COLLEGE OF MARIN

Nursing Student Handbook

2024-2025

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SECTION I

STUDENT HANDBOOK INTRODUCTION

Welcome to the College of Marin (COM) Registered Nursing Program. This student handbook will help you to become acquainted with the program. It contains information on the nursing program philosophy and curriculum framework, program objectives and outcomes, course structure and progression, program regulations, and student resources.

You will be held accountable for information found in the College of Marin Registered Nursing Program Student Handbook and for revisions made while you are a student in the program. After you have read this document, please sign and submit the Student Accountability Form online in Trajecsys. Students are also referred to the College of Marin website for information on student rights and responsibilities, academic standards, student conduct, and the academic complaint and grievance policies. More information specific to nursing is located on our College of Marin Nursing website.

The nursing faculty, staff, and administrators are available to assist you. All nursing department personnel hope your college experience is successful and rewarding.

State Board of Registered Nursing Approval and National Accreditation

The Registered Nursing Program is guided and approved by the California Board of Registered Nursing. Graduates are prepared to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN).

Board of Registered Nursing P.O. Box 944210 Sacramento, CA 94244-2100 Main Phone: (916) 322-3350 http://www.rn.ca.gov

The Registered Nursing Program has met eligibility requirements for and is seeking national accreditation from The Accreditation Commission for Education in Nursing (ACEN). Initial accreditation approval will be determined in Fall, 2026.

Notice From the Director of Registered Nursing on Non-Discrimination

Diversity, equity, and inclusion are high priorities at the College of Marin. Students have a right to an education and a supportive learning environment free from unlawful discrimination and harassment. I am personally committed to working in collaboration with students, colleagues, staff, and anyone else to foster that environment. I believe it is sometimes necessary to hold a safe and brave space for difficult conversations to take place that will further this goal, and I am willing to participate in them. I encourage anyone to discuss concerns with me to find opportunities to further that work.

The Marin Community College District is committed to providing an academic environment that respects the dignity of individuals and groups and is free from unlawful harassment and discrimination. Please refer to the following copy of <u>Marin Community College District Board Policy 3410</u> and <u>Administrative Procedure 3410</u> regarding Non-Discrimination. If you have any questions, please do not hesitate to contact me, Sadika Sulaiman Hara (Director of Student Services, Activities & Advocacy), or Nekoda Harris (Director of Human Resources).

Respectfully,

Alicia Bright

Dr. Alicia L Bright, EdD, CNS, RN AHN-BC

Director of Nursing

College of Marin

Finding Information about the College of Marin Registered Nursing Program

Information about the COM registered nursing program and its courses is available from multiple sources.

The <u>Nursing Department webpage</u> includes information on the program, the faculty, enrollment procedures, prerequisites, graduation requirements, and the program pathway.

The <u>College of Marin website</u> provides access to all the resources at the college. The <u>Catalog and Schedule</u> provides access to Nursing program course information, times, and locations. All students at COM are encouraged to complete the <u>COM Orientation</u>, which reviews campus processes and resources that will help you make a smooth transition to College of Marin.

Canvas is the web-based learning management software used at College of Marin. Each nursing course will have a Canvas course containing the course schedule, syllabus, assignments, learning resources, and grades. There is also a Canvas course for the Nursing Program which presents resources to students about the program and serves as an important forum for communication. Enrolled nursing students are required to self-enroll in the Nursing Program Resources Canvas course and enable announcements to ensure they receive valuable information from the program. Self-enroll in Nursing Program Resources Canvas Course here: https://marin.instructure.com/enroll/GAB6G8

Advanced Degrees in Nursing

Bachelor of Science Degree in Nursing (BSN)

Master of Science Degree in Nursing (MSN)

The nursing program encourages all students to transition to bachelor and graduate programs. In 2008, a \$100,000 Community College Chancellor's grant began a collaboration between the COM Nursing Program and <u>Sonoma</u> <u>State University (SSU)</u>. This project established a seamless pathway for current students to matriculate from the associate degree level at College of Marin to a bachelor's or master's degree program at SSU without duplication of course work. This initiative helped to clear obstacles that inhibited the advancement of critically needed leaders and educators in the nursing field.

Nursing students planning to transfer to a four-year institution should complete the lower division major requirements and general education courses for the appropriate transfer institution and major. Exact major requirements for UC and CSU institutions can be found on <u>www.assist.org</u>. Graduates of the Registered Nursing Education Program may transfer to several colleges and universities to study for a Bachelors or Master of Science degree in Nursing. Please see a counselor for more information as curriculum requirements may vary among the following schools:

Sonoma State University (https://nursing.sonoma.edu/academic-programs)

San Francisco State University (www.nursing.sfsu.edu)

Dominican University of California (https://www.dominican.edu/)

University of Phoenix (www.phoenix.edu/)

Touro University (MSN only) (https://tu.edu/programs/nursing/)

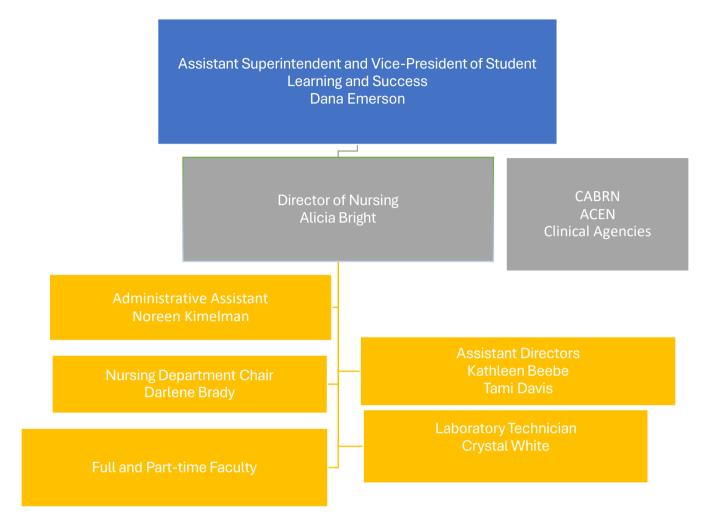
SECTION II

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Registered Nursing Department Organizational Structure



SECTION III

COLLEGE OF MARIN MISSION AND VALUES - REGISTERED NURSING PROGRAM BACKGROUND, TRADITIONS, PHILOSOPHY, AND CURRICULAR FRAMEWORK

Mission and Goals of the College of Marin

Values Statement of the College of Marin

Background and History of the College of Marin Registered Nursing Program

In 1964, the State Board of Nursing Education and Nurse Registration recommended that the College of Marin proceed with a registered nursing program. The Babcock Foundation, a local foundation which provides funding for several social and health-related projects, provided \$30,000 to assist with a planning year for the program and support for its first year of operation. With this funding, COM admitted its first nursing class of 30 students in the Fall of 1965.

Registered Nursing Program Pin

The College of Marin Nursing Program pin was designed by the graduating Class of 1984 to incorporate both the traditional and emerging culture of nursing. The Florence Nightingale lamp rests against Mount Tamalpais. It is surrounded to the left and right by laurel leaves. At the top is the name of the college and on the bottom is the Latin "Par Oneri." Let us look more closely at what this pin reflects.

<u>The Lamp</u> - Florence Nightingale was a rebel, a radical, a revolutionary, a scientist and a visionary. She was born in Florence, Italy in 1820, to well-to-do English parents and was named for that lovely city. She was a highly gifted and precocious child and her revolt against the conventional upbringing of young ladies of her day earned her the despair of her mother and governess. Her education was taken over by her scholarly Oxford-trained father, who allowed her the free use of his well-stocked library. At the age of seventeen she was a highly educated young woman, well grounded in ancient and modern languages and literature, the natural and social sciences, political economy, higher mathematics, and statistics.

Her parents sent her on long trips to the Continent to dissuade her from her early determination to study nursing. These trips, however, merely provided her with opportunities to examine hospitals throughout Europe. Her request to the Secretary of War crossed his request for her to go to the Crimea. The nursing and sanitary reforms initiated there dramatically reduced the mortality rate of British soldiers. The lamp is a symbol of the around-the-clock solace and healing ministrations Florence and her cadre of nurses provided. After the war she was instrumental in influencing the complete reorganization of the army medical service.

As a gesture of thanks and appreciation, the British people awarded her with \$14,000 to be used to establish the Nightingale School of Nursing at St. Thomas' Hospital. The founder of modern nursing objected to the archaic and sentimental notions of nurses as martyrs, penitents, and ministering angels and to the current concept of "born" nurses. She rejected the prevailing system in which ignorant and untrained servant nurses, often of doubtful character, were employed in such service. To her, nursing was a dignified, useful, responsible career for self-supporting women who had the intelligence, training, and physical and moral stamina necessary to face its complex and difficult problems and to fight their own battles. She believed nurses should be prepared to care for the sick at home and in hospitals and to teach health maintenance and prevention of sickness.

<u>Mount Tamalpais</u> - This mountain has been a local symbol of strength and stability. This mountain, more than any other landmark, speaks to Marin, and particularly to this College.

<u>The Laurel Leaves</u> - Wreaths of laurel leaves were given by the ancient Greeks and Romans to their champions and heroes as a crown of excellence.

<u>Par Oneri</u> - Translates from the Latin as "You Are Up to The Task." Indeed, this contemporary, College-based program is known for its excellence, for preparing nurses who perform well and carry out the responsibilities of professional nursing in an exemplary manner. The pin was redesigned by the Class of 1985, retaining the original ideas in an innovative design.

Philosophy of the Registered Nursing Program

The faculty believe that Nursing is based on a professional body of knowledge that integrates core concepts from the liberal arts and the biological, physical, psychological, and social sciences. Nursing practice involves an understanding of the relationships among individuals, families, communities, and their respective environments. Nursing practice focuses on health promotion, quality of life, and the treatment of human responses to health and illness. We believe that nursing science utilizes the nursing process to formulate clinical judgments substantiated with evidence. The nurse embodies professionalism and collaborates in a team environment incorporating information and technology to provide person-centered, safe, effective, and high-quality care. (www.qsen.org). We prepare our graduates for entry level professional nursing practice and for entry into advanced nursing education programs.

We view nursing education as an individualized and collaborative endeavor that assists the student in acquiring the knowledge, skills, and attitudes necessary for entry level practice. Teaching-learning strategies incorporate

principles of adult learning, diverse learning styles, goals-setting, and access to support systems. We acknowledge the importance of the learner's prior knowledge, experience, cultural diversity, and ethnic background. The nurse educator serves as an advisor, mentor, and resource who facilitates learning by identifying learning outcomes, structuring content, creating learning experiences, and evaluating student achievement.

Curricular Framework

Our curriculum is based on the <u>NCLEX-RN Test Plan</u> and the <u>Quality and Safety for Nursing Education (QSEN)</u> <u>Competencies</u>. The curriculum is concept based.

NCSBN and NCLEX-RN

The National Council of State Boards of Nursing (NCSBN) is the national regulatory organization responsible for protecting the public safety in the domain of registered nursing licensure. One of their key functions is to establish the guidelines for granting entry into licensed registered nursing practice through examination. This is known as the National Council Licensure Examination for Registered Nurses (NCLEX-RN). In 2022, the NCLEX-RN Test Plan was updated to reflect more of an emphasis on clinical judgement in nursing practice. Referred to as the Next Generation NCLEX or NGN, this latest version of the NCLEX is designed to assess clinical judgment in nursing candidates. The NCSBN discovered that clinical knowledge is essential but not enough to support clinical judgment, defined as "the observable outcome of decision-making and critical thinking." The National Council of State Boards of Nursing (NCSBN) developed a model of clinical judgment which derives from and expands on the nursing process. Officially entitled the <u>NCSBN Clinical Judgment</u> <u>Measurement Model (NCJMM)</u>, this evidence-based model identifies six cognitive skills needed to make appropriate clinical judgments.

The content of the Next Generation NCLEX-RN Test Plan* is organized into (4) four major Client Needs categories for which the RN is expected to demonstrate competency. Two of the four categories are divided into subcategories:

- Safe and Effective Care Environment
 - o Management of Care
 - Safety and Infection Control
- Health Promotion and Maintenance
- Psychosocial Integrity
- Physiological Integrity
 - Basic Care and Comfort
 - Pharmacological and Parenteral Therapies
 - Reduction of Risk Potential
 - Physiological Adaptation

In addition, the following concepts are applied throughout the major Client Needs categories and subcategories of the test plan:

- Caring
- Clinical judgment
- Communication and documentation
- Culture and spirituality
- Nursing process
- Teaching/learning

*Link to the complete blueprint for the <u>Next Generation NCLEX</u>

QSEN Competencies

The mission of QSEN is "to address the challenge of assuring that nurses have the knowledge, skills, and attitudes (KSA) necessary to continuously improve the quality and safety of the healthcare systems in which they work." The QSEN competencies "define the quality and safety competencies to be developed in nursing pre-licensure programs." The <u>QSEN competencies</u> are divided into categories that capture the qualities RNs are expected to demonstrate in practice.

Conceptual Framework: QSEN Core Concepts and Additional Integrated Processes Defined

The conceptual framework for our curriculum is grounded in the Quality and Safety Education for Nursing (QSEN) model. Our QSEN-based model has 6 major concepts threaded through all levels of the curriculum, along with 12 additional key integrated processes.

