final theory grade **may be rounded up from 0.5 or higher except to pass the course**:

<table>
<thead>
<tr>
<th>Letter</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>89.5 -100%</td>
</tr>
<tr>
<td>B</td>
<td>79.5 - 89.4%</td>
</tr>
<tr>
<td>C</td>
<td>75.0-79.4 %</td>
</tr>
</tbody>
</table>

2. A grade of “C” or better is required in each nursing course for progression in the Program and to graduate.

   - Theory grades are based on objective examinations and written assignments per each course syllabus.
   - Clinical grades are “pass/fail”. The letter grade assigned is the same as obtained in the theory portion of the course.
   - A student in the Nursing Program who does not achieve a minimum grade of “C” in any required course cannot progress in the Nursing Program until such course is completed with a minimum grade of “C”. A student may repeat a course with a clinical component only once.
   - A “D” or “F” in theory or a clinical failure results in a failure of the entire course (clinical and theory). All critical elements must be met on a consistent basis. See Guidelines for Clinical Evaluation Policy. (See Policy #IV.1)
3. Students who withdraw from the Nursing Program must meet with the Nursing Program Director or Assistant Director for advisement purposes. An advisement plan will be made to facilitate success should the student re-enter the program in the future.

- Students desiring re-entry into the Nursing Program are also required to complete a Re-Entry Petition form and submit to the nursing office (form on www.saddleback.edu/hs/rn under nursing resources). The Enrollment Management Committee will review the petitions for approval or disapproval, and make recommendations for remediation when applicable. Re-entry is contingent upon completing the advisement plan.

- Eligible students will be readmitted on a space-available basis

- All first semester students desiring re-entry must also submit a re-entry petition and re-apply.

**MATH COMPETENCY**

The test will assess math skills necessary for safe and effective medication/fluid administration required for each individual course.

A medication/fluid administration calculation test will be administered each semester.

A student receiving a score less than 85% may retake the test one time. Prior to the retest, the student is required to review math errors and seek appropriate assistance to meet his/her learning needs. The retest must be administered within three weeks of the initial test.

Students in N170 who score less than 85% must seek appropriate remediation (e.g. HSC 228, tutoring, etc.). Students in N172, N173, or N176 who score less than 85% on the retest must withdraw from the class as a clinical failure.

**BACKGROUND CHECK/DRUG TEST**

This requirement applies to all Health Sciences and Human Services students that attend clinical in a contracted facility as part of the educational requirement for their degree or certificate.

1. Upon acceptance into a program with a clinical requirement, students will be required to obtain a criminal background check and drug test. The HSHS Division will provide guidelines to the student on how to apply for their background check/drug test and the cost.

2. Students will be given a deadline date by which the background check/drug test results must be submitted to the Assistant Dean and Nursing Program Director.
3. Students who do not complete a background check/drug test by the deadline date will not be allowed to register for classes.

4. Students who have a recorded offense/arrest and are still on probation will not be allowed to enroll in a program with a clinical requirement.

5. Students may re-apply to the program when probation is complete.

6. In the event a student withdraws from a program with a clinical requirement, the background check/drug test must be repeated upon re-entry into the program if out of the program for longer than 6 months or one semester.

7. This policy applies to all facilities held to the Joint Commission standards. Other non-Joint Commission facilities may require similar background checks. Individual programs will comply as needed.

**FINANCIAL OBLIGATIONS**

1. The Financial Aid/Extended Opportunity Program & Services (EOPS) Office helps students who might otherwise be unable to continue their education because of financial problems.

2. Students in need of financial assistance should immediately contact the Saddleback College Financial Aid Office (949) 582-4860. Some information about nursing scholarships is available on the college website, and the division office.

3. The expenses for the first semester nursing student can average $2500 or more. The entire program may cost up to $4800 or more. At the completion of the program, the cost for the Board of Registered Nursing Application, Licensure Exam, Interim Permit, Fingerprinting and RN License will cost approximately $500.
How can I get Financial Help for Nursing School?

Many students can qualify for enrollment and health fee waiver through Financial Services or EOPS. Contact Financial Aid office for information, (949) 582-4860.

The form is FAFSA on-line at www.fafsa.ed.gov (This website is free). Do not go to the .com one as that site charges you to apply. Beginning in October 1, 2017, you will be able to file for 2017-2018 FAFSA in October rather than January. This is also the first step to qualifying for a Board of Governor’s waiver (BOG) http://www.saddleback.edu/uploads/fao/documents/2016bogchanges.pdf that allows you to attend without enrollment fees (You do have to pay the material's and health fees).

When you get your answer as to “need” and if you feel that it does not reflect your current situation, there is a “special circumstances” appeal process for FAFSA (if income or circumstances have changed drastically) that students can also file. The Financial Aid office is available to help you with any of this process.

Scholarships Available:

Scholarships are awarded based on need but also on academic success and performance.

To apply on line for general College Scholarships: Go to the Saddleback webpage:

http://www.saddleback.edu/fao/scholarship-information

The scholarship application is there under “Financial Aid”. The deadline for Scholarship application is usually in March for distribution once a year in May. Criteria are listed on application. The most limiting factor for some of our new students to receive College Scholarships is that you must have completed 12 units at Saddleback College.

If you don’t meet the 12 units at Saddleback College, other sources of funding are available.(or even if you do!) There is a book in the Nursing Division office (HS 235) that lists Nursing scholarships from other sources.

Another Scholarship is the Sue and Bill Gross Technical Scholarship
Saddleback College
ASSOCIATE DEGREE NURSING PROGRAM

CAMPUS RESOURCES

- Career and Re-entry Center (949) 582-4575
- Counseling – Counselors are available to assist students in the areas of academic advisement, career planning, and personal counseling. (949) 582-4572
- Child Development Center – The Child Development Center offers educational opportunities and services for registered nursing students with preschool children.
- Escort Service – Security escort service between classrooms and other areas of campus. Campus police can be reached (949) 582-4585 or on any campus pay telephone, *80.
- Extended Opportunities Programs & Services is an outreach and retention program designed to assist financially and educationally disadvantaged students in achieving a college education. (949) 582-4620
- Financial Aid Office – The Saddleback College Financial Assistance Program is involved in assisting students with federal, state, and community awards from numerous state and local foundations. (949) 582-4860
- Health Center – Staffed by medical physicians, clinical psychologist, and nurses to provide professional services in the areas of prevention, recognition, and early treatment of illnesses. (949) 582-4606
- Special Services for Students with Disabilities (DSPS) – Special Services provides support services and specialized instruction for students with disabilities. Arrangements for support services such as note taking, math study groups, interpreter services, and mobility orientation, and test taking can be scheduled in advance. (949) 582-4885
- Transfer Center – The Transfer Center provides information and assistance to students who are preparing to transfer to a 4-year college or university. (949) 582-4328
- Tutoring – provides free tutoring for Saddleback College students. (949) 582-4519
- Student-Faculty Conferences – The Nursing faculty maintain five (5) office hours per week to consult with students.
- Veterans Administration Education Benefits – provides assistance to students in the completion of required paperwork for benefits; provides support services for vets and their families, counseling, scholarship assistance, etc. (949) 582-4252
Saddleback College
ASSOCIATE DEGREE NURSING PROGRAM

(Policy I.3)

STUDENT INPUT INTO THE NURSING PROGRAM

1. Students are encouraged to offer input into the nursing program.

2. At least one representative and an alternate from each semester is requested to attend faculty meetings.

3. It is the responsibility of the representative to serve as liaison between their class and the nursing faculty.

4. In addition to the class representative, any interested nursing student may attend meetings and address the faculty during the student input content of the meeting.

5. Students are encouraged to attend designated group meetings to give input.

6. Any concern that a student may have regarding a class or clinical lab should be resolved by first seeking a conference with the respective instructor. If the problem is not resolved, the student, the instructor, or both may request a conference with the nursing program director or designee. (See Policy II.6 #23)

Reviewed: 10/17, 9/18
Revised: 9/13, 10/17
Saddleback College
ASSOCIATE DEGREE NURSING PROGRAM

(Policy II.7)

CREDIT FOR PREVIOUS NURSING RELATED EDUCATION/EXPERIENCE

1. Saddleback College grants credit for college units earned at any regionally accredited institution of higher education as determined by the office of admissions and records.

2. The course instructor and/or the nursing program director/assistant director and the office of admissions and records will review the applicant's previous education and experience. Credit will be given for nursing education and clinical experience that are equivalent to requirements in the Saddleback College Nursing Program.

3. All nursing program courses may be challenged. See college catalog and policy III.12 for “Credit by Examination”.

4. Licensed Vocational Nurses will receive credit for N170 and N172. Proof of current licensure is required.

5. Licensed Psychiatric Technicians will receive credit for N171. Proof of current licensure is required.
Military Personnel Challenge/Advanced Placement Policy:

Individuals who have held military health care occupations, specifically: Basic Medical Technician Corpsman (Navy HM or Air Force BMTCP), Army Health Care Specialist (68W Army Medic) or Air Force Independent Duty Medical Technician (IMDT 4N0X1C) may achieve advanced placement into the nursing program with documentation of education and experience qualifying them for the specific military health care occupation and upon successful completion of the appropriate challenge exams, dosage calculation exam and skills competency evaluation.

1. Applicants must meet all general entrance requirements of the associate degree nursing program, including completion of designated prerequisites and the Test of Essential Academic Skills (TEAS).
2. Acceptance of military challenge students into the Saddleback College Associate Degree Nursing Program is contingent upon space availability.
3. For each course challenged, successful completion of a challenge exam, dosage calculation quiz, and skills competencies, in this specified order, are required for acceptance into the nursing program (see nursing policies: III.12 and III.4).
4. Applicants must be successful on their first attempt; no retesting allowed.
5. Applicant must have been released from the military with an honorable discharge.

PROCEDURE:
Interested candidates must request an appointment with the program director at least four weeks prior to the application period (See Saddleback College Nursing Website for application period) to discuss eligibility requirements for the associate degree nursing program.