QSEN Concepts

Person Centered Care: Recognizing the patient or designee as the source of control and full partner in providing compassionate, coordinated, and equitable care based on respect for patient's preferences, and needs.

Teamwork and Collaboration: The capacity to function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.

Evidence-Based Practice: Integration of best current scientific evidence with clinical expertise with patient/family preferences and values for delivery of optimal health care.

Quality Improvement: Using data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.

Safety: Minimizing risk of harm to patients and providers through both system effectiveness and individual performance.

Information Competency: The ability to use information and technology to communicate, manage, mitigate errors, and support decision making.

Additional Key Integrated Processes

Professionalism: Implementing one's role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context. (NLN.org/competencies)

Nursing Process: A systematic, scientific, critical and clinical reasoning approach to patient care that includes assessment, analysis, planning, implementation, and evaluation. (NCLEX-RN Test Plan 2023)

Clinical Judgment: The observed outcome of critical thinking and decision-making. It is an iterative process with multiple steps that uses nursing knowledge to observe and assess presenting situations, identify a prioritized client concern, and generate the best possible evidence-based solutions to deliver safe client care. (NCLEX-RN <u>Test Plan 2023</u>). The development of clinical judgement uses the evidence based NCSBN Clinical Judgment Measurement Model (NCJMM) and core concepts from the liberal arts and biological, physical, psychological, and social sciences in the provision of safe, quality care. (NLN.org/competencies)

Health Promotion and Maintenance: Providing and directing nursing care that incorporates knowledge of expected growth and development principles, prevention and/or early detection of health problems and strategies

to achieve optimal health. (NCLEX-RN Test Plan 2023)

Caring: The therapeutic human interaction between the nurse and patient(s) in an atmosphere of mutual respect and trust. In this collaborative environment, the nurse provides encouragement, hope, support, and compassion to help achieve desired outcomes. (NCLEX-RN Test Plan 2023)

Patient Teaching: A set of instructive actions by the nurse that facilitate patient acquisition of knowledge, skills and abilities to promote a change in behavior. (<u>NCLEX-RN Test Plan 2023</u>)

Pharmacological and Parenteral Therapies: Providing care related to the safe and effective administration of medications and parenteral therapies. (NCLEX-RN Test Plan 2023).

Cultural Competency: A lifelong process of applying evidence-based nursing in agreement with the cultural values, beliefs, worldview, and practices of patients to produce improved patient outcomes. (<u>Open RN (2021)</u>, *Nursing Fundamentals*, XanEdu Publishing)

Cultural Humility: A process of being aware of how people's culture can impact their health behaviors and in turn using this awareness to cultivate sensitive approaches in treating patients. Cultural humility surpasses the knowledge-based notion of cultural competence and places emphasis on action to establish rapport that is conducive to excellent patient care and outcomes (Nolan, T., et al. (2021). Cultural Humility, *Clinical Journal of Oncology Nursing.*)

Nutrition: The role of nurses with regards to nutrition is through the assessment and promotion of healthy nutrition to: prevent disease, assist patients in their recovery from illness and/or surgery, and teach patients how to optimally manage chronic illness with healthy food choices. (<u>Open RN (2021)</u>, *Nursing Fundamentals*, XanEdu Publishing).

Leadership: Navigating the constant evolution of health care by "balancing costs, monitoring productivity, and maintaining patient and staff satisfaction. Nursing leaders serve as role models and influence health care organizations at all levels. A strong nurse leader motivates their colleagues, setting the tone for a safe, civil workplace with a culture of high morale and job retention". (<u>American Nurses Association (2021), Leadership in Nursing: Qualities & Why It Matters, *Nursing World*)</u>

Section IV

REGISTERED NURSING PROGRAM STUDENT LEARNING OUTCOMES, BENCHMARKS, AND PROGRAM IMPLEMENTATION DETAILS

Registered Nursing Program Student Learning Outcomes

The College of Marin Nursing Program Student Learning Outcomes are the competencies (i.e., knowledge, skills, and attitudes) students are expected to demonstrate by the end of the College of Marin Registered Nursing Program.

By the end of the program the student will be able to:

1. Integrate patient preferences, values, and cultural differences when providing care, acknowledging the worth and dignity of patients and families. (Person-Centered Care)

2. Demonstrate sound clinical judgment substantiated by evidence, reflecting the science of nursing. (Clinical Judgment/Evidence-Based Practice)

3. Function effectively within nursing and intra-professional teams fostering open communication, mutual respect, and shared decision-making, to achieve safe, high-quality care for diverse client populations. (Teamwork/Collaboration).

4. Use information and technology to communicate, document care, minimize errors, and support decisionmaking. (Information Competency).

5. Minimize risk potential by demonstrating advocacy, providing safe patient care, and eliminating health

care disparities across the healthcare settings and the community. (Quality Improvement/Safety).

6. Exhibit the knowledge, skills, and attitudes of an entry-level RN. (Professionalism).

The College of Marin Course Student Learning Outcomes for individual nursing courses are derived from the above Program Student Learning Outcomes. The Course Student Learning Outcomes describe the knowledge, skills, and attitudes students are expected to demonstrate at the end of each course of study. Just as the material covered in an entire course is divided into units of study presented in individual classes and assignments, course student learning outcomes are divided into unit or class objectives, which are the learning building blocks designed to move the student toward achievement of the learning outcome and competency. Refer to each syllabus for specific course student learning outcomes.

Program Outcome Benchmarks

The Registered Nursing Program at the College of Marin has program outcomes to help us evaluate our success in educating students prepared for entry-level practice. The RN program of COM will achieve:

85% or greater graduation rate of graduating class.

A program attrition rate at/or below the national mean for an associate degree program.

Graduate performance on NCLEX-RN at or above national mean for an associate degree program.

85% of the graduating class seeking employment are employed as a Registered Nurse within 8 months of graduation, comparable to employment rates for the new graduate in the Bay area.

85% of the graduating class enrolled in baccalaureate or master's program at graduation and/or at 9 months or above.

85% of all graduates rate satisfaction with all criteria on theory seminar, clinical and clinical application course evaluations as "agree or strongly agree".

85% of all graduates who complete and return the Graduate Survey within 8 months of graduation express overall satisfaction with the program.

Nursing Program Course Progression (updated: 7/2023, reviewed 6/24)

The following table presents group-specific nursing courses (required and optional) per quarter for each year of the program. Course names of the course numbers listed are presented in the key below the chart. Please see the <u>College of Marin Course Catalogue</u> for more information.

	Year 1				Year 2			
	FALL	FALL	SPRING	SPRING	FALL	FALL	SPRING	SPRING
	1 st Year	1 st Year	1 st Year	1 st Year	2 nd Year	2 nd Year	2 nd Year	2 nd Year
	1 st Sem	1 st Sem	2 nd Sem	2 nd Sem	1 st Sem	1 st Sem	2 nd Sem	2 nd Sem
	1 st 8 weeks	2 nd 8 weeks						
	180	185	280	284	283B	283A	285	286
	180L	185L	280L	284L	283BL	283AL	285L	286L
**A Group	181	181	182	182	103C*	288B	205B	205B
	188	103A	288A	103B	281	281		
	103A		103B		205A	205A		
	95*							
	180	185	283A	280	284	283B	285	286
	180L	185L	283AL	280L	284L	283BL	285L	286L
**B	181	181	182	182	103C*	288B	205B	205B
Group	188	103A	103B	288A	281	281		
	103A			103B	205A	205A		
	95*							
	180	185	283B	283A	280	284	285	286
	180L	185L	283BL	283L	280L	284L	285L	286L
**C	181	181	182	182	103C*	288B	205B	205B
Group	188	103A	288A	103B	281	281		
	103A		103B		205A	205A		
	95*							
	180	185	284	283B	283A	280	285	286
**D Group	180L	185L	284L	283BL	283AL	280L	285L	286L
	181	181	182	182	103C*	288B	205B	205B

188	103A	103B	288A	281	281	
103A			103B	205A	205A	
95*						

Key:

* = Course takes place during Flex Week

** = Break out groupings (A-D) begin in the 2^{nd} semester of the 1^{st} year and end in the second semester of the 2nd year for theory course rotations

Italicized = Optional Courses

- *NE 95 Success in RN Program (1st Years ONLY)
- NE 180 Fundamentals of Nursing
- NE 180L Fundamentals of Nursing Clinical
- NE 185 Medical Surgical Nursing I
- NE 185L Medical Surgical Nursing I Clinical
- NE 280 Medical Surgical Nursing II
- NE 280L Medical Surgical Nursing II Clinical
- NE 283A Maternal Child A (OB)
- NE 283AL Maternal Child A (OB) Clinical
- NE 283B Maternal Child B (Peds)
- NE 283BL Maternal Child B (Peds) Clinical
- NE 284 Mental Health Nursing and Care of the Older Adult
- NE 284L Mental Health Nursing and Care of the Older Adult Clinical
- NE 285 Medical Surgical III
- NE 285L Medical Surgical III Clinical Laboratory
- NE 286 Professional Role Development
- NE 286L Professional Role Development
- NE 181 Clinical Application Laboratory I (full semester)
- NE 182 Clinical Application Laboratory II (full semester)
- NE 281 Clinical Application Laboratory III (full semester)

NE 103A Open Skills Laboratory A (Optional but recommended) NE 103B Open Skills Laboratory B (Optional but recommended) *NE 103C Open Skills Laboratory C (Optional but recommended, 2nd Years ONLY) NE 205A Open Skills Laboratory A (Optional but recommended) NE 205B Open Skills Laboratory B (Optional but recommended)

NE 188 Pharmacology I

NE 288A Pharmacology II

NE 288B Pharmacology III

Note: Simulation Sessions are incorporated into every clinical course in the program. See clinical course schedule for details.

Learning Experiences and Methods of Instruction in Nursing Courses

Each nursing course is structured with a course description and objectives, which reflect the philosophy, curricular framework, and student learning outcomes of the College of Marin Nursing Program.

Specific learning experiences are described in each course syllabus. Learning experiences are selected to enable students to meet the theoretical or clinical objectives for the course. These learning activities may include readings, use of audio-visual media, computer-assisted instruction (CAI), practice sessions for skill development, client care assignments, nursing care plans, journal writing, and community observational experiences. Instructional methods are chosen to facilitate learning of the content and synthesizing knowledge. These methods may include lecture presentations, seminars, group work, case studies and clinical simulations, oral presentations, class projects, and pre- and post-clinical conferences.

Simulation Laboratory

The use of clinical and human patient simulations is a teaching methodology that the College of Marin offers its nursing students. Simulation will be incorporated throughout the Nursing Program. Simulation laboratory is an interactive learning experience. Clinical Faculty assign students to attend simulation sessions during their clinical courses. During these experiences, students will be expected to prepare for and achieve the learning objectives outlined for the session. When a simulation day is assigned as part of a nursing clinical course, faculty may evaluate the student's performance and use it as part of the assessment of clinical performance for the course.

Students are required to maintain confidentiality about the details of scenarios and the performance of participants. Clinical simulations may be video recorded, and participants will be asked to sign a Consent to Video Agreement. Students are expected to report to the Lab on time. *Non-attendance is considered a clinical absence and make-up work will be required*. See the Clinical Simulation Laboratory Syllabus and Addendums for more specific information about this learning experience.

Electronic Medical Record (EMR) or Electronic Health Record (EHR)

The College of Marin Nursing Program uses a simulated Electronic Health Record (EHR) as a teaching tool for nursing students. The simulated EHR is a web-based interactive learning tool that is comprehensive, realistic, and easy to use. An introduction and orientation to the EHR will occur during the program's first weeks.

College of Marin Nursing Program Faculty may assign EHR learning experiences during theory, simulation, clinical, and skills lab courses to enhance their knowledge and use of Informatics Technology. Students will be expected to prepare and to achieve the learning objectives that are outlined in the course syllabus.

Auditing Nursing Courses

Auditing of nursing courses will be determined and approved by the Director and Faculty (College of Marin District Academic Affairs Procedure AP 4070). See https://www1.marin.edu/course-audit for more information about auditing classes at COM.

The Director of Nursing's Perspective Regarding Academic Integrity

Year after year, nurses are rated as the most trusted professionals in the United States (**Gallup Poll 2020**). There is a good reason for this. Nurses must be trustworthy to be effective at work. We advocate for those who cannot advocate for themselves and support people in their most vulnerable times.

The practice of honesty and integrity is crucial in becoming a nurse. Quizzes, exams, and other activities are designed to evaluate your knowledge and skills. This is done to make sure that you have all the knowledge and skills you need to become the best nurse you can be. If you are anxious about an exam, the best thing to do is to discuss this with your instructor or another trusted person and produce a plan to study effectively.

While most nursing students come to the profession with a strong ethical orientation, there may be individuals who do not understand the principles of academic integrity or who think that lack of integrity in school is somehow justified.

To be clear, the following activities are considered "cheating" (i.e., cheating, plagiarism (including plagiarism in a student publication), or engaging in other academic dishonesty), and may result in disciplinary action:

- Copying, in part or whole, from someone else's quiz or examination
- Submitting work presented previously in another course if contrary to the rules of either course
- Altering or interfering with grading

• Using or consulting any sources or materials, including electronic devices, not authorized by the professor during an examination

• Committing other acts which defraud or misrepresent one's own academic work

• Incorporating ideas, words, sentences, paragraphs, or parts of another person's writing, without giving appropriate credit, and representing the product as one's own work

• Representing another's artistic/scholarly works (such as musical compositions, computer programs, photographs, paintings, drawings, or sculptures) as one's own

- Submitting a paper purchased from a research or term paper service or written by another student
- Purposely allowing another student to copy from your paper during a test
- Giving your homework, term paper, or other academic work to another student plagiarize
- Having another person submit any work in your name
- Lying to an instructor or college official to improve your grade

• Altering graded work after it has been returned then submitting the work for re-grading without the instructor's permission

- Removing tests or examinations from the classroom without the approval of the instructor
- Stealing tests or examinations
- Forging signatures on drop/add slips or altering other college documents

If a faculty member identifies cheating behavior, the conduct shall constitute good cause for discipline. Consequences of academic dishonesty include a written warning, a failing grade on the test paper or examination, a lowered course grade, or an F for the course. In the RN Program, failing a course will result in dismissal from the Registered Nursing Program. Please see College policies for details.

If a student feels that a test question or other assignment is unfair, they are encouraged to discuss this with the instructor. If the student is not satisfied with the result of the conversation, they may raise the issue with the Chair of the department or with the Director. It is through such dialog that both student and faculty may learn and improve their practice. The faculty and I invite students to this dialog without fear of retribution. We expect students to practice advocacy, integrity, honesty, and respect in their studies and in the clinical environment.

Respectfully

Alicia Bright

Dr. Alicia L Bright, EdD, CNS, RN AHN-BC

Director of Nursing at the College of Marin

Section V

METHODS FOR MEASURING AND SUPPORTING STUDENT PROGRESS IN NURSING COURSES

Student Evaluation in Theory Courses

Performance Objectives for theoretical courses serve as guidelines for evaluating student achievement. In the theoretical courses, written examinations, papers, class projects, oral presentations, and/or other evaluated assignments are used to measure whether or not the student meets the theoretical objectives. Examinations are usually constructed to support NCLEX preparation and success. Often these questions require critical thinking in applying the course's content to clinical situations, as opposed to the memorization and recall of facts. The NE 95 syllabus offers information and tips on test taking. The overall grade a student receives in a course is determined by the instructor, according to specifications listed in each course syllabus, and is guided by the COM nursing department grading policy (see Grading Policy).

All written assignments are to be turned in per instructor's directions to receive full course credit. It is expected that all written assignments will 1) be turned in on time, 2) be neat, legible, and written in ink or typed per instructions, and 3) contain proper grammar, punctuation, and spelling. It is advisable for students to keep a copy of written assignments for their records.

The student must contact the instructor, in advance, if they will be absent or late for a scheduled exam. Students who miss an exam due to absence can make up that test within one week. Any test that is not made up within 7 school days from the day of return to class constitutes a zero. If make-up testing is sought through the <u>Testing</u> <u>Center</u>, the student will be notified by the faculty that the test has been received by the <u>Testing Center</u> and should then schedule a make-up test within the allotted time frame. Please follow the complete instructions located on the Student Services website at: <u>Student Services: Make-Up Testing</u>. The Test Proctoring Center can be found on the 1st floor of the Student Services Center (SS 115-117).

Guidelines for Student Evaluation in Clinical Courses

- 1. Students receive the clinical objectives and the clinical evaluation tool as part of each course syllabus. Students are to review this information to become familiar with the objectives to be achieved. These objectives must be met to pass the clinical course, and serve as the basis for both ongoing instructor evaluation and student self-evaluation.
- 2. The criteria for evaluating student clinical performance fall into five major areas: Student Responsibility and Accountability, Communication, Client Teaching, Nursing Process/ Clinical Judgment, and Nursing Skills/Procedures. For each criterion, the instructor evaluates the student's level of accomplishment of the clinical objectives, considering the degree of consistency in performance, the amount of guidance necessary, and whether this was a first-time experience or procedure for the student. The student's clinical performance (providing direct and indirect patient care), as well as the student's written work (e.g., nursing care plans, client teaching plans, journal entries, and papers related to observational experiences) are used to measure whether the student met the clinical objectives.
- 3. Instructors provide formative evaluation related to clinical performance and the achievement of course objectives when they interact with students in clinical, during office hours, with comments on written assignments, or through email communication. Formal clinical evaluation is done in conferences, and on written notification and evaluation Forms. For each criterion assessed, the instructor evaluates the pattern of performance, the amount of guidance necessary and whether the student can perform therapeutic nursing interventions with the integration of the competencies of patient safety, assessment, communication, patient teaching, documentation, critical thinking, and sound theoretical knowledge base. Students are expected to receive ongoing feedback and make the necessary changes to improve, meet the objectives, and strive for excellence. If the student does not understand the feedback or is unclear on what steps to take to improve, it is the student's responsibility to contact the instructor for assistance and clarification. The instructor may suggest clinical, simulation, academic or skills lab remediation. (See The Learning Support Process).
- 4. Safe clinical performance is always mandatory. If, at any time, a student's clinical performance is

potentially harmful to a patient, as determined by the nursing faculty, the student will be removed from the clinical setting. (See Regulation on Dismissal or Withdrawal / Readmission after Withdrawal in this handbook for more information).

- 5. All nursing program clinical objectives completed in previous courses must be performed satisfactorily in each successive course (e.g., knowledge and competencies passed in NE180/180L will be expected to be retrieved and performed in later courses). The student is responsible for assessing and remediating any skill deficiency in the nursing skills lab.
- 6. Completion of the course clinical objectives is determined as follows: A clinical grade of Pass is required for each clinical course. To receive a passing grade, all final evaluation ratings must be Satisfactory or Needs Improvement. Any rating of Unsatisfactory will result in a No Pass for the course. (See Grading Policy section on Grading of Clinical Courses for explanation of ratings; satisfactory, needs improvement, unsatisfactory and not rated.)
- 7. Clinical performance may be evaluated by:
 - a. Preparation for clinical assignments
 - b. Attendance
 - c. Professional Behavior
 - d. Observation of clinical experience
 - e. Performance of Therapeutic Nursing Interventions
 - f. Contributions in pre and post conference
 - g. Written assignments
 - h. Completion of external agency assignments
 - i. Feedback from clinical staff
 - j. Feedback from tutors
 - k. Clinical simulation experiences
 - 1. Previous High-Risk Performance
- 8. Instructors are available to meet with students on an on-going basis to discuss clinical performance. If a student's performance falls below the expected level on one or more criteria, the instructor will first discuss this with the student (verbal notification that a problem exists). If the problem continues, the instructor will then meet with the student and formally document the problem and develop a remediation plan using the Student Learning Support Plan Process. If the student fails to complete the educational agreement or fails to correct the problem, the student will fail the course. Those who fail a clinical course will not be allowed to progress or to seek readmission to the program.
- 9. The student has an option to withdraw from a nursing clinical course by the approved date.
- 10. A student who has performed satisfactorily at one point in the clinical rotation and then demonstrates unsatisfactory performance or unsafe practice during the last shifts of the rotation will not pass the course. Note: Safe clinical performance is always mandatory. If a student's clinical performance is potentially harmful to a patient, as determined by the nursing faculty, the student will be removed from the clinical setting.
- 11. At the end of the course, the Clinical Evaluation Tool will be completed by the instructor and a final, summative evaluation conference with the student will be held to review the evaluation tool and student performance in meeting the clinical objectives. After the final clinical evaluation is discussed with the student, the student and instructor signs it and it is placed in the student's official file. It is recommended that the student retain a copy of the clinical evaluation for each course for their clinical portfolio. If the student disagrees with the instructor's evaluation of performance on any given clinical objective, the student may comment on the evaluation form regarding the area(s) of disagreement.
- 12. All completed evaluation forms are turned into the Nursing Office and placed in the student's file. A student who has a "No Pass" (NP) evaluation as a final clinical grade will not be eligible to progress to the next semester. Students who receive a "No Pass" are not eligible for readmission to the program.

Student Evaluation in Skills Laboratories

Skills laboratory courses allow students opportunities to view demonstrations of and to practice psychomotor skills relevant to nursing practice. Course objectives are written to guide the student's learning of psychomotor skills. In the laboratory courses, skill performance checkoffs are used to measure whether the student meets the skills laboratory course objectives.

Student Evaluation in the Simulation Laboratory

Students' timely attendance, preparation and active participation are expected for each scheduled simulation session. Simulation sessions are assigned as indirect clinical hours. Student attendance, demonstration of preparation and participation will be reported to the assigning clinical instructor and will be reflected in the students' course evaluation towards meeting course objectives.

*For a more complete description of grading in a nursing theory, clinical, and/or skills laboratory class, see the Grading Policy section in this handbook and the current course syllabi.

*Grading Policy

To ensure safe and competent nursing practice, students in the Registered Nursing Program will be assessed and graded on theoretical knowledge, nursing skills, and clinical performance. Students who receive a grade lower than "C" in **any** nursing course may **not** progress to the next course in the program. **Those who fail a clinical course will not be allowed readmission to the program.***

*Students are also advised to consult this Student Handbook on Attendance Policies and procedures as well as their course syllabi for specific grading and progression requirements for each of the nursing courses.

Grading Standards:

1. Theory Courses

Course grades will be determined, calculated, and recorded by the instructor. An overall grade of 75% or higher is required to pass each theory course. In addition, the average of all exams administered in the course must equal 75% or higher for the student to pass the course, regardless of the overall course grade. The weighting of all graded coursework (assignments and examinations) is determined by the instructor.

2. Clinical Courses

A clinical grade of Pass is required in each clinical nursing course. (*see clinical evaluation rubrics in each clinical course for passing criteria)

3. Nursing Skills Laboratory

All skills must be competently performed at the initial skills check-off of each course. During the performance evaluation, competence must be achieved by:

- a) Successfully demonstrating the predetermined set of criteria of one of the skills/procedures, chosen at random from those listed in the course outline, and;
- b) if required, completing a written test with a score of 75% or higher.

Grading Procedures:

In the COM Registered Nursing Program there are three types of courses, and each type has a different grading procedure:

1. Grading of Theory Courses

a) Grades are determined by quizzes, examinations, and other assignments as determined by the course instructor, guided by program policy.

b) The final course grade must be 75% or higher (a theory letter grade of "C" or higher) <u>and</u> the examination average in the course must be 75% or higher.

c) Fractional final grade percentages will be rounded to a whole number according to normal statistical rounding rules; so that percentages will be rounded up if they are at or above 0.5%, and down if they are below 0.5%.

Reference:

https://nces.ed.gov/statprog/2002/std5_3.asp#:~:text=Standard%20errors%20must%20be%20rounded,or%20a%20figure%20as%200.

Letter	Percentage
A+	97-100
А	94-96.99
A-	90-93.99
B+	87-89.99
В	84-86.99
B-	80-83.99
C+	77-79.99
С	75-76.99
No C-	Per Title 5, CA Ed Code
D+	67-74.99
D	64-66.99
D-	61-63.99)
F	0-60.99

https://policies.marin.edu/sites/default/files/AP4230-GradingandAcademicRecordSymbols.pdf

* Students earning less than 75% in the overall course and/OR less than 75% in the examination average will receive a final course grade of no higher than D+

2. Grading of Clinical Courses

a) Grades are determined by clinical performance evaluation, simulation evaluations and clinical assignments.

b) Clinical objectives will be rated by the instructor using the following rating system:

S = Satisfactory: Meets clinical performance objectives at a level commensurate with theory and experience in the program. Student functions adequately with moderate direction and guidance. Consistently meets all clinical performance objectives. Seeks assistance when needed and benefits from constructive criticism.

N = Needs Improvement: Is displaying difficulty in meeting clinical performance objectives at a level commensurate with theory and experience in the program. Needs guidance and detailed instruction. Is unable to consistently apply theory to practice.

U = Unsatisfactory: Exhibits behavior which endangers self, the patient or others. Student is deficient in meeting clinical objectives at a level commensurate with theory and experience in the program. Is unable to demonstrate improvement with constant guidance and detailed instruction. Is unable to consistently apply theory to clinical practice.

N/R = Not Rated

c) To receive a grade of Pass for clinical courses, all ratings must be Satisfactory or Needs Improvement. Students receiving a Needs Improvement rating will be referred to the student success coordinator for remediation

planning.

- d) Any rating of Unsatisfactory will result in a grade of No Pass for the course.
- e) If the clinical course grade is Pass, the student will receive Pass (P) for the clinical grade.
- f) If the clinical grade is Fail, the student will receive No Pass (NP) for the clinical grade.
- g) Students who fail a clinical course will be dismissed and *not* be eligible for readmission.
 - 3. Grading of Nursing Skills Laboratory Courses

Grading in the Nursing Skills Laboratory course is Pass/No Pass. To receive a grade of Pass for the course, the following criteria must be met:

a) Skills Lab participation requirements must be met:

1. Students must attend and participate in 75% of the skills laboratory course hours to learn the purpose and application of the skills being taught, observe the skill demonstrations, and practice the skills.