1. Applicants who may be eligible for advanced placement include those individuals who have satisfactorily completed, within the last two years, education and experience for the following:
   a. Basic Medical Technician Corpsman (Navy HM or Air Force BMTCP)
   b. Army Health Care Specialist (68W Army Medic)
   c. Air Force Independent Duty Medical Technician (IMDT 4N0X1C)
2. Applicants applying for transfer credit must submit the following materials verifying education and experience:
   a. transcripts from appropriate education program(s), demonstrating satisfactory completion of coursework and clinical experience;
   b. documentation of experience
3. After a review of the applicant’s documentation, and upon determination that the applicant has met the educational and experience requirements, as well as the additional nursing program admission requirements, the student will be required to take a challenge examination, a dosage calculation exam and a competency skills evaluation.
4. The following materials will be available to the applicant once authorization for challenge is cleared:
   a. course syllabus, including course objectives,
   b. content outline,
   c. bibliography and textbook lists, and
   d. example of style and format of examination.

5. Written and skills competency examinations for advanced placement or challenge must be completed **eight weeks** prior to admission to the program, unless waived by the director of the nursing program.

6. After completion of N162 Successful Transitional to Professional Nursing, placement will be granted as space is available.

7. Advanced placement will be granted if applicant meets minimum requirements equivalent to those required of students enrolled in the actual course.

Created: 8/16
Reviewed: 10/17, 9/18
Revised: 1/17
FACULTY–STUDENT RATIO

The Saddleback College School of Nursing faculty-student ratio complies with the BRN regulations.

In theory courses, the number of students is determined by the program director and dean in collaboration with the faculty. The class size is determined each semester based on grant requirements, availability of clinical agency placements, and funding.

In the clinical courses, the faculty-student ratio averages 1:10 based on semester and facility requirements.

1. The faculty-student ratio in the clinical setting shall be based on the following criteria:
   - acuity of patient needs,
   - objectives of the learning experience,
   - class level of the students,
   - geographic placement of students,
   - teaching methods, and
   - requirements established by the clinical agency.

2. Faculty-student ratio for preceptorship shall be based on the following criteria:
   - student/preceptor needs,
   - faculty's ability to effectively supervise,
   - students' assigned nursing area, and
   - agency/facility requirements.

Reviewed: 10/17, 09/18
Revised 02/13, 05/13
Adopted: 05/12
SECOND YEAR TRANSFER STUDENT REQUIREMENTS

1. Students transferring into the second year of the nursing program are required to complete at least one semester in residence (and a minimum of 12 units) in order to graduate from the Saddleback College Nursing Program.

2. Students transferring into the second year of the nursing program are required to satisfactorily complete:
   a) N 245 IV Therapy Techniques for Nurses (waived if already IV certified)
   b) N 176 Advanced Nursing
   c) N 162 Successful Transition to Professional Nursing
   d) Additional coursework may be required based on prior academic achievement.

3. Prioritization for entry of students entering after the first semester is as follows:
   a) Re-entry students from the Saddleback Nursing Program
   b) LVN to RN students
   c) Transfer students
   d) International RN’s
Saddleback College ASSOCIATE
DEGREE NURSING PROGRAM
(Policy II.11)

UNSUCCESSFUL THEORY AND/OR
CLINICAL PERFORMANCE

1. An unsuccessful theory grade in any nursing course with a clinical component is
defined as a theory grade less than "C" and/or an unsatisfactory clinical
performance.

2. A student who withdraws from a nursing course with a clinical component will be
considered unsuccessful in that course if, at the time of withdrawal, the student has
a grade less than "C" in theory and/or unsatisfactory performance in the clinical
component.

3. It is recommended that at the time of withdrawal, a student with a theory grade less
than "C" and/or an unsatisfactory clinical performance meet with the nursing
program director or designee to develop a plan to facilitate future success and
complete a petition requesting re-entry to the program.

4. Re-entry is contingent upon meeting with the nursing program director or
designee. The student must also successfully complete any
recommendations/remediation made by the nursing program director or designee
prior to re-entry into the nursing program.

5. Re-entry is also contingent on program space availability.

6. Students who withdraw from N170 are required to reapply for admission.

7. A student is readmitted one time.

8. Students must re-enter within 3 semesters.

Reviewed: 10/17; 9/18
Revised: 8/11, 8/12
Examination:

1. Students are required to be present at every quiz/exam.
2. Students may not leave the room once the tests have been distributed. Upon exiting the room, the test will be turned in as complete.
3. All personal belongings will be placed as directed by the instructor.
4. Exams are never to be removed from classroom or faculty office.
5. If it is apparent to the instructor that cheating has occurred, the student will receive a grade of zero for the exam and may be subject to dismissal from the program.
6. The nursing faculty will follow the Saddleback College Academic Honor Code as reflected in the current Saddleback College Catalog.
7. Students may not use any other paper during testing except a scantron or the paper provided by faculty.
8. Student may not use cell phones, smart watches, or other electronic devices during exams. These devices must be removed from the testing area.
9. Students must remove distracting attire such as hats, hoodies and scarfs at the discretion of the instructor.
10. Distracting behaviors during an exam will not be tolerated. These behaviors include, but are not limited to: talking, tapping pencils, smacking gum, gestures or other verbalizations.
11. Once the student has completed and turned in their exam, they will exit the room and not return until class resumes or as directed by the instructor.
12. Once outside the room, the student must leave the hallway of the classrooms and keep his/her voice to a whisper.

Exam Review

1. Exam review is at the discretion of the instructor.
2. Students may not use any writing, recording or communication devices during exam review.
3. Par Score Test Reports must be returned at end of review.
4. Sharing of exam information is prohibited.
5. Students may not attend an exam review for any exam that has not been taken and/or completed.

Revised: 10/17, 9/18
Reviewed: 10/17, 9/18
Saddleback College
ASSOCIATE DEGREE NURSING
PROGRAM
(Policy III.2)

BASIC LIFE SUPPORT

1. All students in the nursing program are required to have a current American Heart Association Basic Life Support Provider card (BLS).

2. Valid original card or print out of e-card must be presented to each clinical instructor.

Reviewed: 10/17, 9/18
Revised: 10/17, 9/18
Saddleback College
ASSOCIATE DEGREE NURSING PROGRAM
(Policy III.3)

NURSING UNIFORM AND PROFESSIONAL APPEARANCE

1. The student must wear uniform pieces specifically chosen for Saddleback College from the uniform provider.

2. Each visible upper uniform garment must have the Saddleback College Nursing Program insignia/patch sewn on the left shoulder, 2 inches below the shoulder seam.

3. Uniforms must have a professional appearance and be appropriate for height and weight. Skirt or dress length must be between the top of the knee and 2 inches below the knee with the student standing erect. Uniform shirts or blouses must be buttoned/zipped up at all times.

4. Students at clinical sites not requiring uniforms must wear professional attire.

5. Students selecting and/or researching patients in a clinical facility must wear professional attire under a lab coat or Saddleback College uniform. Clothes such as t-shirts, tank tops, jeans, shorts, leggings, shorts, or casual sandals are strictly prohibited.

6. Picture ID approved by the nursing department must be worn above the waist, in clear vision, at all times in the clinical area, including while researching patients.

7. Students must wear clean, low-heeled, rubber-soled white shoes with both the toes and heels enclosed. If shoes have laces, they must be white. All non-porous, white leather activity shoes (without color accents or logos) are acceptable. High top and partial heel, clog type shoes are not permitted. In rotations where uniforms are not required, students must wear professional attire. Per OSHA guidelines, shoes must be: clean, low-heeled, rubber-soled with both toes and heels enclosed.

8. Beige or white nylons must be worn with skirts or dresses. When wearing uniform pants, white socks are required. Plain, white undergarments are to be worn. Male students should wear white, crew-neck undershirts.

9. Long sleeved, plain white tee shirts are permitted under uniforms for warmth. No underwear type garments may be worn for this purpose.

10. Hair must be neat, worn off the face, and off the collar. Neatly braided hair is acceptable. Care must be taken that any braided hair or ponytail does not fall into
the work area or the patient's face. Hair color must be of a naturally occurring color. Head bands must be discrete and subtle. No other hair accessories may be worn.

11. Facial hair must be neatly trimmed and close to the face. Beards must be trimmed to jaw line.

12. Nails must be neat, short, and trimmed. Artificial nails or gels are prohibited. Nail polish is acceptable. Color must be subtle and polish in good repair. Specific hospital/facility policy must be followed.

13. Make-up may not be excessive, but is to be applied so that a natural look is conveyed.

14. Jewelry:

- one pair of small, discrete stud earrings may be worn,
- for safety, no dangles or hoops are allowed,
- visible body piercing (other than lower ear lobes) may not be worn in the clinical setting under any circumstances,
- wrist watches must be a moderate size and have a sweep-second hand or digital second counter,
- wedding and/or engagement rings may be worn, and
- no other jewelry may be worn.

15. Tattoos must be completely covered, whenever possible.

16. No perfume or cologne is allowed.

17. Good hygiene is expected; this includes, but is not limited to, clean hair and the absence of body odor, halitosis and/or smoking odor.

18. When applicable, compliance with assigned clinical agency's policies for students is required.

19. Appropriateness of uniform and/or appearance may be determined by the instructor.

Reviewed: 10/17, 9/18
Revised: 9/14, 10/15
Saddleback College
ASSOCIATE DEGREE NURSING PROGRAM
(Policy III.4)

PERSONAL CELL PHONE POLICY

1. Student cell phone use is restricted to non-patient care areas and for communication with faculty member (per faculty guidelines). Student cell phone use in clinical is limited to the following situations only:
   • contacting the current clinical instructor either by texting or calling,
   • using the calculator application,
   • using any medical applications such as a drug guide, and
   • phone is in vibration mode or off.