2. Make-up work for any missed class must be completed through a Tutoring Session Record. A student missing a skills lab class must arrange with a classmate for a demonstration and practice session on the skill missed and complete a Tutoring Session Record. The completed Tutoring Session Record is to be submitted to the skills lab instructor before the Final skills demonstration/written examination. (see attendance policy)

b) All course skills must be successfully demonstrated and documented on the skills checklist.

c) The student must pass a skills exam at the end of each course. The skills exam consists of:

1) Demonstrating competent performance of a randomly selected course skill, and, if required, may also consist of

- 2) Passing a written examination with a score of 75% or higher.
- d) Open Skills Lab requires 50% attendance to earn credit for the course

*Skill Passing Criteria

- a) To "pass" a skill, the student must demonstrate competency. Student competency in a skill/procedure is demonstrated by meeting the following criteria:
 - 1) Stating principles and rationales for each skill.
 - 2) Demonstrating therapeutic communication.
 - 3) Providing relevant patient teaching.
 - 4) Maintaining patient safety.
 - 5) Performing the critical steps of the procedure correctly, achieving the desired outcome within allotted amount of time.
 - 6) Providing accurate and complete documentation.
- b) Three opportunities are given to pass/demonstrate competency on any required skill or exam during the first semester. For the first semester only, if the third attempt is unsuccessful, or if the student fails to

contact the instructor within one week for retesting, the student receives a No Pass for the course.

- c) Two opportunities are given to pass/demonstrate competency on any required skill or exam during the second, third and fourth semesters. If the second attempt is unsuccessful, or if the student fails to contact the instructor within one week for retesting, the student receives a No Pass for the course.
- d) The student who fails during an attempt to demonstrate competency on any required skill is given an opportunity to practice and obtain tutoring prior to being retested. Retesting can be done during the same testing period, or within one week of the testing period, at the instructor's discretion.

Skills Lab Grading Rubric:

Criteria	Pass	Not Pass
1. Able to state principles and rationale for each skill.	Student can verbalize principles/reasons for each step-in performance skill.	Student is unable to verbalize principle/rationale for steps in performance of skill without prompting by the teacher, or verbalized principle/rationale is inaccurate.
2. Demonstrates therapeutic communication	Student assesses pain and discomfort and prepares patient psychologically for procedure; student acknowledges patient's experience (thoughts, feeling) before, during and after procedure.	skill itself and does not respond to
3. Provides patient teaching	Student provides appropriate "anticipatory guidance," accurately explaining procedure to patient prior to beginning procedure and providing accurate post- procedure teaching.	Student fails to provide pre- procedure or post-procedure teaching, or student provides inaccurate information/explanation.
4. Maintains safety	Student follows all safety precautions for individual skill, including properly identifying patient, implementing appropriate infection control measures, following correct body mechanics, protecting patient from falls or injury, and preventing needle sticks.	Student fails to follow one or more safety precautions.

5. Accomplishes therapeutic outcome within the allotted time.	completes the skill within the	more of the critical steps of
6. Documents skill	documents the skill using PIE format to describe Patient assessment findings and/or Problem,	Student fails to document the skill, fails to document skill correctly or completely (including date, time, signature), and/or fails to use PIE format.

- 4. Midterm grades
 - a) Midterm grades are determined by scores from examinations or written assignments completed midway through the course. Instructors will assess student progress midway by averaging these grades. Instructors will notify and confer with students at risk of failing.
- 5. Missed Examinations, Presentations, Assignments
 - a) Refer to individual course guidelines. The student must contact the instructor immediately for missed or planned miss of assignments/tests, and arrangements to make-up the missed assignment/test, if possible.

Effective Date: 7/1/2024

This policy is subject to change, and any modifications will be communicated to students in a timely manner

*Policy on HESI Testing Requirements

- 1. Purpose: To designate procedure for faculty members and students regarding consistent assessment and preparation and increase NCLEX readiness required by the Nursing Program; To promote Nursing program excellence.
- 2. Applicability: To ensure currency and maintain a high student NCLEX pass rate. Health Educations Systems' Incorporated (HESI) is a U.S. based company acquired by Elsevier that provides study material and various exams. HESI evaluation data are used to drive the nursing curriculum with the goal to measure student achievement of course outcomes. The HESI Exit exam is utilized to help predict the student's likelihood of success in passing the NCLEX exam. The core subject areas of the HESI Exit Exam are the following: Nursing Process, Client Needs (Infection Control, Basic Care and Comfort, Safety, Management of care, Health Promotion and Maintenance, Psychosocial Integrity, Pharm, Risk Reduction, Physio Adaptation); Specialty areas (Fundamentals, Med-surg, Peds/Maternal Health, Psych Mental Health, Geriatrics, Community Health, Professional Issues).
- 3. Philosophy: To keep assessment of learning outcomes consistent and relevant throughout the nursing program
- 4. Policy:
 - a) The HESI score benchmark is 850 with acceptable student assessment scores \geq 850.
 - b) The following predictor exams test the nursing curriculum and will be administered throughout the nursing program:
 - 1) Fundamentals
 - 2) Pharmacology
 - 3) Med-surg
 - 4) Peds
 - 5) Maternal Health
 - 6) Psych Mental Health
 - 7) Management
 - 8) HESI Exit Exam (Has 150 Questions) Used to predict NCLEX success. Students are required to study prior to taking the predictor exam; In case of failure to reach the benchmark, the student is required to communicate with the COM Nursing Success Coordinator and to retest prior to graduation at a time that will be arranged by the success coordinator.
 - c) Student review of the HESI remediation packets is an expectation.
- 5. Procedure:
 - a) Exams will be administered as per Department of Nursing schedule that will be posted for the students to see in "Nursing Program Resources" on Canvas.
 - b) For students who are consistently below the established benchmark of 850 on two or more HESI exams, the student must follow up with the Student Success Coordinator.
 - c) HESI Policy will be reviewed:
 - 1) Annually in collaboration with Nursing faculty.
 - 2) As appropriate throughout the academic year.

Policy approved at Faculty Meeting on Sep 1, 2022

Reviewed by ADN on June, 2024

*Attendance Policy

Background:

The College of Marin Registered Nursing Program adheres to the California Board of Registered Nursing requirement that the student receive 18 semester units of theory and 18 semester units of clinical. Three hours of clinical are equal to one semester unit; one-hour lecture is equal to one semester unit. Student attendance is important for the student to achieve the Program's academic and clinical goals.

Nursing students are preparing for future work as nurses where the patients and employer depend on their reliable attendance and ability to perform all functions safely and accurately. Therefore, it is expected that Registered Nursing students will be on time and attend all scheduled classes, including seminars, lectures, nursing laboratory classes, clinical, and community experiences to meet the learning objectives of the program, which are designed to facilitate learning and practicing safe patient care.

The California Board of Registered Nursing has approved a curriculum for College of Marin which requires that students complete a prescribed number of hours in each clinical course. In addition, 75% of the prescribed clinical hours must be in direct patient care, with 25% allowed in indirect patient care. If the student is unable to complete the required clinical hours, or meet the clinical objectives because of excessive absences, a failing, or a W grade will be given for the course.

Please be advised that clinical placements do not allow for clinical make-up of direct patient care hours that are missed due to a student absence. Therefore, and importantly, students may not have the opportunity to make up for missed absences in clinical courses and meet the BRN requirements due to the constraints faced by the college in scheduling clinical hours. If a student is unable to make up missed clinical hours due to any constraints of scheduling make-up hours by the college, including but not limited to increased cost to the college, the student will not have completed the required curriculum and will be dismissed from the program

Objective:

The purpose of this attendance policy is to establish clear guidelines for students enrolled in the program regarding attendance expectations for both theory and clinical components. This attendance policy aims to promote accountability, responsibility, and active engagement in the educational process.

Attendance Policy

1. Students are expected to attend all scheduled nursing theory, clinical, and laboratory sessions.

2. Tardiness: Students should arrive on time for all sessions. Excessive tardiness may result in disciplinary actions.

3. Absences: In the event of an absence, students are required to notify the instructor via call, text, or email as soon as possible and before the scheduled session, providing a brief explanation for their absence. Absences are to be reserved for illness or other emergencies that prevent attendance (*see: nursing skills laboratory minimum attendance section). "No call, no show" absences are not permitted.

Reporting Absences:

- Students must contact their respective instructors directly via phone call, text message, or email to report anticipated absences or tardiness.
- In case of extended absences or recurrent issues, students should follow up with the course instructor to discuss a plan for making up missed work or addressing any challenges to progression.
- A 'No Call No Show' occurs when a student is absent from a session without notifying the instructor beforehand and fails to provide a valid reason afterward.
- For both theory and clinical components, a 'No Call No Show' may result in disciplinary actions, including but not limited to:
- Verbal or written warnings

- Academic probation
- Removal from the program

Note: The instructors reserve the right to make exceptions based on extenuating circumstances, provided the student communicates in a timely manner.

Nursing Skills Laboratory Minimum Attendance:

Students must attend and participate in at least 75% of the scheduled clinical applications laboratory course sessions and at least 50% of scheduled open skills laboratory course sessions. Failure to attend and participate the minimum number of the skills lab sessions in the semester or failure to make up missed work through an assigned make-up session (see course syllabi for make-up session requirements) within the designated time frame will receive a No Pass grade.

Any missed clinical applications laboratory session must be made-up. Make-up work for any missed class must be arranged through a planned session moderated by the course instructor or their designee. The make-up session will include practice and demonstration of the skill(s) from the missed session and a valid, signed document (ex: tutoring session record) of the make-up session will be submitted to the skills lab instructor before the Final skill exam.

Effective Date: 7/1/2024

This policy is subject to change, and any modifications will be communicated to students in a timely manner

Attendance Procedure

Seminar/Lecture Absence

It is expected that students will attend all seminars and will complete all assigned work. It is the student's responsibility to identify and complete any missed assignments. (Refer to the College of Marin Catalogue)

Clinical, College Laboratory or Simulation Laboratory Absence

A student that misses a clinical, college laboratory, or simulation laboratory day may be unable to make up for the missed absence due to constraints faced by the college in scheduling clinical hours. If a student is unable to make up missed hours due to any constraints of scheduling by the college, including but not limited to increased cost to the college, the student will not have completed the required curriculum and will be dismissed from the program. If the Program Director and the course instructor determine that missed hours can be made up, the clinical instructor determines the appropriate make-up assignment. The instructor will determine if student performance met the course's clinical objectives to assign a Pass Grade. Students who fail a clinical course will not be allowed readmission to the program.

Nursing Skills Laboratory Absence

Students are expected to use the skills laboratory to practice and become competent in psychomotor skills. To earn credit for the nursing skills lab course, the following criteria must be met:

• Students must attend and participate in 75% of the skills laboratory course hours to learn the purpose and application of the skills being taught, observe the skill demonstrations, and practice the skills.

• Make-up work for any missed class must be completed through a Tutoring Session. A student missing a skills lab class must arrange with a classmate for a demonstration and practice session on the missed skill and complete a Tutoring Session Record. The completed Tutoring Session Record is to be submitted to the skills lab instructor before the Final skills demonstration/written examination.

• Students must demonstrate competency in the assigned skills through skill demonstration and/or a written exam.

A student will receive a No Pass for the course if he or she:

• Fails to attend and participate in at least 75% of the skills lab sessions *in the semester* (not the *course*, which may only be 8 weeks), or

• Attends 75% of the skills lab class sessions but fails to make-up for the missed work through completion of a Tutoring Session or fails to submit the completed Tutoring Session Record to the instructor within the prescribed time frame.

Memo

To:

From:

CC:

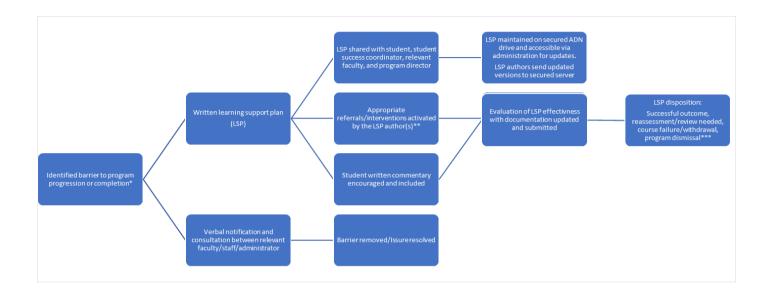
Date:

Subject: Clinical Make-up

Since you were absent from clinical laboratory on the following dates:

it is necessary for you to complete hours of make-up in the following manner:

Student Learning Support Process and The Learning Support Plan Decision Pathway



Key:

*Identified barrier to program progression or success – Any nursing student issue, action or omission that violates safety, academic, or professional expectations; or jeopardizes successful nursing program progression and completion.

**LSP Referrals/Interventions – One or a set of actions designed to remove identified barriers to program succession or success

***Program Dismissal - a student may be dismissed or asked to withdraw from the COM Registered Nursing Program when the barrier(s) to success or the substandard performance is repeated, excessive, or not effectively remediated through the LSP process.

Effective Date: 7/1/2024

This process is subject to change, and any modifications will be communicated to students in a timely manner

Learning Support Plan (LSP)

1. LSP Form

Purpose: The Learning Support Plan helps the student identify a mechanism for improvement including available resources within the NE Department and/or College.

Student Responsibilities

- 1. Read the entire document and ask for clarification as needed (Section I).
- 2. Make comments in the appropriate section.
- 3. Sign form indicating that you have read the LSP.
- 4. Complete Student Self Evaluation (Section V) and review with Faculty.
- 5. Follow up with Faculty/Staff reflective of LSP.