2. The following is never allowed during clinical time:
   • accessing any social internet searches including, but not limited to, Facebook, Twitter, Snapchat,
   • using the camera,
   • personal texting, and
   • personal calls

3. Personal calls may be made during breaks and meal times but only outside of patient care areas. Out of courtesy for others personal voice calls must be made out of hearing range of other people.

4. At no time is the use of a cell phone permitted in or near patient’s room or other patient care areas.

5. Cell phone use during clinical is subject to faculty supervision. Should a student misuse the cell phone during clinical the following will occur:
   • first violation is a verbal warning or written warning,
   • second violation is a written warning with:
     o possible elimination of cell phone during clinical and/or
     o possible clinical failure.

6. At all times, guidelines of the individual clinical agencies must be followed.

7. Cell phone use during lecture is limited to recording lecture or other activities per faculty guidelines.

8. Refer to HIPAA and confidentiality guidelines for further requirements.

Reviewed: 12/17, 9/18
Revised: 9/14, 12/17
Regular and timely attendance in the classroom and clinical area is necessary for students to meet the stated objectives of each course. Additionally, regular attendance demonstrates professional behavior and responsibility (See also “Attendance Policy” in Saddleback College Catalog).

1. Absences may make it impossible for a student to meet course objectives and result in failure of the course. Any absence may require, at the instructor’s discretion, a make-up assignment. Students who find it necessary to be absent from class or clinical lab are to notify the instructor/facility, prior to the beginning of class or lab, according to directions given by the course instructor.

2. Tardiness results in unsafe patient care due to lack of or abbreviated shift report. Students are considered tardy if they arrive later than the designated start time at the designated location as defined by each clinical instructor. At the discretion of the clinical faculty, the student may be sent home. Three (3) episodes of tardiness will be counted as one (1) absence. Refer to course syllabus for tardy/attendance requirements in less than full semester courses.

3. Students are expected to attend all clinical days including community health. If the student is ill or has a family emergency the maximum absence time is as follows:
   - N170: 1 clinical day. The absence must be made up. Any absence during skills lab will require completion of missed content and demonstration of competence in that content area/skill prior to hospital orientation.
   - N171: 1 clinical day. The absence must be made up.
   - N172: 1 clinical day or up to 12 hours.
   - N173: 1 clinical day. The absence must be made up.
   - N174: 1 clinical day. The absence must be made up.
   - N176: 1 clinical day. The absence must be made up.

4. Students who miss up to the maximum stated days will receive a Counseling Flow Sheet. If a student is exceeding the maximum stated days and is not meeting the clinical objectives of the course, failure of the course may result. Students may also be referred to the nursing program director or assistant director for counseling.

5. Due to policies, computers, safety issues and clinical expectations unique to each clinical setting, attendance on the first clinical day (orientation) and any other orientation requirements of each rotation is mandatory. Failure to attend the first clinical day and/or mandatory computer training may result in dismissal from the program.

6. Students who are late for lecture or clinical may be dismissed for the day at the discretion of the instructor.

7. Students are not to leave the clinical facility during clinical hours. Disciplinary actions will occur if a student leaves the clinical site for any reason without notifying the instructor. Exceptions, such as: field trips, skills or simulation labs, or specialized clinical experiences will be clarified by the instructor.

Reviewed: 12/17, 9/18
Revised: 9/14, 11/16
Saddleback College Nursing Program Counseling Flow Sheet

Student: Date: Semester/Year:
Course: Clinical: Theory:
Instructor:
☐ Advisement ☐ Unsatisfactory Performance

Theory- Area of Concern:
☐ Low Test Scores ☐ Other

<table>
<thead>
<tr>
<th>Clinical SLOs</th>
<th>Critical Objectives (i.e., 1.A.1)</th>
<th>Describe behaviors indicating that Clinical SLO is not being met</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nursing Process</td>
<td>• Critical Thinking • Judgment • Clinical Preparation</td>
<td></td>
</tr>
<tr>
<td>2. Safety</td>
<td>• Clinical Skills</td>
<td></td>
</tr>
<tr>
<td>3. Communication</td>
<td>• Written/verbal</td>
<td></td>
</tr>
<tr>
<td>4. Professional Role</td>
<td>• Responsibility • Accountability • Attendance</td>
<td></td>
</tr>
</tbody>
</table>

Recommendations: Referral to: Director/Assistant Director

<table>
<thead>
<tr>
<th>Reading Program:</th>
<th>Counseling Services:</th>
<th>Mentor Program:</th>
<th>Skills/Computer lab:</th>
</tr>
</thead>
<tbody>
<tr>
<td>English 333/337</td>
<td>Academic</td>
<td>(strategies)</td>
<td>__CAI</td>
</tr>
<tr>
<td>English 332 ESL</td>
<td>Health Center</td>
<td>__Practice</td>
<td>__Practice</td>
</tr>
<tr>
<td>English 170</td>
<td>Assertiveness/Training</td>
<td>__Testing</td>
<td>__Testing</td>
</tr>
<tr>
<td></td>
<td>__Anger Management</td>
<td>__Remediation</td>
<td>__Remediation</td>
</tr>
<tr>
<td></td>
<td>__Conflict Resolution</td>
<td>__ATI</td>
<td>__ATI</td>
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<tr>
<td></td>
<td>__Confidence Building</td>
<td>__Simulation</td>
<td>__Simulation</td>
</tr>
<tr>
<td></td>
<td>__Other</td>
<td>Area(s) of concern:</td>
<td></td>
</tr>
<tr>
<td>Writing Lab</td>
<td>Special Services:</td>
<td>LAP</td>
<td>Financial Assistance</td>
</tr>
<tr>
<td>HSC 228</td>
<td>Experience in</td>
<td>__Independent Studies</td>
<td>__Career Services</td>
</tr>
<tr>
<td>Calculations for Meds</td>
<td>health related field</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Plan for Improvement: (i.e. student must demonstrate ___ by ___ (date))

Student Comments:

I agree to complete recommended actions and meet with my instructor with verification upon completion.

Student Signature: ____________________________ Date: ____________

Faculty Signature: ____________________________ Date: ____________
Student Illness or Injury

For the protection of students, patients, clinical personnel, and faculty, the following must be adhered to:

1. Injury in the classroom or clinical setting must be reported immediately to the nursing instructor to facilitate completion of medical care and necessary forms. These forms will be submitted to the Saddleback College Risk Management Department.

2. A student may be required to submit a medical release from a licensed health care provider that states the student may return to school without limitations or restrictions.

3. A student with a cast, crutch, cane, splint, sling or condition/device that impairs mobility or creates an unsafe environment will not be allowed in the clinical area. Written medical clearance and a completed Saddleback College Nursing Medical Release with advisory statement will be required before returning to the clinical area.

4. Upon confirmation of pregnancy, the student must immediately:
   - provide the estimated date of delivery calculated by her health care provider,
   - submit a medical release form (see attached) from her health care provider outlining the student’s ability to participate in clinical activities as well as a time line for these activities,
   - comply with the policies and procedures of the clinical agency to which she is assigned,
   - observe pregnancy precautions while in the clinical area according to agency policy,
   - self-monitor for pregnancy related health issues, and
   - notify the nursing program director of any change in student’s health status

5. A student must be physically and emotionally able to meet the objectives of the course in any instructional setting. This includes care of patients requiring lifting, moving, or transferring and/or moving of equipment (See Policy III.8 – “Emotional Health”).

6. Students with acute or chronic illnesses that require use of prescribed medications may be allowed in the clinical setting. Students who are impaired by the use of these medications will be sent home.
7. Students who are ill or exhibit signs of excessive fatigue and/or emotional instability during the clinical day may be sent home at the discretion of the instructor.

8. If a student requires medical clearance to return to lecture or clinical, they must have a licensed medical provider fill out the medical release by initialing each activity and signing the last page. Once the medical release is completed, the student must turn in the release to their clinical instructor, theory/lecture instructor and the director of the nursing program within 24 hours of returning to clinical.

Reviewed: 9/18, 4/19
Revised: 9/18, 4/19
Saddleback College  
Associate Degree Nursing Program  

**Medical Release to Return to School/Clinical**

Student Name: _________________________________________

Medical condition that necessitated absence or limitations: _________________________________________

In the best interest of our students, please be aware that certain physical, emotional and learning abilities are necessary in order to protect the individual student’s wellbeing and provide for the safety of each patient/client placed in his/her care. The following are basic physical and emotional abilities required of the student for success in the Registered Nursing Program:

**PROVIDER TO COMPLETE BY INITIALING EACH ACTIVITY**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Time frame bases off a 12-hour clinical day</th>
<th>Description</th>
<th>Examples of Activity/Equipment</th>
<th>Cleared Cleared w/ limitations Not Cleared</th>
</tr>
</thead>
</table>
| Standing & Walking | Less than 75% or 3-5 miles                | • on carpet, tile, linoleum, or cement                                      | • providing care  
• obtaining supplies & specimens  
• monitoring / charting patient response  
• managing / coordinating patient care. | _____Cleared  
_____Cleared w/ limitations  
_____Not Cleared |
| Lifting        | Up to 30 times a day:                     | • equipment up to 35 lbs  
 o floor to Knee  
 o knee to waist  
 o waist to should | • trays  
• continuous passive motion machines  
• pulse oximeters  
• patient controlled analgesia pumps | _____Cleared  
_____Cleared w/ limitations  
_____Not Cleared |
<table>
<thead>
<tr>
<th>Activity</th>
<th>Time frame bases off a 12-hour clinical day</th>
<th>Description</th>
<th>Examples of Activity/Equipment</th>
<th>Cleared</th>
<th>Cleared w/ limitations</th>
<th>Not Cleared</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lifting</td>
<td>Up to 75%</td>
<td>• assisting patient movement:</td>
<td>• transferring or turning patients</td>
<td>______</td>
<td>______</td>
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<td></td>
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<td>• ave patient weight:</td>
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<td>• 150-200 lbs</td>
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<tr>
<td>Carrying</td>
<td>Less than 50%</td>
<td>• carrying less than 10 lbs</td>
<td>• charts</td>
<td>______</td>
<td>______</td>
<td>______</td>
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<td></td>
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<td></td>
<td>• trays</td>
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<td></td>
<td>• supplies</td>
<td>______</td>
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<tr>
<td>Sitting</td>
<td>Up to 50%</td>
<td>• communication / documentation</td>
<td>• working on computers</td>
<td>______</td>
<td>______</td>
<td>______</td>
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<td></td>
<td></td>
<td></td>
<td>• answering phones</td>
<td>______</td>
<td>______</td>
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<td></td>
<td></td>
<td></td>
<td>• reviewing charts</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>Pushing &amp; Pulling</td>
<td>Up to 75%</td>
<td>• moving / adjusting equipment</td>
<td>• beds</td>
<td>______</td>
<td>______</td>
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<td></td>
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<td>• wheelchairs</td>
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<td>• IV pumps</td>
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<td></td>
<td></td>
<td></td>
<td>• Furniture</td>
<td>______</td>
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<tr>
<td>Balancing &amp; Climbing</td>
<td>Less than 75%</td>
<td>• activities requiring good body mechanics</td>
<td>• climbing stairs</td>
<td>______</td>
<td>______</td>
<td>______</td>
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<td></td>
<td></td>
<td></td>
<td>• physically supporting patients</td>
<td>______</td>
<td>______</td>
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<tr>
<td>Standing &amp; Walking</td>
<td>Less than 75% or 3-5 miles</td>
<td>• on carpet, tile, linoleum, or cement</td>
<td>• providing care</td>
<td>______</td>
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<td></td>
<td></td>
<td></td>
<td>• obtaining supplies &amp; specimens</td>
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<td></td>
<td>• monitoring / charting patient response</td>
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<td></td>
<td>• managing / coordinating patient care.</td>
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<tr>
<td>Activity</td>
<td>Time frame bases off a 12-hour clinical day</td>
<td>Description</td>
<td>Examples of Activity/Equipment</td>
<td>Cleared/Cleared w/ limitations/Not Cleared</td>
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<tr>
<td><strong>Lifting</strong></td>
<td>Up to 30 times a day:</td>
<td>• equipment up to 35 pounds&lt;br&gt;• floor to Knee&lt;br&gt;• knee to waist&lt;br&gt;• waist to shoulder</td>
<td>• trays&lt;br&gt;• continuous passive motion machines&lt;br&gt;• pulse oximeters&lt;br&gt;• patient controlled analgesia pumps</td>
<td>_____Cleared _____Cleared w/ limitations _____Not Cleared</td>
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<tr>
<td><strong>Lifting</strong></td>
<td>Up to 75%</td>
<td>• assisting patient movement:&lt;br&gt;• average patient weight:&lt;br&gt;• 150-200 pounds</td>
<td>• transferring or turning patients</td>
<td>_____Cleared _____Cleared w/ limitations _____Not Cleared</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Stooping &amp; Kneeling</strong></td>
<td>Up to 50%</td>
<td>• retrieving/stocking supplies/medications&lt;br&gt;• assessing equipment attached to patients&lt;br&gt;• using lower shelves of carts</td>
<td></td>
<td>_____Cleared _____Cleared w/ limitations _____Not Cleared</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Bending</strong></td>
<td>Up to 75%</td>
<td>• at the waist to get supplies, monitor patients, administering medications</td>
<td>• monitoring patients&lt;br&gt;• gathering supplies&lt;br&gt;• patient positioning&lt;br&gt;• administering IVs&lt;br&gt;• adjusting patient beds&lt;br&gt;• assisting with bathing</td>
<td>_____Cleared _____Cleared w/ limitations _____Not Cleared</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Crouching &amp; crawling</strong></td>
<td>Less than 25%</td>
<td>• retrieving or adjusting equipment on the floor</td>
<td></td>
<td>_____Cleared _____Cleared w/ limitations _____Not Cleared</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activity</td>
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<tr>
<td>Reaching &amp; Stretching</td>
<td>Up to 75%</td>
<td></td>
<td>• hanging &amp; removing IV bottles/bags&lt;br&gt;• gathering supplies&lt;br&gt;• connecting equipment&lt;br&gt;• assisting with patient care&lt;br&gt;• performing transfers &amp; positioning.</td>
<td>_____Cleared  _____Cleared w/ limitations  _____Not Cleared</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Twisting &amp; Turning</td>
<td>Up to 50%</td>
<td>• twisting at waist&lt;br&gt;• turning neck</td>
<td>• while gathering supplies&lt;br&gt;• operating equipment&lt;br&gt;• checking IV lines&lt;br&gt;• bathing patients&lt;br&gt;• assisting patients to walk</td>
<td>_____Cleared  _____Cleared w/ limitations  _____Not Cleared</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Talking</td>
<td>Up to 90%</td>
<td>• ability to speak in English</td>
<td>• ability to communicate with a wide variety of people and easily understood.</td>
<td>_____Cleared  _____Cleared w/ limitations  _____Not Cleared</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing</td>
<td>Up to 90%</td>
<td>• hear and correctly interpret what is heard with patient assessment</td>
<td>Includes but not limited to:&lt;br&gt;• taking verbal or telephone orders&lt;br&gt;• communicating with patients, visitors &amp; other members of the health care team&lt;br&gt;• physical assessment of cardiovascular, pulmonary &amp; gastrointestinal sounds&lt;br&gt;• analysis of patient monitor alarms</td>
<td>_____Cleared  _____Cleared w/ limitations  _____Not Cleared</td>
<td></td>
<td></td>
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<tr>
<td>Activity</td>
<td>Time frame bases off a 12-hour clinical day</td>
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</tbody>
</table>
| Manual Dexterity          |                                             | • Fine & gross dexterity of the hand and fingers | • grasping equipment  
                           |                                             | • opening medication packages                |  
                           |                                             |                                                   | ______Cleared  
                           |                                             |                                                   | ______Cleared w/ limitations  
                           |                                             |                                                   | ______Not Cleared |
| General Extremity Motion: |                                             | • Motor ability                                  | • upper extremity: shoulder, elbow, wrist, hand, fingers and thumb  
                           |                                             | • lower extremity: hip, knee, ankle, foot and toes                           |  
                           |                                             | • neck: turn, flex and extend                |  
                           |                                             |                                                   | ______Cleared  
                           |                                             |                                                   | ______Cleared w/ limitations  
                           |                                             |                                                   | ______Not Cleared |
| Feeling                   |                                             | • Sensory ability                                | • sensation to heat & cold when assessing patients/clients  
                           |                                             | • capacity to feel heat, cold, pain & pressure to the self; protecting from personal injury |  
                           |                                             |                                                   | ______Cleared  
                           |                                             |                                                   | ______Cleared w/ limitations  
                           |                                             |                                                   | ______Not Cleared |
| Vision                    |                                             | • Visual Acuity                                  | • read & interpret charts, reports, monitor equipment  
                           |                                             | • detect patients’ signs and symptoms (color of skin, wounds, drainage and other body fluids, infusion sites)  
                           |                                             | • detect a change in patient/client status  
                           |                                             |                                                   | ______Cleared  
                           |                                             |                                                   | ______Cleared w/ limitations  
                           |                                             |                                                   | ______Not Cleared |
| Olfaction                 |                                             | • Unusual Odor Detection                         | • identify abnormal scents associated with numerous body fluids, wounds and patients/clients with casts or other appliances  
                           |                                             |                                                   | ______Cleared  
                           |                                             |                                                   | ______Cleared w/ limitations  
<pre><code>                       |                                             |                                                   | ______Not Cleared |
</code></pre>
<table>
<thead>
<tr>
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<th>Cleared</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional</td>
<td></td>
<td>• Emotional Stability</td>
<td>• emotionally stable under normal and stressful circumstance encountered in the health care setting.</td>
<td>Cleared</td>
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<td></td>
<td></td>
<td>Cleared w/ limitations</td>
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<td></td>
<td>Not Cleared</td>
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</tbody>
</table>

**PROVIDER TO INITIAL THE STUDENT’S CLEARANCE LEVEL**

- _____ Student is cleared without limitations
- _____ Student is cleared with limitations
- _____ Student is not cleared

Describe limitations: __________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

/provider signature

Provider Name and Title ______________________________________________________ Date __________________________

Address, City, State, Zip _____________________________________________________ Phone __________________________
IMPAIRED NURSING STUDENTS

An impaired student abuses substances such as, but not limited to, prescription and over-the-counter drugs, CNS depressants, narcotics, illicit drugs, alcohol and other chemicals.

1. Impairment may result in disciplinary action or the inability to be licensed in the State of California.

2. A student suspected of being under the influence of any substance will not be allowed in the clinical setting. Students may also be requested to leave lecture at the instructor’s discretion. Any student suspected of being impaired may be required to find alternative transportation from the site. A student excluded from class or clinical must report to the nursing program director or designee. Students may not return to class or clinical until authorized to do so by the director or designee. At the conclusion of this meeting any student deemed to have a probable substance abuse problem may be dropped from the nursing program. The director or designee may refer the student to the Vice President of Student Services.

3. Students dropped from the nursing program under this policy may be considered for re-entry but it is not guaranteed. The following guidelines are used when considering readmission:

- furnish evidence of participation in a recovery or rehabilitation program for a minimum of 6 months,
- contract to continue active participation in a recovery program and remain clean and/or sober, and
- submit a petition for readmission to the Dean of Health Sciences and Human Services and the Vice President of Student Services.

Readmission is on a space available basis. Once readmitted, continuation in the nursing program is dependent upon maintaining sobriety and/or remaining drug free.