Date of Report:
Course (if applicable):
Student Name:
Student Email Address:
Faculty/Staff name:
Faculty/Staff email address:
Referral Area(s): (Circle area(s))
 Lecture Clinical Skills Lab Simulation Staff/Administration
Date of Student Meeting:
Referral Date to Student Success Coordinator:

Specifics of Identified Barriers - SBAR

Situation: What happened?

Background: Subjective and objective information of event(s)

Assessment: (i.e. identified barrier(s) to student progression*)

Recommendation: (The referrals/interventions activated to address the identified barriers)

Date/time for expected resolution:

Consequence if required actions not completed (if applicable):

Student will follow up with faculty on or before (DATE):

Student Comments:

After the development of the LSP and student comments the faculty/staff member and student will sign below:

Print Name of Faculty/Staff Member	
Signature of Faculty/Staff Member:	
0	s that they are aware of the plan's existence and contents rt student success throughout their time at COM
Print Name of Student:	

Signature of Student:	
Date Reviewed with Student:	

**OPTIONS to include in the *Recommendation* section. This is not an exhaustive list. Faculty/Staff can seek additional guidance from the *COM NE Department Learning Support Plan: Faculty/Staff Support Information* Document.

Prepare for class by reviewing posted notes/lectures, reading text, completing assigned work prior to class, and reviewing notes after class.	Meet with Department Director to address course/clinical behaviors and/or course/clinical progression concerns.
Find study group/partner with similar study styles.	Attend Tutoring Session(s) for Skills remediation: Referral Date:
Engage with course – related HESI for study, quizzing, and review	COM Cares: Referral Date:
Participate in test reviews and/or see faculty review tests.	HESI remediation/Case studies
Meet with Student Success Plan Coordinator to review test-taking strategies/discuss responsibilities for own learning	Review Student Self Evaluation

2. LSP Progress Notes (Follow-up):

Documentation of student and faculty meeting based on recommendations:

Date:	Comments:	Student Initials	Faculty/Staff Initials

3. LSP Outcomes

Barrier Resolved:

Date:

- Barrier leading to LSP has been resolved
- Continued student support and assessment
- Submit resolved LSP to SSC and Director

Barrier Unresolved:

Date:

- Student barrier does not put them at risk of dismissal as student is making progress, but student needs continued support to be successful
- Faculty notifies SSC to continue student support reflective of plan into next quarter/year
- SSC notifies relevant faculty of continued student support need in upcoming quarter/year
- SSC notifies Director of students with LSP continuing beyond quarter
- Submit continuance of active LSP to Director

Barrier Places Student at Risk of Dismissal:

Date:

- Faculty/Staff Notification of Director of Nursing that student is at risk of dismissal
 - Date/Time:
 - The instructor's recommendation that the student withdraw from the course or be dismissed will also be forwarded to the Vice President of Student Services.
 - Date/Time:
- Meeting with Director, Student, Faculty regarding barriers

- Date/Time:
- Disposition Decision Point: Remediation Plan or Dismissal
 - Remediation Plan with Director, Student and Faculty
 Date/Time:
 - Dismissal from Program
 - Date/Time:
- 4. LSP Form Submission, Distribution, and Follow-Up
 - a) Faculty/Staff initiating the form will:
 - 1) Provide the completed LSP form to the student.
 - i. The student should sign the original document. *If a student refuses to sign the LSP, write "student refuses to sign LSP" in the student signature area and move on to step 2c.
 - 2) Communicate LSP creation to the Student Success Coordinator (SSC) upon the LSP creation and presentation to the student.
 - 3) Send the signed LSP Form to the SSC within 3 business days of the report's date.
 - 4) The SSC and/or the Department Administrative Assistant stores the signed LSP Form and the related LSP Progress Notes in the protected ADN Folder.
 - i. Access to the site will be restricted to the following:
 - 1. Administrative Assistant for the NE Department
 - 2. Student Tutors
 - 3. Clinical Instructors
 - 4. Theory Instructors
 - 5. Simulation Coordinator/Educator
 - 6. Director of Nursing
 - b) The SSC will prepare a monthly summary report of students who have received or have a currently active LSP and submit it to the Director.
 - c) At the beginning of each quarter, the Program Director will meet with the SSC to review all active LSPs. The SSC will notify the necessary faculty* of all active LSPs.
 - d) Before the end of the Spring Term, the outgoing SSC will analyze and evaluate aggregate LSP data to coordinate transfer of active needs and provide this summary to the next Success Coordinator.

*skills faculty, clinical faculty, didactic faculty, and simulation faculty who will be supporting the student in the upcoming quarter

5. Student Self-Assessment

Student Self-Assessment of Areas Affecting School Success

Name: Date Completed: Date Reviewed with Faculty:

Circle the number that best represents your current need for school success. (1 means no need and 5 means great need)

Time management12345

Learning style	1 2 3 4 5
Study skills (includes reading)	1 2 3 4 5
Test taking strategies	1 2 3 4 5
Managing anxiety and stress	1 2 3 4 5
Specific course content	1 2 3 4 5
Support system	1 2 3 4 5

Rank the following need areas in order of importance for your success. For example, if you feel that stress and anxiety is affecting your success, mark 1, and so on.

- ____ Time management
- ____ Learning style
- ____ Study skills (includes reading)
- ____ Test taking strategies
- ____ Managing anxiety and stress
- ____ Specific course content
- ____ Support System

Personal Study Enhancement Plan

1. I would rate my effectiveness with time management as:

Very ineffective

Ineffective

Neither ineffective nor effective

Effective

Very Effective

- Comments:
- 2. I would rate the effectiveness of my study skills as:

Very ineffective

Ineffective

Neither ineffective nor effective

Effective

Very Effective

Comments:

3. I would rate the effectiveness of my test taking strategies as:

Very ineffective

Ineffective

Neither ineffective nor effective

Effective

Very Effective

Comments:

4. I would rate the effectiveness of my stress coping strategies as:

Very ineffective

Ineffective

Neither ineffective nor effective

Effective

Very Effective

Comments:

5. I would rate the effectiveness of my study skills as:

Very ineffective

Ineffective

Neither ineffective nor effective

Effective

Very Effective

Comments:

6. I would rate the effectiveness of my strategies to learn course content as:

Very ineffective

Ineffective

Neither ineffective nor effective

Effective

Very Effective

Comments:

7. I would rate the effectiveness of my support system in supporting my success as:

Very ineffective

Ineffective

Neither ineffective nor effective

Effective

Very Effective

Comments:

Procedures for Students in at Risk for Clinical Course Failure

(See also Student Learning Support Process: Decision Tree)

The grading of clinical courses is described in the Grading Policy and the Guidelines for student Evaluation in Clinical Courses. The most important clinical objective is the consistent performance of safe nursing practice.

Safe Nursing Practice: A student and faculty obligation

It is the nursing faculty's responsibility to determine if student nursing practice is safe or unsafe and/or unprofessional. Nursing faculty are obligated to protect the patient and society against harm. Therefore, if necessary, faculty may remove students from the clinical area for the day, issue a No Pass for the course, and/or recommend immediate dismissal of students from the nursing program for unsafe, unprofessional, dishonest and/or disruptive conduct. If the student poses a safety threat to patients and/or staff, immediate dismissal may be warranted.

Components of Unsafe Practice

Unsafe nursing practice is behavior that places the patient, staff, or student in physical or emotional jeopardy and is an unacceptable risk. Some major areas of concern for safe practice are:

- 1. Failure to practice medical asepsis, any action or inaction that places a patient at risk for infection.
- 2. Any action or inaction that threatens a patient's safety and physical health (ex. medication errors, nursing care errors, patient abandonment, failure to report essential data to health care team members, etc.)
- 3. Behavior that creates an environment of anxiety and distress which puts the client or family at risk for emotional or psychological harm.
- 4. Failure to take responsibility for self and actions: Lack of appropriate preparation for clinical; impaired cognitive ability that may be due to prescription medication, substance abuse or lack of sleep and/or mental health problems.
- 5. Demonstrating a need for excessive supervision, emotional support, or coaching so the instructor cannot safely supervise the entire clinical group.
- 6. Performing patient care activities beyond the scope of the student's practice or without adequate supervision (ex. administering an IV push medication unsupervised).
- 7. Deficient performance in other areas of concern: Accountability, Responsibility, Nursing Process (failure to follow standards of competent performance), Communication, Professional Behavior, Organization, Documentation, Legal/Ethical, Caring, Patient Teaching, or any action or inaction that places a patient at risk.

Remedial Support

If the student is not making satisfactory progress in meeting the course objectives, the instructor will complete a Learning Support Plan (see the Learning Support Plan). The most common reasons for writing a notification are:

- The student performs below the expected level.
- There are multiple clinical performance areas in need of improvement.
- Clinical performance is unsatisfactory.
- An unsafe or unusual occurrence has occurred during the clinical experience.
- There are concerns related to attendance, clinical preparation, or professional behavior

Once a Learning Support Plan is written, the student must schedule a conference with the instructor. The student may not return to the clinical setting until this meeting occurs. Each day absent from clinical counts towards the total number of clinical absences. The conference's purpose is to review the form, clarify the course objectives not

being met and discuss the plan for achieving satisfactory clinical performance. At the request of the instructor or student, the following people may be present at this conference: Director of Nursing, Assistant Director, Student Success Coordinator, Counselor and/or Vice President of Student Services.

At Risk for Failure: Once a Learning Support Plan is written for substandard academic, clinical, or behavioral performance, the student is considered at risk of failing the course. The student must improve performance or change behavior to pass the course.

Student File: The student receives a copy of the Learning Support Plan, and the instructor places a copy in the student's file. The Student Success Coordinator and Director of Nursing are notified about the form.

Progress report: Feedback on clinical performance will be given. The instructor or student may request another formal conference to discuss progress in meeting objectives. The instructor will keep clinical notes on the student's progress.

Final Evaluation:

Pass: (See Guidelines for Student Evaluation in Clinical Courses)

OR

High-Risk Course Performance: If at the end of a clinical course or evaluation, an instructor gives a student a grade of Pass; but has significant concern about the student's ability to meet objectives in the subsequent clinical rotation; the student performance will be considered High Risk. The following are examples of occurrences that might make a student performance High Risk:

- Clinical performance has multiple areas that need improvement
- The student has required considerable remediation
- There have been excessive clinical absences, lateness, or lack of preparation

For a student considered High Risk, a Learning Support Plan will be written at the end of the rotation and/or course and a student/teacher conference will be held. The instructor or student may request that the Director be present at this conference. The new clinical instructor will receive a copy of the Learning Support Plan and Course Evaluation Form. The student success coordinator and Director will be notified, and a copy of the Form will go into the student's file. The student must meet the course objectives in the new rotation to pass the course. A continued pattern of high-risk performance demonstrates that the student is at imminent risk of course failure and program disqualification.

OR

No Pass: If the notification does not bring about improvement in clinical performance and the student's clinical performance remains below the expected level or is unsafe, the student will receive a course grade of No Pass. The final grade will be based on the student's performance over the entire clinical component. Improvement for 1 or 2 days does not provide sufficient data to support a clinical pass when the over-all clinical performance was inconsistent in meeting course objectives and/or standards of nursing care. The final evaluation will take place at the end of the clinical course and be documented on the clinical evaluation tool. The student must meet the objectives by the end date of the clinical course. A copy of the evaluation will go into the student's file. Note: the student is not eligible for readmission to the program if a clinical course is not passed.

Course Failure Process

Course Progression after Withdrawal or Failure of Course: If a student withdraws from or fails any nursing course, the student cannot progress to the next rotation. The student must also withdraw from co-requisite nursing courses (clinical, theory and skills lab). The student may finish the pharmacology course that they are currently enrolled in only if student conduct is not the reason for withdrawal from the program.

Immediate Dismissal: There may be situations where the immediate dismissal of a student is recommended.

These include but are not limited to:

- The student's performance is so unsafe that it jeopardizes patient safety
- The student requires continuous one-to-one supervision from the instructor
- The clinical agency does not accept the student for placement
- Drug/alcohol, emotional illness/impairment, or abuse to patients, staff, or peers

In the event of any of these, the student is removed from clinical during which an investigatory meeting is held, and appropriate action taken. The instructor's recommendation that the student withdraw from the course or be dismissed will be forwarded to the Director of the Nursing Program and to the Vice President of Student Services. See Regulation on Dismissal or Withdrawal for more information.

Withdrawal: Students who wish to withdraw from the nursing program are advised to consult the Readmission Process in The Nursing Handbook Readmission Process and view the <u>Withdraw and Grading Options</u> information on the College of Marin website.

Reasons for Failure or Dismissal. The student will be informed of the reasons for dismissal for unsafe or incompetent practice, academic failure, or both. See Regulation on Dismissal or Withdrawal in the Nursing Handbook for more information.

Exit Interview: An exit interview will be held to discuss the reason for dismissal and the process for readmission (if possible) will be reviewed by the Director of Nursing

Student Resources

Campus Resources: If at any time during the notification/failure process, the students need additional support or direction, the available resources on the campus include: The Program Director, Counselors, and the Vice President of Student Services. See **https://ss.marin.edu**/.