Reviewed: 12/17, 9/18
Revised: 10/10, 2/13
Saddleback College
ASSOCIATE DEGREE NURSING
PROGRAM
(Policy III.8)
EMOTIONAL HEALTH

1. The signs and symptoms of emotional distress may affect one’s clinical or academic performance. These may include, but are not limited to the following:
   - extreme anxiety resulting in the inability to focus, concentrate, or perform clinically or academically,
   - agitation, hyperactivity, severe apprehension, flight of ideas, grandiosity, loose associations, or excessive verbalization,
   - multiple somatic complaints that impair the student's functioning,
   - excessive fatigue
   - errors in judgment due to anxiety or indecisiveness,
   - auditory or visual hallucinations,
   - extreme sadness, tearfulness or psychomotor retardation,
   - self-destructive behaviors, including but not limited to suicide ideation or attempts,
   - pessimism, feelings of hopelessness and helplessness, or loss of interest or motivation,
   - delusions, including persecutory, grandiose, religious, or nihilistic,
   - disorganization of thought processes,
   - attention seeking or overly-dependent behaviors,
   - manipulative behaviors,
   - angry, aggressive behaviors or verbalizations,
   - failure to participate in activities required to meet objectives and pervasive distrust and suspiciousness, pervasive pattern of detachment, pervasive pattern of low self-image, identity disturbance, and impulsive behavior that is potentially injurious to self or others.

2. Faculty responding to students displaying behaviors consistent with emotional distress or illness will follow Saddleback College’s Faculty Guide: Responding to distressed, disruptive or threatening students. Measures that may be taken by faculty may include referral to the Saddleback College Crisis Intervention team, Student Health Service or notification of Campus Safety.
   - If patient and/or student safety is compromised, the nursing faculty has the responsibility and the authority to take immediate action, which may include:
     - removing the student from the setting
     - requiring the student to find alternative transportation from the facility
     - writing up a Counseling Flow Sheet and give to student
     - referring the student to the assistant director and/or nursing program director, and
     - referring the student to the Vice-President of Student Services.
The faculty will document the incident in the student’s file and complete a Saddleback College Unusual Occurrence Report.

The Board of Registered Nursing emphasizes “the importance of seeking voluntary aid for conditions that could, if left unattended, lead to disciplinary action and may prevent the student from being licensed to practice nursing in the State of California.” Therefore, the student is expected to furnish evidence of counseling or treatment in a recognized treatment modality and that he/she will be able to function safely and effectively in a classroom/clinical setting.

3. A student dropped from the nursing program under this policy may be considered for re-entry but is not guaranteed.

Reviewed: 12/17, 9/18
Revised: 9/14, 10/15
Saddleback College
ASSOCIATE DEGREE NURSING
PROGRAM
(Policy III.9)
MAKE-UP EXAMINATIONS

1. A student is expected to take regularly scheduled examinations. However, it is recognized that there are occasional, justifiable, extenuating circumstances for missing an examination. These will be handled on an individual basis by the course instructor. Proof of emergency/illness may be required at the discretion of the instructor.

2. Students must review the course syllabus for specific make-up examination guidelines for each course.

3. It is the student’s responsibility to make arrangements for make-up examinations with the instructor according to the instruction in the course syllabus. Instructors are not required to offer make-up exams.

4. An exam that is made up may receive a maximum grade of 75%.

Reviewed: 12/17, 9/18
Revised: 10/10, 8/12
INCOMPLETE GRADES

1. It is a requirement of the nursing program that a student must complete, with a grade of “C” or better, all nursing courses in a semester in order to progress.

2. A student who receives an “Incomplete” in a course must complete the deficiency with a grade of “C” or better within three (3) weeks of the end of the semester. Failure to meet this requirement will result in the student being dropped from the nursing program. A grade of “D” or “F” may be assigned.

3. A student who receives an “Incomplete” will be required to meet with the nursing program director.

(See also Saddleback College Catalog “Academic Regulations”)

Reviewed: 12/17, 09/18
Revised: 01/11, 8/12
Preceptorship Policy and Procedure

Purpose:
Preceptorship is a component of the N 176 Advanced Medical Surgical Nursing clinical course. The purpose of preceptorship is to provide students with a clinical experience that is supervised by the nursing program faculty and assists the students in making the transition from the student role to the entry level professional RN role.

1. Outcomes:
The student will:
- integrate biopsychosocial concepts and theories, and principles of critical thinking, clinical reasoning and clinical judgment to apply the nursing process to make clinical decisions for managing the care for acute and critically ill patients, families and groups of patients,
- apply evidence-based nursing principles to safely provide comprehensive nursing care for patients and families in acute and complex care situations,
- communicate effectively with patients, families, and the inter-professional health care team to achieve quality patient care, and
- demonstrate the knowledge, skills, and attitudes required of the professional nurse as defined by the California Nurse Practice Act and Standards of Nursing Practice.

2. Procedure:
Program Preceptor Requests:
- nursing program director requests preceptor placements per the Orange County Long Beach (OCLB) Nursing Consortium guidelines in clinical agencies utilized by the N 176 Advanced Medical Surgical Nursing course and
- program request for preceptorship are approved in the preceding academic year and maintained by the nursing program director.

Requesting Unit Specific Preceptorship Placements for N 176:
- requests will be made for preceptorship assignments in the students’ current clinical agency,
- under no circumstances are students allowed or encouraged to secure their own preceptors outside of the designated process in this policy and per Orange County Long Beach Consortium guidelines,
- faculty will consider student request, clinical performance, theory grade, strengths, weaknesses and learning needs prior to development of a preceptorship overview list of preceptorship placement needs to the director of education at the assigned clinical facility,
- if students have a theory score of ≥ 85%, and have taken EKG and/or ACLS it may be possible to precept in and ICU, CCU, or ED,
- for the student who requests a PICU preceptorship, PALS is required, PALS is recommended for ED preceptorship placements,
- preceptors will be identified by the director of education, unit directors or clinical agency designees and must meet the following requirements:
  - an active, clear license issued by the BRN;
Policy # III.11

- clinically competent, and meets the minimum requirements specified in section 1425(e);
- employed by the health care agency for a minimum of one (1) year; (in clinical area where preceptorship will take place) and
- completed a preceptor orientation program (may be provided by clinical faculty member) prior to serving as a preceptor.

- in addition, ideally preceptors:
  - have attended a preceptor training course or have experience with precepting students or nursing education and
  - are seen as clinical experts and

- once preceptor’s names have been provided to clinical faculty, each clinical faculty member will assign a preceptor to each clinical student and will inform the student of the best way to contact the preceptor.

3. Contacting and Orienting Preceptor:

- first contact should be made by the clinical faculty who reviews objectives of preceptorship and orients the preceptor to the preceptorship program at Saddleback College Nursing Program, and has the preceptor sign the Preceptor Contact Conferences Worksheet,
- clinical faculty complete BRN EDP-P-02: preceptors should at least be at the level of clinical teaching assistant,
- clinical faculty complete the Preceptorship Overview table which includes the following:
  - student name, preceptor name, unit, contact number, hire date, license and license expiration date
- faculty will offer the Saddleback College Preceptorship Self Learning Module to preceptors and upon completion of the module, quiz and evaluation 6 CEUs are awarded to the preceptors.

4. To Progress to Preceptorship, Students Must:

- meet all clinical objectives of the N 176 Advanced Nursing clinical at mid clinical,
- have and maintain a minimum of 72% theory grade for N 176 and
- attend the preceptorship orientation and review policy and procedures for preceptorship

5. Roles of Preceptorship

Preceptor Role:

- attends preceptor workshop and/or is oriented to preceptorship by clinical faculty, as applicable,
- fills out BRN information sheet EDP-P-02 and Preceptorship Contract Conferences form,
- shares work schedule and phone number or email with preceptee and clinical faculty,
- reviews preceptor packet with preceptee,
- assists clinical faculty in arranging a substitute or back up preceptor as needed,
- discusses preceptee’s weekly objectives and guides his/her learning through selection of increasingly complex duties in order to meet nursing objectives,
- supervises and teaches the preceptee in the clinical area and is present and available on the patient care unit during the entire time the student is in his or her preceptorship rendering nursing services,
- confers with the faculty liaison on the preceptee’s progress in meeting clinical objectives,
- utilizes clinical faculty for consultation as needed,
Policy # III.11

- gives the preceptee daily feedback, and documents preceptee’s ability to meet clinical objectives on the Preceptorship Performance Evaluation,
- recognizes that when a conflict between students for patients in the clinical unit occurs, the goal is for both students to be able to “peacefully coexist,” contacting clinical faculty if a conflict should occur,
- please notify clinical faculty whenever a concern over student performance exists; the sooner the faculty is alerted to a potential problem the sooner the faculty will be able to intervene in order to try to remediate the student and facilitate their successful completion of the course,
- completes the Preceptorship Performance Evaluation with the preceptee and
- in the event that the assigned preceptor is unavailable to meet the students scheduling needs, a backup preceptor who meets the same requirements set forth in this Policy A.6 – 8.

Preceptee Role:

- requests desired unit according to instructions by clinical faculty,
- reviews preceptor packet with assigned preceptor prior to the first day of preceptorship,
- provides preceptor packet, personal phone number and email as well as phone number and email of clinical faculty with preceptor,
- works 96 – 108 hours to complete preceptorship based on selected preceptorship option,
- back to back days are expected when at all possible,
- students are expected to work a minimum of 1 day per week over a minimum of 4 weeks,
- develops clinical schedule based on preceptor’s workdays
- schedule MUST be given to clinical faculty prior to clinical days,
- days WILL NOT be counted if clinical faculty is NOT notified in advance of working day,
- works under the supervision of the preceptor or their “designee”, and is able to appropriately use other personnel in the setting for supervision or consultation,
- reviews the Preceptorship Performance Evaluation prior to preceptorship and works with the preceptor throughout the rotation to identify learning needs and to seek out opportunities to meet the majority of clinical objectives, as experiences are available,
- completes or contributes to and implementing a minimum of one patient plan of care
- achieves objectives jointly determined by the preceptee/preceptor and clinical faculty at a satisfactory level,
- contacts preceptor and clinical faculty in advance for absences,
- completes the master needs list and the terminal objectives and provides a copy to the preceptor and clinical faculty,
- completes the critical thinking reflection log after each preceptorship day,
- demonstrates the ability to manage 75% of the preceptor’s patient care assignment using the preceptor as a resource by the end of the preceptorship rotation,
- completes the Preceptorship Performance Evaluation with the preceptor (note N176 faculty realize that it may not be possible to meet all of the listed clinical objectives due to the availability of experiences.)
- it is expected that the preceptee modify/personalize the clinical objectives as needed; and
- evaluates preceptor upon completion of preceptorship.

Clinical Faculty Role:

- submits requests to clinical agency designee.
• will consider student request, clinical performance, theory grade, strengths, weaknesses and learning needs prior to development of a preceptorship overview list of preceptorship placement needs to the director of education at the assigned clinical facility,
• meets with preceptees N 176 clinical faculty team for preceptorship orientation to review requirements, objectives, outcomes and expectations of preceptorship in N 176,
• orient preceptors to Saddleback College’s Preceptorship Program, ensuring that they meet BRN and program requirements for preceptors,
• completes the BRN EDP-P-02 approval form prior to preceptorship,
• completes the Preceptorship Contract/Conferences form prior to and throughout preceptorship rotation.
• completes the preceptorship overview form and submits to nursing program director at the beginning of the preceptor rotation.
• assists preceptee/preceptor by:
  o identifying learning experiences needed for individual students,
  o reviewing preceptee’s written or verbal goals,
  o communicating with preceptor on a regular basis to assess preceptee progress,
  o being a resource and support person for the preceptor and preceptee,
  o communicating each shift with preceptee/preceptor regards progress towards meeting goals,
  o being available to the preceptor and student during the entire time the student is involved in preceptorship 24 hours/day 7 days/week by phone and in person if requested,
  o being physically present on site with the student nurse and preceptor to review and document student progress towards meeting goals at least once a week or every other shift, and
  o helping with the evaluation process throughout the preceptorship
• encourages feedback from preceptor focusing on preceptees’ clinical experiences, and progress toward meeting goals and objectives of preceptorship,
• the clinical faculty will assist the preceptor in problem solving with regards to planning, implementing, and evaluating the preceptee learning experiences,
• meets with hospital personnel prior to preceptorship to facilitate understanding the goals, objectives and roles of the participants in preceptorship,
• provides nursing director with preceptorship overview form, EDP-P02 forms, and dates of preceptorships,
• reviews the preceptorship performance evaluation with the preceptor/preceptee,
• faculty member completes the final evaluation of the student with input from the preceptor; and
• faculty collects evaluation of preceptors, and reviews evaluations to determine if preceptors will be utilized for future student.

Reviewed: 1/18, 2/19
Revised: 1/18; 2/19
CREDIT BY EXAMINATION

The purpose of credit by examination is to allow a student to gain credit for a specific nursing course by demonstrating mastery of the subject matter. Proficiency in subject matter and/or clinical skills shall be assessed through examination and/or skill demonstration, and must be at the level expected of students who have successfully completed the course at Saddleback College.

1. The student must meet the eligibility requirements for credit by examination established by Saddleback College (see current catalog). In addition, the student:
   - shall only be allowed to petition to receive credit by examination one time per course,
   - may not petition for credit by examination for a course in which they have previously enrolled and received a grade,
   - may not petition for credit by examination for a course in which they have been enrolled after the first two weeks of a semester, except under special circumstances as determined by the director and appropriate faculty,
   - must complete a written comprehensive examination and a clinical simulation for all nursing courses with a lab component,
   - must satisfactorily pass both theory and clinical performance challenges for credit to be given for the course,
   - may not challenge a course that they have taken and failed in the nursing program and
   - must have completed, with a grade of “C” or better, all courses prerequisite to the course she/he wishes to challenge.

2. Procedure
   - the student obtains a Credit by Examination petition form from the Office of Admissions and Records which will determine eligibility,
   - the student applying to take the challenge exams must be currently enrolled at Saddleback College and taking at least 12 units,
   - the student contacts the lead faculty for the course for which Credit by Examination is requested and provides written documentation of the student’s knowledge and skills,
   - if it is the judgment of the faculty that the student possesses sufficient background, previous training, and/or skills to attempt the examination, the faculty signs the form,
   - the faculty forwards the signed form to the director of the nursing program for signature,
   - following division endorsement, the request is forwarded to the vice president of instruction for signature,
• the nursing office staff and/or course faculty shall notify the student of the examination arrangements,
• information concerning course modules, textbooks, and supplementary reading materials shall be provided to the student prior to the date of the examination,
• the lead faculty for each course will be responsible for setting up the standard performance objectives,
• the lead faculty for the course prepares, administers, and grades the examination,
  • examples may include a combination of standardized testing or faculty prepared exam
• upon satisfactory completion of the theory challenge, the student will take the clinical challenge based on the course content
  • examples may include clinical skills demonstration and/or clinical simulation
• the grade for clinical performance will be satisfactory / unsatisfactory. Students must achieve a passing score in both the theory and clinical challenge,
• a grade of pass (P) or no pass (NP) will be assigned. Upon passing, the course will be identified as “Credit by Examination” on the student’s transcript,
• if credit is granted, the admissions office shall record credit for the course on the student's official transcript.
• the petition shall be filed in the student's folder,
• the nursing office shall notify the student of the results and
• the student will pay the required unit tuition and associated course fees.
Saddleback College
ASSOCIATE DEGREE NURSING PROGRAM
(Policy III.13)

SOCIAL MEDIA AND USE OF TECHNOLOGY

Saddleback College Associate Degree Nursing Program is committed to protecting the health information of every client with whom a student comes in contact, as well as the education information of every student. Distribution of sensitive and confidential information is protected under HIPAA whether discussed through traditional communication channels, technology or through social media.

The nursing department at Saddleback College supports the appropriate use of social media and technology, thereby, recognizing that connecting, collaborating and communicating with the learning community are important for professional growth. The department acknowledges the value of sharing and communicating one’s opinion, and supports such communication between students and faculty. The nursing program also requires that students check their Saddleback College email and Blackboard regularly. Email correspondence must be through a Saddleback College email account. Cell phone use is also a part of technology that is regulated within the program (see Policy III.4 regarding cell phone use).

Future employers often review social networking sites when considering potential candidates for employment. No privatization measure is perfect. Information can “live on” beyond its removal from the original website and continue to circulate in other venues.

The internet may be searched periodically for breaches in confidentiality.

The student must follow the clinical agency’s policy regarding the use of laptops, tablets or other electronic devices.

A. In the professional role as a nursing student, you must not:

1. exchange personal information, of any kind, between you and a patient,

2. present the personal health information of any individual on ANY social site. Removal of an individual’s name does not constitute proper de-identification of protected health information. Inclusion of data such as age, gender, race, diagnosis, date of evaluation, or type of treatment or the use of a medical photograph may still allow the reader to recognize the identity of a specific individual,

3. post or discuss any classroom or clinical information or experiences regarding faculty, other students, clinical agency and its staff, and clients/patients with use of technology or on any internet social media site. Examples include, but are not limited to the following:
   - blogging
   - podcasting
• social networking
• social news sharing
• social bookmarking/social tagging
• photo/video hosting

4. present yourself as an official representative or spokesperson for the Saddleback College Nursing Department,

5. utilize websites and/or applications in a manner that interferes with your clinical commitments,

6. discuss any information regarding exams or quizzes in an electronic format or in social media,

7. display language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity, religious beliefs or sexual identity, and

8. present information that may be interpreted as condoning irresponsible use of alcohol, substances, or sexual promiscuity.

B. Any student who violates the Social Media and Use of Technology Policy will:

1. meet with the nursing program director to determine disciplinary actions and further eligibility in the program, and

2. be subject to disciplinary actions by the clinical site, and/or Saddleback College.

Students are legally responsible for anything posted through use of technology or in social media forums. Individuals should make every effort to present themselves in a mature, responsible and professional manner. Discourse should always be civil and respectful. Nursing students are preparing for a profession which provides services to the public and expects high standards of behavior and professional communication. Students need to remember that their online presence should reflect them as a professional. Ultimately, each individual has the sole responsibility for what they post. Caution should always be used to protect privacy and all confidential information.

Reviewed: 1/18, 2/19
Revised: 2/17, 1/18
Saddleback College
ASSOCIATE DEGREE NURSING PROGRAM
(Policy III.14)

MATH COMPETENCY

1. In order to provide for patient safety and validate student competency a medication/fluid administration calculation test will be administered each semester.

2. The lead instructors for N170, N172, N173, and N176 are responsible for generation and administration of the test for their respective course.

3. The competency will assess math skills necessary for safe and effective medication/fluid administration required for each individual course.

4. Individual course teams will determine the timing of test administration based on course needs and college/course drop dates.

5. Students must score a minimum of 85%.

6. A student receiving a score less than 85% may retake the test one time. Prior to the retest, the student is required to review math errors and seek appropriate assistance to meet their learning needs.

7. Students in N170, N172, N173, and N176 who score less than 85% on the retest must withdraw from the class as a clinical failure.

8. All Students must remediate according to directions from the Nursing Program Director or designee before re-entry into the program. Students must also follow Policy II.11.

9. All students are required to review the course syllabus for specific instructions.

Reviewed: 1/18, 2/19
Revised: 1/15, 1/18
1. Generic students must take core nursing classes with a clinical component in the following sequence:
   - Semester 1: N 170 and N171
   - Semester 2: N 172
   - Semester 3: N 173, N 174
   - Semester 4: N 176

2. Additional core nursing classes must be completed within the following sequence:
   - N160 & N165 prior to or concurrently with semester 1
   - N161 prior to or concurrently with semester 2

3. LVN/transfer students will complete core nursing courses in the sequence determined during preadmission advisement with the nursing program director or assistant director.