Student Rights and Responsibilities: All members of the College community are subject to State and Federal laws, as well as policies and procedures established by the Board of Trustees. The student should familiarize themselves with the following policies which are found on the College of Marin website at: https://policies.marin.edu/home

- Student Conduct Policy
- Student Rights and Grievances Policy
- Drug and Alcohol-Free Campus
- Sexual Assault and other Assaults on Campus Policy

Revised: June 2010

Reviewed: June 2014

Reviewed: August 2016

Regulation on Dismissal or Withdrawal / Readmission after Withdrawal

Students are expected to perform safely and competently in the clinical area, to attend all classes and clinical experiences, to behave in a professional and ethical manner, to pass each nursing course, and to follow all program and College conduct policies and procedures established by the Board of Trustees at the College of Marin.

Standards for Dismissal

A student may be dismissed or asked to withdraw from the Registered Nursing Program for:

1. **Unsafe clinical performance:** Safe and Unsafe Nursing practice is defined in the College of Marin Registered Nursing Program Student Handbook under Procedures for Students in Danger of Failing and in the Clinical Evaluation Tool.

2. **Excessive clinical absences:** Excessive clinical absences are outlined in the College of Marin Registered Nursing Program Student Handbook under Absences.

3. **Unprofessional or unethical behavior:** Student Conduct Standards are defined by the College of Marin Board of Trustees Policy BP 5500, and by COM Student Conduct Policy 4.0022 and the Student Conduct Procedure 4.0022 DP. Failure to follow these Standards of Conduct Policies and Procedures are cause for discipline and include removal, suspension, or expulsion of a student.

4. **Violation of the Student Conduct Policy:** Failure to follow the Standards of Conduct Policies and Procedures listed above are cause for discipline and include removal, suspension, or expulsion of a student.

5. **Failure of any nursing education course:** Students who fail a nursing education course will not be allowed to progress to the next level of courses in the Registered Nursing Program and will not be allowed to continue in the Registered Nursing Program. The student will be told the reason for the dismissal by the instructor of record and the Director of Nursing. The Director of Nursing will also provide the student with information regarding College of Marin policies and procedures.

6. **Failure to provide required/requested information:** Students who fail to provide the requested onboarding information (not limited to vaccination history, CPR certification, background report, drug screening and clinical onboarding student materials), will be dismissed from the program. The Administrative Assistant, with the various clinical facilities, will communicate and provide due dates for documentation to registered nursing students. It is the student's sole responsibility to provide the requested information by the due date. Students who fail to provide the information and are then dismissed from the program and are in good standing may reapply for admissions.

*Readmission Policy

Readmission After Failure or Poor Student Conduct:

1. Students who fail any course in the nursing program required for passing the nursing program and/or attaining licensure as a Registered Nurse in California will *not* be considered for readmission.

2. Students dismissed for poor student conduct in the Registered Nursing Program will not be eligible for readmission.

Readmission After WITHDRAWAL

1. The Director of Nursing and the Registered Nursing Faculty will determine whether a student will be accepted as a returning student if the student previously withdrew from the nursing program.

2. Students must have withdrawn from the nursing program while in good standing (i.e., the student had passed all skills, clinical and coursework but withdrew due to death in the family, pregnancy, etc.)

3. Readmission to the RN Program after withdrawal is not guaranteed. Each semester the Director of Nursing will determine if there is space available to readmit students who have withdrawn in good standing based on student to teacher ratio, safety considerations in the clinical setting, contract requirements, capacity for placement in clinical facilities, as well as other factors beyond the control of the program, such as fiscal and program resources.

4. Students will not be considered for readmission if their nursing major courses were completed over a year ago.

5. A student who withdraws from the Registered Nursing program a second time will not be considered for readmission to the program even if the student is in good standing.

6. Accepted returning students may be asked by the Director or Faculty to Petition to Repeat or Audit previously taken nursing course(s). See district policies AP 4225, AP 4227, AP 4228, and AP 4070.

Readmission Procedure

The reapplication process is described in detail in the College of Marin Course Catalogue (see Nursing Program). For readmission follow the instructions under *Nursing Education: Registered – NE for Enrollment Procedures for Returning Readmission, Transfer or Challenge Students* at https://marin.elumenapp.com/catalog/current/ne#mainContent

Check the Nursing Education Website for application due dates: https://hs.marin.edu/nursing

Regulation Regarding Nursing Students Impaired by Substance Abuse and/or Mental Illness

In the matter of nursing students impaired by substance abuse and/or mental illness, the Registered Nursing Program has the authority and responsibility to take immediate action and to help the impaired student in the following ways:

- Education
- Identification and Assessment
- Support
- Referral

Interventions by the program staff will be handled confidentially. Faculty may use the COM resource RED FOLDER to guide their interventions when faced with an acutely distressed or disruptive student. See: https://ss.marin.edu/sites/default/files/COM-RedFolder.pdf

Procedure for Nursing Students Impaired by Substance Abuse and/or Mental Illness

Education

Didactic and experiential teaching about substance abuse and mental illness is included in the curriculum of the Registered Nursing Program.

Identification

If a nursing student is aware that she/he/they/them is impaired by substance abuse or mental illness, she/he/they/them has the responsibility to seek aid for diagnosis and treatment.

Assessment

If a faculty member observes that the clinical performance or classroom behavior of a nursing student poses a danger to the safety and well-being of self or others, the faculty will direct the nursing student to immediately leave the clinical agency or classroom. These behaviors may include, but are not limited to:

- physical impairment
- impaired judgment
- mental or emotional impairment
- disruptive actions
- inconsistent behavior patterns

When students exhibit any of the above behaviors, the following actions will take place:

- 1. The student will be immediately removed from the classroom or clinical area.
- 2. The instructor will use the COM resource RED FOLDER to guide their interventions when faced with an acutely distressed or disruptive student.
- 3. The instructor will immediately report the incident to the Program Director and provide written documentation of the behaviors on the Student Referral Form.
- 4. The instructor will give the Student Referral Form to the Program Director.

5. Within 24 hours, the student will make an appointment to see the Program Director.

Support and Referral

The Program Director will meet with the students for discussion and planning for support and referral to services and programs located at the College and within the community for further professional assessment. The student will be given a copy of the Student Referral Form indicating those behaviors that led to the classroom/clinical exclusion. Also, the student will receive a Health Clearance Form signed by a licensed chemical dependency/mental health counselor indicating that the student is safe to return to nursing. This form must be submitted to the Program Director before the student can be considered for readmission.

Suspension

When a student is identified as impaired and a danger to self or others and refuses to submit to the required assessment, they may be suspended from the nursing program.

If the student completes the required assessment and is diagnosed as being impaired, the student will be suspended from the nursing program for a minimum of one semester and until such time proof of having received professional treatment and a certified release to return to nursing can be provided.

Readmission

After at least one semester, the student may request readmission to the nursing program. The readmission requirements are:

The applicant must submit a written request to the Program Director.

• At the time of reapplication to the program, the burden of proof shall lie with the applicant to demonstrate sufficient evidence of having received professional treatment and rehabilitation to establish fitness to perform student nurse functions in a safe and competent manner.

• Submission of signed Health Clearance Form from chemical dependency/mental health counselor indicating that the student is safe to return to nursing.

• A second documented incident of impaired behavior will result in dismissal from the nursing program with no possibility for readmission.

- Re-entry is on a space available basis.
- Application procedures must comply with all program Readmission Policy criteria.

Referral Form

DIRECTIONS: The Referral Form is to be completed by the student's instructor indicating the reason for referral to a licensed chemical dependency/mental health counselor for a health clearance.

The Health Clearance Form is to be completed only by a licensed chemical/mental health counselor following the examination and assessment of the student's physical/emotional status.

The completed Health Clearance Form must be returned directly to the Program Director before the student may be re-admitted to the course.

Referral Statement: ______ has been removed by me from the classroom, clinical setting due to the following impaired behaviors:

Instructor

Date

Time

Program Dean

Date

Time

I GRANT PERMISSION FOR THE RELEASE OF INFORMATION REGARDING MY DIAGNOSIS

AND TREATMENT TO THE PROGRAM DIRECTOR AT COLLEGE OF MARIN.

Student Signature Date

Health Clearance Statement

Results of examination and assessment:

Plan of treatment:

	, is determined by me to be safe to:
1.	Return to the classroom with no restrictions
□ Yes	□ No
2.	Practice direct patient care in the hospital setting with no restrictions
□ Yes	□ No
Signatu	are of Licensed Chemical Dependency/Mental Health Counselor:
Printed	name of Licensed Chemical Dependency/Mental Health Counselor:
Licens	e and Number

Telephone and Extension

Address and Zip Code

Date:

Student Complaints

COM follows specific policies and procedures regarding student complaints. Information on the Student services site can be used by students to guide them in delineating the type of complaint (i.e., Academic, Non-Academic, Criminal, etc.) and the process necessary to address the complaint. Please refer to the <u>Concerns and Complaints</u> section of the <u>COM Student Services website</u> for guidance in handling a complaint/grievance.

The RN faculty have defined a complaint as an expression of dissatisfaction about something or someone connected with the nursing program. Many informal complaints are reviewed and resolved during the academic year using the student complaint process for the College. A formal complaint is a written and signed statement with supporting evidence. All formal complaints will be tracked.

Complaints received by the Director of Nursing related to discrimination or harassment, academic complaints (student-faculty), academic progress/dismissal, admission, attendance, financial aid, grades, graduation, fee payment/refund, residence determination and student records will follow the College of Marin policy and procedures for the specific complaint.

Expectations on behavior in the clinical setting are addressed in the Nursing Handbook under "Legal and Ethical Responsibilities." Students are encouraged to follow the chain of command in reporting criticism and channel any criticism of an agency or individual first to the instructor and then to the Director of Nursing. Students are also expected to resolve problems or differences with a fellow student, hospital staff person, or faculty member. The faculty can assist the student with conflict resolution. Tactful approaches toward conflict resolution should be rational, mature, and honest. Students are referred to the College process for academic complaints/grievances.

SECTION VI

INFORMATION PERTAINING TO CLINICAL PLACEMENT, ONBOARDING, AND PROFESSIONAL CONDUCT

Social Security Number / Background Clearance / Drug Screening / Conviction Information

A valid social security number or Individual Taxpayer Identification Number is required to participate in the College of Marin Registered Nursing Program because clinical agencies require these numbers for on-boarding of students into the clinical experience.

Background checks are commonly completed on health care personnel, including students and volunteers. Every student offered space in the program must submit to a background screening and drug clearance before beginning clinical rotations as part of their admission requirements. A background check that reflects a history of felony conviction(s) or other ineligibility for federal program participation could render a student ineligible for clinical placement, as determined by the clinical agencies. However, this constitutes a limited set of examples that could determine whether a student is ineligible for clinical placement and subject to dismissal from the nursing program.

Refusal or failure to participate in the background check by the date specified by the Registered Nursing Program administration office shall be interpreted as the student's unwillingness to complete the checklist of requirements and therefore that student will not be allowed to participate in clinical courses and will be subject to dismissal from the nursing program.

Clinical agencies require all students to successfully pass the drug screening to participate in mandatory clinical rotations. Any student with a positive or an inconclusive dilute (negative dilute) result will not be allowed to participate in clinical training and will not be allowed to continue in the program. A negative dilute result will require one allowable repeat of the test. Refusal or failure to participate in the drug screen portion of the requirement by the date specified by the Registered Nursing Program administration office shall be interpreted as the student's unwillingness to complete the checklist of requirements and therefore that student will not be allowed to participate in clinical courses and will be subject to dismissal from the nursing program.

Importantly, any issue on a background check and any positive result on a drug screen can be grounds for a clinical agency to deny a student access to that facility for a clinical rotation. Students who are found to be ineligible for clinical placement by the clinical agency after admission to the nursing program, due to the result of the background check or drug screen, shall be subject to dismissal from the program, as they will be unable to complete mandatory clinical rotations.

Clinical Onboarding Requirements

Initially and each semester, you will be asked to upload evidence of onboarding requirements. Your timely response to these requests is appreciated and essential to our ability to provide high-quality clinical experiences. Our onboarding requirements are governed by the contracts we have with our clinical partners who provide the opportunities you need for clinical education.

Prior to the start of NE95, all nursing students MUST submit:

- 1. A health physical exam
- 2. Immunization records (including Covid-19 and Hepatitis B) (See <u>Complio</u> for specific immunizations)
- 3. Current BLS/CPR Card (American Heart Association (AHA) only must be "BLS for Health Care Providers").
- 4. Evidence of health insurance
- 5. Background check

- 6. Drug screening
- 7. Two-step TB test (or a QuantiFERON blood test)
- 8. Self-enroll in the Nursing Program Resources Canvas course and enable announcements to ensure they receive valuable information from the program. Self-enroll in Nursing Program Resources Canvas Course Here: https://marin.instructure.com/enroll/GAB6G8

Please follow the instructions on the <u>American Databank (Complio</u>) Student Guide to create an account and fulfill the requirements (See Welcome letter for more information). There will be other requirements, such as learning modules and legal documents, which must be uploaded for each clinical rotation. Some sites require that you upload all documents into MyClinicalExchange. (Instructions will be provided if you are assigned to one of these sites)

Submit above information to American Databank (Complio) (See Welcome letter on Complio enrollment) AND obtain clearance of vaccination history, CPR certification (AHA only, CPR for HealthCare Professionals), background and drug screening and required clinical onboarding documentation.

American Databank (Complio) screens the student's information for completion. American Databank provides a complete report to the student and notifies the Director of Nursing whether you are cleared with regards to the Background and Drug Screening. For any non-negative result, the Director of Nursing will consult with the student on appropriate next steps.