4. Theory grades are based on objective examinations and written assignments per each course syllabus. The grading scale for all “N” courses is:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90-100%</td>
</tr>
<tr>
<td>B</td>
<td>80-89%</td>
</tr>
<tr>
<td>C</td>
<td>75-79%</td>
</tr>
<tr>
<td>D</td>
<td>60-74%</td>
</tr>
<tr>
<td>F</td>
<td>59% or less</td>
</tr>
</tbody>
</table>

Using the scale listed below, the final theory grade may be rounded up from 0.5 or higher except to pass the course:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>89.5 -100%</td>
</tr>
<tr>
<td>B</td>
<td>79.5 - 89.4%</td>
</tr>
<tr>
<td>C</td>
<td>75.0-79.4%</td>
</tr>
</tbody>
</table>

5. Clinical grades are “pass/fail.” The letter grade assigned is the same as obtained in the theory portion of the course.

6. Incomplete grades are assigned according to the grading policy as outlined in the Saddleback College Catalogue.

7. A student in the nursing program who does not achieve a minimum grade of "C" in any required course cannot progress in the nursing program until such course is completed with a minimum grade of "C". A student may repeat a course with a clinical component only once.
8. Student withdrawal from a nursing course with a clinical component will be considered a failure in that course if, at the time of withdrawal, the student is receiving a grade less than "C" in theory and/or has unsatisfactory performance in the clinical component. The student’s transcript will reflect a “W” if the student withdraws prior to the college drop date. The nursing program history will be recorded as a failure.

9. A "D" or "F" in theory or a clinical failure results in a failure of the entire course (clinical and theory).

10. Formal drops or withdrawals with the office of admissions and records are the responsibility of the student.

11. A student who has 2 final course or clinical failures in the nursing program will be dropped from the nursing program and is not eligible for re-entry.

12. For readmission, a student who withdraws from the nursing program must meet with the nursing program director or designee for advisement purposes and complete a petition requesting re-entry to the program (see policy II.11).

13. All first semester students desiring reentry must complete the entire application process. (see policy II.11)

14. Eligible students will be readmitted on a space-available basis.

15. The faculty believes that dishonest behaviors are inconsistent with safe nursing practice and, therefore, reserve the right to dismiss from the nursing program any student who demonstrates evidence of dishonest behaviors.

16. A student dismissed for academic dishonesty, unprofessional behavior or breach of confidentiality is not eligible for re-entry into the nursing program.

Reviewed: 1/18, 2/19
Revised: 2/17, 1/18
Saddleback College
ASSOCIATE DEGREE NURSING
PROGRAM
(Policy III.16)
DISABLED STUDENTS’ PROGRAMS AND SERVICES (DSPS)

1. The student must present the memo “Accommodated Testing for Students with Disabilities” and discuss their individual needs with the faculty member on the first day of class or immediately upon notification of eligibility.

2. The student should schedule accommodated testing dates with DSPS to coincide with the date of the course’s scheduled quiz/test dates unless alternate instructions are given by the course lead instructor(s).

3. The DSPS test envelope must be delivered by the students to course faculty member a minimum of 7 days prior to the quiz, unless special consideration is approved by the instructor.

Reviewed: 1/18, 2/19
Revision: 2/13, 2/14
Clinical Evaluation and Critical Objectives

1. Clinical evaluation will be completed at least once each clinical course. Evaluation by the student’s assigned clinical faculty(s) shall include student’s positive accomplishments as well as any identified deficiencies that need improvement. Evaluations must be in writing and signed by the faculty. Students are expected to participate in the evaluation process and sign the form. The evaluation will be submitted to the division office for placement in the student’s file.

2. Students who are unsuccessful in clinical performance must withdraw from the course. (See Policy II.11)

3. Students who have an identified deficiency which is not a critical objective may be given a Counseling Flow Sheet. As time allows, the student will have two (2) clinical weeks to improve the identified deficiency (ies).

4. If the deficiency identified is a critical objective of the course or the program, the student will receive a "Counseling Flow Sheet" and may be dismissed from the course at any time. (See next page)

5. In addition to critical objectives listed, students may be dismissed from the clinical course for:
   - removal of any unauthorized syringe, needle, medication, supplies or equipment from the skills lab or computer lab,
   - removal of such items from any clinical facility for any reason,
   - removal of any hospital supplies or skills lab supplies or equipment that has not been issued to them (See Policy II.6) or
   - any violation of HIPAA

6. No hospital generated medical record that may be traced back to a particular patient may be removed from any facility. Removal of any patient information by any means, such as, but not limited to, faxing, copying, duplicating, emailing, photographing or using any electronic method is prohibited.

7. Inappropriate access to the records of patients not currently receiving any type of care from the student is prohibited.
CRITICAL OBJECTIVES FOR ALL COURSES*

( Included in all clinical classes. Each clinical course will have end of course clinical student learning outcomes that must be met in order to progress. See course syllabus.)

The student will:

- utilize standard precautions,
- use two patient identifiers for medication administration and treatments
- utilize the “Rights of Medication Administration” to administer medications,
- immediately report any significant change in the patient’s condition to the responsible RN,
- validate with faculty nursing practices and/or procedures that are contrary to classroom instruction prior to initiation of patient care,
- recognize and immediately report any error or unsafe condition to the clinical faculty,
- maintain academic honesty, professional behavior and confidentiality and abide by the Code of Conduct and Ethics (See Policy II.6),
- recognize own limitations and accurately assess own abilities prior to initiation of patient care,
- have the faculty or another licensed nurse present at the bedside when performing any procedure for the first time or until the student has been deemed safe by the faculty,
- Throughout the Saddleback College Nursing Program, no student will perform the following skills without direct supervision by a faculty or licensed RN:
  - all IV insertions,
  - all IVP medications
  - all accesses for the purpose of phlebotomy,
  - any access to central lines or implanted ports for any purpose,
  - TPN administration, and
  - blood and blood product administration.
  - invasive procedures

This statement is not inclusive - course by course guidelines will be found in each clinical syllabus and further defined by the clinical facility policies

*Failure in any one of these areas will result in a referral to the director and may result in dismissal from the course.

Reviewed: 1/18, 2/19
Revised: 8/12, 4/17
STANDARD PRECAUTIONS AND INFECTION CONTROL

1. Use appropriate barrier precautions to prevent skin and mucous-membrane exposure when contact with blood or other body fluids of any patient is anticipated.

2. Gloves will be worn when touching blood and body fluids, mucous membranes, or non-intact skin of all patients, for handling items or surfaces soiled with blood or body fluids, for performing invasive procedures such as venipuncture and other vascular access procedures, and administering injections.

3. Gloves will be changed after contact with each patient. Gloves must be discarded according to facility policy whenever exiting a patient’s room. Hand hygiene is to be performed before applying gloves and after removal.

4. Hand hygiene will be performed prior to and immediately after every patient contact. Hands or other skin surfaces will be washed immediately and thoroughly, with soap and water, if contaminated with blood or other body fluids or if visibly soiled. Hand hygiene with soap and water is required when caring for a patient with C. Difficile.

5. Gowns, masks and protective eyewear or face shields will be worn during procedures that are likely to generate droplets, splashes or sprays of blood or other body fluids to protect exposure of mucous membranes of the mouth, nose, and eyes.

6. Gloves, gowns, and protective eyewear or face shields, according to agency policy, while handling an infant, the placenta, or umbilical cord throughout the birthing process.

7. Take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures and during cleaning and disposal.

8. Needleless systems will be used whenever available. Contaminated needles will not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand.

9. After use, disposable syringes and needles, scalpel blades, and other sharp items will be placed in designated puncture-resistant containers for disposal.
10. Nursing students or faculty who have open lesions or weeping dermatitis will refrain from all direct patient care and from handling equipment until the condition resolves at the discretion of the clinical instructor.

11. Respiratory resuscitation will be performed using bag-valve-mouth devices, face shields with one-way valves, or other ventilation devices available in patient care areas.

12. Immediately report any contamination by blood or body fluids to the Saddleback College clinical faculty. The clinical faculty will initiate the procedure for reporting and follow-up with Saddleback College and the clinical facility. Students in clinical without an on-site faculty will notify the agency of the exposure and immediately page their faculty.
Saddleback College
ASSOCIATE DEGREE NURSING PROGRAM
(Policy IV.3)

SKILLS LAB AND COMPUTER LAB

Skills Lab Guidelines:
I. Upon arriving
   • turn off cell phones or put on vibrate
   • log in every time except during scheduled clinical time such as simulation
   • never log in for anyone else and
   • do not eat or drink in the lab except water in closed container

II. While working
   • do not use pens or markers around the manikins or equipment,
   • report any damage to equipment or operating problems to the lab staff and
   • have direct supervision by an instructor for the following:
     o IV insertions,
     o Phlebotomy and
     o Injections.

III. Before leaving
   • clean up area prior to leaving lab,
   • straighten the bed linens
   • if you put anything on a manikin (tape, topical meds, etc.) clean off the manikin
   • place beds in locked and lowest position and
   • place side rails up when manikin in the bed

IV. No equipment or supplies should leave the lab unless it is properly checked out.

Computer lab guidelines
I. Absolutely no food or drinks allowed including water.

II. Appropriate computer usage includes working on school related assignments.

III. Refer to Saddleback College Student Handbook for appropriate computer use.

Reviewed: 1/18, 2/19
Revised: 1/15
ELIGIBILITY FOR PINNING CEREMONY

Award of the Saddleback College Nursing Pin signifies completion of courses required by the Board of Registered Nursing for eligibility to sit for the State of California NCLEX exam. Therefore, in order for a nursing student to receive a Saddleback College Nursing Pin the student must have satisfactorily completed the following courses (or their transfer equivalents):

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Name</th>
<th>Course Code</th>
<th>Course Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bio11</td>
<td>Human Anatomy</td>
<td>N160</td>
<td>Pharmacology</td>
</tr>
<tr>
<td>Bio12</td>
<td>Human Physiology</td>
<td>N170</td>
<td>Nursing Process</td>
</tr>
<tr>
<td>Bio15</td>
<td>Microbiology</td>
<td>N171</td>
<td>Mental Health Nursing</td>
</tr>
<tr>
<td>N165(Gero101)</td>
<td>Fundamentals of Aging: Lifecycle I</td>
<td>N172</td>
<td>Medical-Surgical Nursing</td>
</tr>
<tr>
<td>Psych 1</td>
<td>Introduction to Psychology</td>
<td>N173</td>
<td>Nursing Care of Children and Families</td>
</tr>
<tr>
<td>N161</td>
<td>Growth and Development: Lifecycle II</td>
<td>N174</td>
<td>Women’s Health Nursing</td>
</tr>
<tr>
<td>Eng1A</td>
<td>Principles of Composition 1</td>
<td>N176</td>
<td>Advanced Nursing</td>
</tr>
<tr>
<td>SP1</td>
<td>Communication Fundamentals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OR</td>
<td>OR Interpersonal Communication</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SP5</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Reviewed: 1/18, 2/19
Revised: 4/11; 1/12
Saddleback College ASSOCIATE
DEGREE NURSING PROGRAM
(Policy VI.4)

STUDENT GRADE NOTIFICATION

1. Grades will NOT be emailed or posted in a public place.

2. It is the responsibility of each professor to inform students as to the procedure for obtaining grades for each individual class.

3. Faculty should attempt communication by phone or in person for any nursing student with a course or clinical failure.

4. The lead instructor must notify the nursing office and the student who did not pass the nursing class within 48 hours of not passing the class.
1. Class Climate Evaluations:
   • of all nursing department classes are completed by students at the end of each course (and some selected learning opportunities such as Simulation Lab).
   • are completed online independently and anonymously for each theory and clinical experience and
   • are posted once grades are finalized, the completed evaluations are released by the nursing office to the appropriate faculty for analysis and needed follow up.

2. Student Course Representatives:
   • attend monthly faculty meetings and present any student feedback from their designated class and.
   • are invited to attend the end of course team meeting in order to provide feedback for lecture and clinical experiences.
   • are encouraged to share their concerns freely in an atmosphere of openness and collegiality without fear of negative consequences.

3. Optional Faculty Evaluation:
   • Faculty may elect to utilize written evaluations that protect anonymity and comply with the faculty contract using the following procedures:
     • For Lecture Classes:
       o lecture evaluations may be distributed to students at the time of the course final examination or through class climate,
       o students place completed written evaluation in an envelope located in the back of the classroom as they exit,
       o a student volunteer will deliver the sealed envelope to staff in the nursing office and
       o once all grades have been posted and all clinical evaluations are completed the faculty will receive the evaluations.
     • For Clinical Classes:
       o faculty evaluation forms may be distributed during the last post-conference or through class climate,
       o a student representative will collect the completed evaluations and placed in a sealed envelope and delivered to the nursing office and
       o once all grades have been posted and all clinical evaluations are completed the faculty will receive the evaluations.
Acceptance Statement

As a nursing student at Saddleback College, I accept, understand, and agree to the following statements:

1. The program abides by ethical and legal responsibilities of nursing defined within the Nurse Practice Act.

2. Dishonesty and/or plagiarism will not be tolerated in either the theory or clinical component of any course. All assignments are to be individually completed and, in the student’s, own words with appropriate documentation of references. If faculty identifies an incident of dishonesty or plagiarism, the student will receive a zero for the assignment/test and will be required to meet with the nursing program director. (See College Catalog, Code of Conduct).

3. All students, in good standing with the nursing program, must register as assigned for the theory class and for the corresponding lab section for each nursing course (N170- N176).

4. All nursing courses must be taken in the required sequence and completed with a minimum grade of “C” (75%) prior to or concurrent with the semester for which they are listed. Students not meeting this requirement will not be allowed to progress to the next sequenced course.

5. Each nursing course has critical objectives identified in the course syllabus. Failure to comply with critical objectives may result in failure of the clinical component of a course (See Policy IV.1).

6. In addition to critical objectives listed, students may be dismissed from the clinical lab for:
   - removal of unauthorized syringe, needle, medication, supplies or equipment from any clinical facility for any reason or,
   - any violation of HIPAA.

7. No hospital generated medical record, that may be traced back to a particular patient, may be removed from any facility. Removal of any patient information by any means, such as, but not limited to, faxing, copying, duplicating, emailing, photographing or using any electronic method is prohibited.

8. Strict adherence to the Social Media and Use of Technology Policy (Policy III.13) must be followed at all times.

9. Strict adherence to the Skills and Computer Lab Policy (Policy IV.3) must be followed at all times.

10. Students/Saddleback College/Faculty periodically record events with the nursing program through photography and/or videography. Students may request in writing to opt out of such activities.
11. A student must pass the theory and clinical component of a nursing course in order to pass the course. Failure in either theory or clinical will necessitate repetition of the entire course. (See Policy III.15)

12. Students who have an identified deficiency, in either theory or clinical, will be given a “Counseling Flow Sheet”, and counseled by an instructor and/or nursing program director. As time allows, the student will have two (2) clinical weeks to improve the identified deficiency(ies). If the deficiency identified is a critical objective of the course or the program, the student may be dismissed from the course at any time (See Policy IV.1). Official withdrawal from a course is the responsibility of the student.

13. A student who withdraws from the nursing program, and is eligible for re-entry, must notify the division office, meet with the nursing program director or designee at the time of the withdrawal and complete a petition requesting re-entry to the program (See Policy II.11).

14. Students are expected to attend each class and clinical lab. In order to continue in the nursing program students must attend the first clinical day (orientation) and any other orientation requirements of each rotation. On any other clinical day, students who find it necessary to be absent from class or clinical lab are to notify the instructor/facility prior to the time class or lab begins according to directions given by the course instructor. Promptness is required (See Policy III.5).

15. In the event of illness or injury greater than 1-week duration, the student must provide a medical clearance before returning to class or clinical lab. A student with a cast, crutch, cane, splint, sling or other device which impairs mobility or creates an unsafe environment will not be allowed in the clinical area. Medical clearance, including a completed Saddleback College Nursing Medical Release, will be required before returning to the clinical area (See Policy III.6).

16. All students in the nursing program are required to have a current American Heart Association Basic Life Support (BLS) Provider Card (See Policy III.2).

17. Students must follow standard precautions at all times. This is a critical element for all clinical courses in the nursing program (See Policy IV.2).

18. Students are required to follow the Nursing Uniform and Personal Appearance Policy (See Policy III.3).

19. If at any time a student’s physical and/or emotional health, attitude, or conduct displays potential harm to the personal well-being or well-being of others, the student may be removed from the clinical setting and counseled verbally and in writing (See Policy III.8).

20. A student suspected of being under the influence of any substance will not be allowed in the clinical setting or during any nursing program sponsored activity. Students may also be requested to leave lecture at the instructor’s discretion (See Policy III.7)
21. Make-up exam/quiz, if allowed, will be at the discretion of the instructor. Make-up examinations/quizzes may generate a maximum score of 75%. Students must refer to the individual course syllabus for examination guidelines (See Policy III.9).

22. Any concern that a student may have regarding theory or clinical lab should be resolved by first seeking a conference with their respective instructor. If the problem is not resolved, the student, the instructor, or both may request a conference with the nursing program director.

23. All students have the right to contact the Board of Registered Nursing and the National League for Nursing Accrediting Commission regarding concerns about the educational program offered at Saddleback College.

24. Student input is welcome throughout the semester. A formal meeting with faculty is scheduled at the end of each course (See Policy I.3).

25. During the nursing program, each student will have the opportunity for experience at a variety of healthcare facilities. It is each student’s responsibility to obtain transportation to the assigned clinical facility.

26. Students may have assignments on any shift and may be assigned on any day, including Saturday and Sunday. After registration is complete, students may be changed to a different clinical site at the discretion of the nursing department as needed to obtain optimal clinical experiences.

27. Most clinical classes require extensive pre-planning and assignment preparation time. Students must commit to these unassigned hours in order to meet course requirements. Typically, this will involve a trip to the hospital on the day before the regularly scheduled clinical lab. Plan for 2-6 hours for patient selection and research. Any student who comes to the clinical lab unprepared to care for a patient safely, may be asked by the instructor to leave the clinical setting. This is considered an unexcused absence.

28. In N176, students will be assigned to a specific preceptor and may not make assignments on their own. The student will work the same shifts, days or nights, as the assigned preceptor. These shifts may vary from week to week. Selection and assignment of clinical facilities and preceptors during N176 is made by the instructor. Students are NOT to attempt to make any arrangements for themselves.

29. All students are strongly encouraged to register for the skills lab course.

30. All nursing program courses may be challenged. See college catalog and Policy III.12 for information on Credit by Examination.

31. In order to be certified as a graduate of Saddleback College with the Board of Registered Nursing, the student must take at least 12 units in residency at Saddleback College.

32. In order for a nursing student to receive a Saddleback College Nursing program pin, the student must have satisfactorily completed all courses required in the BRN approved nursing curriculum. (See Policy V.2).
33. All students are required to take the content mastery series exams as part of the nursing program. These tests are administered intermittently throughout the program. They will be administered according to the individual course instructor. Test feedback and remediation is available online for students after each test.

34. Yearly requirements for all students include a current TB test and maintenance of malpractice insurance. Students may not register for clinical nursing courses unless this requirement is completed.

35. All students must maintain academic honesty, professional behavior and patient confidentiality requirements (HIPAA) in order to successfully complete the Saddleback College Nursing Program.

I have read and accept all the above statements. I will take responsibility to read all policies in the student handbook on a yearly basis. I will research policies prior to addressing problems to the Division Office. I will abide by these statements and policies and accept the responsibilities of my role as a Saddleback College nursing student.

_________________________________________    ________________________
Student                                      Date

_________________________________________
Witness

Note: A copy of this acceptance statement is in the student handbook.

Reviewed: 08/17, 09/18
Revised: 08/17, 09/18