Any student with a positive result on their drug screening will not be allowed to participate in clinical training at the discretion of the clinical facilities. Drug screening and background checks must be completed before the start of each Fall Semester or per agency policy by each student. Questions about Clinical Onboarding Requirements should be forwarded to the Program Administrative Assistant.

Notice Concerning Board of Registered Nursing Licensure

Before obtaining a license to practice as a Registered Nurse, all graduates MUST report felony and misdemeanor convictions along with fingerprints. The Board of Registered Nursing may deny licensure based on prior convictions. For a list of convictions related to the practice of nursing, please contact the Nursing Department or the Board of Registered Nursing Webpage

.If students have any questions about the background screening, nursing program eligibility, or the Board of Registered Nursing requirements, they should <u>first</u> contact the Nursing Program Director.

See BRN website at <u>http://www.rn.ca.gov/</u> for Policy on Background Checks for Student Clinical Placements.

Legal and Ethical Responsibilities in the Clinical Setting

Registered Nursing students who are carrying out nursing activities are expected to act how a prudent RN would act under the circumstances based on the level of education and experiences which he/she has had. The prudent person is one who governs and disciplines themselves with reason. It speaks to skill and good judgment in the use of resources. Assignments made by the nursing instructor reflect student preparation level. Students are not to exceed these expectations or limitations. This is not to discourage the student from growing and learning. It means that when in doubt, the student must stop what he/she is doing and seek further guidance and direction. Students are not allowed to perform any procedures/skills without class/lab instruction and, in many cases, satisfactory lab check-off, prior to patient assignments. Students are to accept direction and guidance only from the instructor, except in a life-threatening emergency, or with the instructor's permission. Students are not to proceed beyond what they can accomplish safely.

Registered Nursing faculty are required to:

1) Determine the level of student competence,

2) Make appropriate patient assignments,

3) Supervise with appropriate degree of personal attention,

4) Correct deficiencies and

5) Evaluate outcomes of patient care.

Correcting deficiencies includes demonstrating correct techniques, providing feedback about deficiencies and consequences for the patient, establishing requirements for remediation and removing students from the clinical setting if they exhibit unsafe or inappropriate performance/behavior. Instructors must provide on-going supervision of students until they validate consistent safety and competence. Students are not to perform independently until they have the necessary knowledge, training and experience, and the instructor has validated consistent safe and competent practice.

The California Code of Regulations, Section 70214 states that "Assignments shall include only those duties and responsibilities for which competencies have been validated."

1. The nursing student must be covered by malpractice insurance before entering a hospital clinical area. (This is provided by the College and the certificate of coverage is on file in the nursing department office (updated 12/2023).

2. Students are <u>NOT</u> to participate as witnesses to <u>personal</u> affairs of patients, such as a will, conservatorships, business dealings, etc. Since they are not employed by the facilities, they are in legal limbo should any problems arise.

3. Student Nurses must follow the Nursing Practice Act, Code of Ethics, the RN Program regulations, procedures, or guidelines, and the individual hospital or agency policies and procedures.

4. Students are expected to report to their instructor if they are not prepared or competent to perform a task or assignment.

California Board of Registered Nursing Licensure Requirements

Prior to obtaining a license to practice as a Registered Nurse, all graduates must report felony and misdemeanor convictions and submit fingerprints. The Board of Registered Nursing may deny licensure based on prior convictions. For a list of convictions related to the practice of nursing, please review the information posted on the Board of Registered Nursing Website.

Students should <u>first</u> contact the Director of Nursing if they have any questions about the background screening, nursing program eligibility, or the Board of Registered Nursing requirements related to legal eligibility.

BOARD OF REGISTERED NURSING

P.O Box 944210, Sacramento, CA 94244-2100

P (916) 322-3350 | www.rn.ca.gov

Uniform Dress Code

The following are guidelines and expectations regarding RN student dress regulations while in clinical settings. Students must be conservative and adhere to multiple hospital dress codes. Please note that dress codes for individual clinical institutions and units may supersede this policy. Please keep the receipt when purchasing any component of the nursing uniform, so that if it does not meet the dress code requirements it may be returned. Be sure to wear authorized College of Marin identification badges in all patient-care areas.

Hair: Hair should be clean and well-groomed. Long hair is to be pulled back and off the uniform collar.

Facial Hair: Beards and mustaches must be neat and well-trimmed. Facial hair may need to be removed for rotations due to the need for an N95 mask. Our students are fitted for N95 masks due to exposure to airborne pathogens (i.e., Covid-19), students may need to shave to allow for an appropriate seal.

Jewelry: No rings other than wedding bands should be worn in the clinical setting. No long decorative chains or necklaces. No bracelets. Earrings should be limited to one small stud if you have pierced ears. A watch with second hand or digital second reading is required.

Cosmetics: Refrain from using perfume, cologne, or scented lotion in the clinical setting. Nails should be clean and trimmed short. Nail polish and/or artificial nails are not permitted in the clinical setting for infection control reasons.

Uniform: Uniforms with COM Nursing patches, name badges, and other required student identification are to be worn in the clinical setting when providing patient care.

Scrub Uniform: Hunter Green scrub uniforms can be purchased online. Our standardized vendor to ensure consistent style and color shading is Adar uniforms (<u>adaruniforms.com</u>). Please make your uniform purchases with that company. If you would like to wait until the first class (NE95), there may be some previously purchased uniforms available to you. Please contact the Lab Tech in room SMN 214 during office hours for uniform needs during the program.

Shoes: Acceptable options are neutral in color (black, beige, brown, grey, white) with closed toes/heels that have no obvious logo. Whatever shoes are selected are to be worn exclusively as nursing shoes. Shoes must always be clean.

Professional Attire: Hospitals request that students wear professional attire and dress neatly and conservatively when in hospitals gathering data for nursing care planning or other assignments. Please cover tattoos and remove tongue studs.

Failure to Adhere to the Dress Code:

Failure to adhere to the dress code due to an unkempt uniform, incomplete uniform, not meeting the regulations (e.g., unlaundered, wrong color, lacking name badge or school patch, open-toe footwear or with logo), or wearing jewelry other than that outlined in the RN Student Handbook will result in faculty action.

The instructor will give the student a verbal warning identifying the student's failure to meet standards set in the RN Program dress code or clinical agency dress policy and request the student correct the problem (i.e., remove jewelry, put on name badge, sew patch on shirt, wear appropriate footwear, etc.). The instructor or agency representative may request that the student go home, change to appropriate clothes, and return to the clinical agency to provide nursing care. Time missed from the clinical will be counted as a clinical absence and must be made up.

Student Nurse Professionalism

You are preparing for a career in the *profession* of nursing. This means that you will not only be learning a new body of knowledge, but you will be adopting the behaviors, values, and standards that are required of members of the nursing profession. As a student nurse, you will be expected to behave with discretion, judgment and in a manner compatible with the educational purposes of the college, the mission of the health care agency, and the nursing profession's standards.

Student Nurse Accountability, Responsibility, and Conduct

Accountability is a key element in the life of any professional person. This is a particularly important concept for nursing. Accountability means you are responsible for the services you provide to patients. It requires above average academic achievement, a positive attitude about one's role in giving nursing care to clients, and a willingness to learn and practice nursing with the highest of ideals.

In daily practice, this requires that you are prepared for your clinical experience. Should you have questions, or should a situation arise that is new or confusing, you have an obligation and responsibility to inform your instructor to seek further guidance and direction. You are responsible for your actions, and so must be prepared for your assignments and alert your instructor when you are in doubt.

Students are responsible for demonstrating professionalism in every learning environment. For example, when assigned to any clinical setting, the student is responsible for coming on time and in appropriate attire, maintaining client confidentiality, exercising therapeutic communication, and fulfilling the assignment's objectives.

Each student is accountable for their own actions. Students do not practice "under" the license of the nurse who is teaching them. Rather, students can be sued for negligence or malpractice if practicing outside of their scope of practice as students or for failing to secure adequate supervision for specified tasks. Students are covered by malpractice insurance as follows:

Policy Administrator: Keenan & Associates

Policy coverage is \$1,000,000 per occurrence and \$3,000,000 annual aggregate for students.

In the clinical setting, a nursing student is expected to:

- 1. Be prepared for clinical assignments:
 - a. Complete care plans per guidelines before arrival on unit
 - b. Review and prepare for planned treatments
 - c. Review and have information ready for medication administration
 - d. Review necessary policies and procedures
- 2. Be safe and competent:
 - a. Provide the same level of care as a graduate nurse for those tasks completed satisfactorily in a lab setting or performed in the clinical setting.
 - b. Students will be removed from the clinical setting if found unprepared to perform expected tasks or fulfill clinical course objectives safely and competently. *The individual situation will dictate whether the student will be sent home for the day.*
 - c. Students may be sued for negligence or malpractice.

- 3. Notify their instructor immediately if they do not have:
 - a. The requisite knowledge or information to perform safely
 - b. The requisite skill or equipment to perform safely
 - c. Psychomotor competence due to illness, effects of drugs, or lack of sleep
- 4. Maintain confidentiality and protect patient identifiers:
 - a. Consider all information obtained regarding the patient's status as strictly confidential, and not to be discussed with anyone except the instructor, peers, and hospital personnel responsible for an assigned patient's care. (Learning experiences in the clinical area are to be shared only during pre and post conferences and other related professional sessions.)
 - b. Protect patient identifier by using patient's initials when submitting reports on patients to instructors, and never using the patient's full name.
- 5. Consult with their instructor if circumstances regarding the patient will hamper the student from giving effective care (e.g., the patient is a relative or friend).
- 6. Maintain a professional attitude when caring for patients.
- 7. Follow chain of command in reporting any criticism:
 - a. Recognize that ethical behaviors are essential. Tactful approaches toward conflict resolution should be rational, mature, and honest.
 - b. Make every effort to resolve problems or differences with a fellow student, a hospital staff person, or a member of the faculty.
 - c. If a resolution is not possible, channel any criticism of an agency or individual first through the instructor and then to the Director of Nursing.
 - d. Focus their energies to learn. If there is a legitimate complaint, let your instructor know so that something can be done about it.
- 8. Report any errors promptly:
 - a. Notify clinical instructor and primary nurse for any medical error in providing patient care that the student has committed or detected
 - b. Follow agency and College of Marin protocol for documenting error commission or detection and assist with recommended/ordered corrective action.

The Nursing Department is expected to Maintain the confidentiality of student documentation. Your file is accessible to you but will only be released to others with your permission and/or signature

HIPAA Privacy Requirements for Healthcare Professionals

Overview of HIPAA requirements

The federal government requires health insurance plans, hospitals, and health care providers protect health information privacy. This prevents improper disclosure and misuse of confidential health information. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a broad federal regulatory act, which requires organizations to have detailed policies and procedures in place that dictate how patient "protected health information" (PHI) is to be used, when it can be disclosed, and how it should be disposed of. Accessing, using, and disclosing protected health information is subject to strict requirements.

HIPAA establishes standards for electronic transfer of health information and provides privacy and security standards to safeguard the confidentiality, availability, and integrity of such information. Under HIPAA, a distinction is made between Privacy and Security. Privacy sets standards for health care facilities control of access, use and disclosure of "protected health information" (PHI), and for related individual rights. Security requires health care facilities to develop, implement and maintain appropriate security measures to safeguard the data integrity, confidentiality, and availability of electronic individual health information (e.g., password protection, door locks and key cards for files and offices).

Duty to maintain information in a confidential manner

Individuals performing services for health care organizations and having access to PHI are expected to comply with HIPAA regulations. Information and communication, whether verbal, written, or electronic, about patient health information must be kept private and confidential by limiting it to persons who are authorized to receive it. Only people with an authorized need to know should have access to the protected health information. These individuals should 1) not access or use information they don't need for work responsibilities; 2) access or use only as much information as needed; and 3) only disclose information when permitted or required to do so by law or the patient.

There are many ways to protect patient privacy. Some of these include the following:

- All clinical material remains off limits for any public site or public communication, regardless of the lack of any direct patient identifier.
- Close doors and curtains and lower your voice to keep conversations about patient care private. Do not discuss your experiences of the day in the elevators, vans, or public areas or post any protected information on the web or social network sites.
- Discuss PHI in private so that others may not easily overhear. For example, avoid discussing PHI in the cafeteria, waiting rooms and elevators.
- Keep patient medical records, lab results, and other PHI where unauthorized persons cannot see or access them. Do not leave charts open on desks or countertops, or in areas where unauthorized people could easily access them.
- Do not access patient medical records unless you are authorized to access that information.
- When finished using patient information, return it to its appropriate location. When finished accessing electronic patient information, log off the system.
- When discarding patient PHI, make sure it is disposed of properly (e.g., shredding).
- Avoid the use of photography in the vicinity of patients or patient data.

Hospital Policies Regarding Use of Electronic Devices

Since the passage and implementation of HIPAA, health care agencies have been developing new privacy and security policies designed to protect the confidentiality and integrity of protected health information, including policies regarding the use of electronic devices. Students are expected to be familiar with the policies regarding the use of electronic devices wherever they go for clinicals.

A general rule is that students may not take digital images of parts of the medical record on their cell phone

cameras or other electronic devices and may not photograph patients. The only exception to this situation is one in which the patient has control, as when a patient asks the student to take a picture of them with their new baby. Similarly, patients may not take pictures of staff or students without their express permission. (e.g., there have been situations where patients have taken photographs during their labor and delivery that included the medical and nursing staff in attendance, and then posted those pictures on a website without permission; this is a violation of the staff members' right to privacy.)

Students should also be aware that the admission procedure to many inpatient units now includes the identification of a code word that family members can use for obtaining information about their loved one. When family members call the unit, they can be given information by the RN if they have the correct code word.

Students should properly dispose of (e.g., shred and put into designated receptacle) any written or computergenerated notes with identifying information before leaving the medical center.

Security Awareness Training:

Students may be asked to participate in security awareness training, which involves security incident reporting, acceptable use of computers and other electronic devices, physical security in the workplace, password, and access management, and identification when someone has attempted to access a system using your user ID.

(Adapted from HIPAA Training Booklet for Health Care and Health Plan Professionals - Kaiser Permanente, 2002

Student, Faculty, and RN Staff Questions Regarding Supervision of RN Students in Clinical Settings

"Is the student working under my license?"

The Nursing Practice Act, Business and Professions Code 2729, notes that students are acting in a category called an exemption. They are not working under anyone's license and have the right, by law, to practice if it is incidental to the educational process.

California Nursing Practice Act Section 2729. Students

Nursing services may be rendered by a student when these services are incidental to the course of study if **one** of the following applies:

- A student is enrolled in a board approved pre-licensure program or school of nursing.
- A nurse licensed in another state or country is enrolled/participating in a board approved continuing education course or post licensure course.

What are the agency responsibilities when students are assigned to the hospital?

The Board of Registered Nursing expects:

- That the responsibilities of the staff in relation to student learning and behavior are clear
- That the staff is oriented to the student's role
- That the responsibilities of faculty assigned to the facility are clearly described to staff.
- There must be assurance that there are adequate staff in both number and quality to ensure safe and continuous health care services. Staffing patterns must not be determined by the presence or absence of students. The agency must evidence appropriate safe utilization of staff, as reflected in its staffing pattern.

What are RN responsibilities when students are part of the team?

The Board of Registered Nursing has made it clear that the Registered Nurse functions include:

- Initial Nursing Assessment
- Comprehensive Admission Assessment Readmission after Invasive Procedure Validation of Abnormal Data
- Review of all data collected by personnel to determine patient needs
- Formulating Nursing Diagnosis
- Establishing Patient Outcomes
- Determining Proper Interventions
- Evaluating progress toward outcomes

The RN is responsible for assessing patients and must take over for what the student is not yet prepared to do or lacks the background to analyze.

What are the student's responsibilities?

• The student nurse may accept responsibilities only for tasks they are competent and safe to perform in lab/class. The student must provide the same level of care as a graduate registered nurse for those tasks

that they are competent and safe to perform in lab/class and implement in the clinical setting. The standard of care must be the same as that rendered by the registered nurse.

• They must ask for appropriate instructor or primary nurse supervision if unsure of a skill.

Under the law, each person is responsible for his/her own actions. The nurse must be clear about what the student can or cannot do.

- 1. If an RN directed the student to perform a skill/task without the appropriate supervision the RN would be responsible. The nurse has the responsibility to delegate according to the subordinate's abilities and to supply adequate supervision.
- 2. The student must be prepared for the assignment with:
 - a. nursing plan of care
 - b. medication information
 - c. teaching plans
 - d. knowledge of policies and procedures
- 3. A student must be removed from the clinical setting if: he/she
 - a. is unprepared to perform safe and competent care
 - b. lacks knowledge
 - c. lacks skill
 - d. lacks resource
 - e. reports for assignment under the influence of mood-altering drugs.
- 4. A student must immediately report to the instructor or primary nurse if he/she is unable to perform a task or provide care competently and safely. When the student does not possess the skills needed to carry out an assigned function, acting with reasonable care requires the student to refuse to perform the function.
- 5. Students may be sued for malpractice.

The following information is to help you understand the preceptorship process. NE286L is the capstone clinical course in the COM Nursing Program in which students demonstrate role acquisition by working one on one with an experienced RN. Once the course is completed, the student will have the clinical knowledge, skills, and abilities to begin their nursing career as an entry level Registered Nurse. As with other clinical courses, you will be in a group of students assigned to a clinical instructor, in addition to your theory instructor. Your clinical instructor acts as a COM Faculty Liaison between the student and the preceptor to facilitate a successful experience. The role of your clinical instructor is to orient, supervise, and support you as well as to provide formative and summative feedback. They can also aid in the resolution of any clinical situations that require the attention of an experienced College of Marin nursing representative. They do not choose your placement. The preceptorship is specifically regulated by BRN California Code of Regulations § 1426.1. on Preceptorship. Detailed information regarding Preceptorship will be covered in your 286L course syllabus and your clinical faculty liaison will clarify the steps in more detail when the first week of the course.

Preceptorship - NE286L

The Phases of Preceptorship

1. Identifying student interests – Second year nursing students will be asked to complete the and submit the form below by Nov 1st, indicating their priority desire or need for a preceptorship placement condition. The Coordinator will use these data to request placements within our contracted facilities. The Medical-Surgical specialty is the most common unit type for preceptorship placements. Once preceptorship placements are approved by the agencies available placements will be assigned by the Coordinator and Program Director. There is no guarantee that the identified student priority will be accommodated, so students should plan maximum flexibility into their final semester work/life/school schedules.

Your preceptorship experience is a focused, intensive clinical apprenticeship that requires a considerable number of complex logistical steps across multiple organizations and involves many collaborative personnel touchpoints; both in the planning and implementation phases. The nursing department ensures that you will be placed in with a qualified registered nursing in a BRN core content area: medical-surgical, obstetric, pediatric, geriatric, or psychiatric nursing. You will receive a preceptorship clinical experience assignment that aims to assist in your transition from nursing student to graduate Registered Nurse through a practicum that integrates your prior and current course work in preparation for licensure and entry to practice.

This intensive final semester course (NE286L) requires your participation, collaboration, and flexibility. Preceptorship placements may be assigned in a variety of units, facilities, and shifts. Please arrange your schedule for the final 8 weeks of the program to allow you to accommodate yourself to the preceptorship placement arranged for you. The program director and the preceptorship placement coordinator will make the final preceptorship placements, which will be disseminated to you before your first day of class.

This document offers the opportunity for you to indicate your priority need in relation to the preceptorship clinical placement. Please indicate your top preference for the aspect of your preceptorship experience you most desire. Please note that efforts will be made to accommodate your preference. However, availability of sites, units, and shifts depends on the approval by those sites and the availability of qualified preceptors. Therefore, while we assure you a placement for preceptorship, we do not guarantee that your preference can be accommodated.

Preference: (place an X by your <u>one</u> priority desire and an "A" by <u>one</u> alternative preference if your priority desire cannot be fulfilled) *Note – if you are registered with Student Accessibility Services (SAS) and have a particular accommodation need, please provide your SAS contract to the department director along with this form.

Student Name:

Priority Preference

I'd prefer a preceptorship placement that is/has:

_____ an 8-hour day shift (0700-1530, or equivalent)

an 8-hour evening shift (1500-2300, or equivalent)

an 8-hour night shift (2300-0730, or equivalent)

- _____ a 12-hour day shift (0700-1930, or equivalent)
- _____a 12-hour night shift (1900-0730, or equivalent)
- _____ free parking

_____ closest proximity to my address of record (make sure your correct resident address is registered in the nursing department)

_____a specific unit type (specify)______

2. Finding preceptorship opportunities - During this phase, coordinators will work on identifying preceptorship opportunities for students. Securing preceptorship placements requires considerable time and effort. We ask students to be patient and wait to be approached by the clinical coordinator(s) with information about their placements. The time may vary from student to student, depending on a variety of factors. *It would be inappropriate for students' relatives or friends to be calling COM's nursing office or reaching out directly or indirectly to facility supervisors and administrators or coordinators, inquiring about preceptorship opportunities, as this is against the currently established collaborative practice preceptorship agreements.* Furthermore, this may jeopardize COM's future relationship with these sites and a decision may be taken to consider a different placement for this student.

In case of a potential preceptorship opportunity/willing preceptor who has approached and offered him/herself as a preceptor (it is not appropriate for students to recruit a preceptor {see preceding paragraph) the student should ask that person to contact their nurse manager and ask them to call or email the College of Marin Department of Nursing clinical coordinator. The Coordinator will determine how to best proceed with this opportunity, as it still needs to go through the official channels of communication the college and the agency.

3. Onboarding - Prior to attending clinical, students must complete onboarding documentation including assigned readings, acknowledgements, quizzes, and requirements specific for each facility you will attend. Each student is required to upload a health physical exam, immunization records, current TB test annually, CPR certification, health insurance, annual background check and annual drug screening, and to maintain currency of their records or this will result in clinical placement delays. Please check your email regularly and follow the emailed instructions from the RN Program Administrative Assistant by the indicated deadlines.

4. Establishing a Relationship - One of the most crucial steps in the preceptor student relationship and provides the foundation upon which the learning experience will develop. The students frequently experience anxiety in this new learning situation and can benefit from the structure provided by the faculty who will be supervising the experience and the preceptor.

During this phase, the student will be given instructions to reach out to the preceptor to schedule an initial visit with the preceptor and the clinical faculty liaison at a location that is preferred by the preceptor. This visit, therefore, may or may not happen at the clinical practice site. This is per BRN California Code of Regulations § 1426.1. on Preceptorship. There is a required information that the clinical faculty will provide the preceptor with. The students will be expected to have carefully read the course syllabus and to turn in a skills checklist and their contact information to the preceptor. A lot of questions get answered at this initial appointment and the roles of the student, preceptor and faculty are clarified. The preceptor will receive a preceptor handbook and a copy of all signed forms. The students may not begin clinical before this appointment has been completed.

The preceptor's availability at the beginning of the student's placement is crucial in planning the student's experience. In the first few weeks of the semester, the focus of the relationship is to clarify roles, discuss mutual experiences, review the student's background, clinical course goals and learning objectives and to discuss agency policies. Orienting the student to the clinical setting, especially if the student has not been there before, promotes entry into the system and communicates respect and acceptance. The preceptor and student negotiate and determine the frequency of scheduled conferences that best meets the needs of the student and the schedule of the preceptor.

5. The Working Phase – Scheduling shifts to match the working schedule of the assigned preceptor requires effective communication and flexibility on the student's part. Preceptors are not expected to modify their work schedule to meet the students' availability. An alternative preceptor will be identified by the student and preceptor to support the student in the case of preceptor absence. This alternative person's contact information must be submitted to the Department of Nursing at College of Marin per BRN regulation. The implementation of the educational plan is the focus of the working phase. Reviewing the student's experience, discussing patients, exploring feelings regarding the experience, and identifying how to meet learning objectives are all appropriate areas that can be discussed. Feedback from the preceptor on a regular basis will assist the students in maximizing their strengths and address problems that may interfere with the achievement of the professional role. During this phase, the preceptor serves as a role model and resource person. A mid-rotation meeting is arranged by the student that includes the preceptor and faculty liaison (clinical instructor), to discuss the student's progress and encourage reflective goal setting for the remaining shifts. Through clinical logs and competency check lists, students will track their professional progress. Formally, an end- of-preceptorship clinical evaluation

procedure will occur, using the preceptorship evaluation tool as a guide. The clinical instructor will be responsible for the semester grade with the invaluable input from the preceptor.

6. The Evaluation Phase - Formative evaluation is ongoing throughout the preceptorship to provide guidance for the student's development. Additionally, formal midterm and final clinical evaluations are conducted using the NE286L Preceptorship Evaluation Tool. The clinical instructor will solicit the important input of the preceptor and then is responsible for submitting the final grade. The student will be given an opportunity to reflect via a written response to the evaluation and all parties involved will sign the evaluation form. If the student does not agree with the evaluation received, the written response should reflect that and describe the disagreement.

*Detailed information regarding Preceptorship will be covered in your 286L course syllabus and your clinical faculty liaison will clarify the steps in more detail when the time comes.

Rules for Safety, Prevention of Accidents, Injury Reporting, and Bloodborne Pathogen Exposure

The health and safety of all individuals will be given the highest priority. The nursing faculty shall use a variety of methods to convey information to students for their personal and professional guidance which will include training in the following areas related to communicable disease:

- 1. Prevention of exposure
- 2. Use of personal protective equipment
- 3. Exposure follow-up
- 4. Hepatitis B vaccination

Students caring for individuals with any communicable disease shall be instructed as to the proper precautions according to The Centers for Disease Control and Prevention (CDC) and Federal Occupational Safety and Health Administration (OSHA) Students will follow The Board of Registered Nursing Statement on Delivery of Health Care to provide appropriate and safe care to individuals which includes the **Universal Precaution Guidelines**. Students must also follow and comply with hospital procedures for preventing the transmission of communicable diseases. Students are provided access to Student Health Services and supplemental accident insurance (Board Policies BP 5200 and BP 5205) should injuries occur on campus or in the clinical setting.

- 1. Student requirements to comply with health and safety guidelines include:
 - a) Vaccinations (see onboarding requirements)
 - b) Completion of a Health Clearance with a Release of Information clause to inform clinical facilities about the student's health.
 - c) Annual FIT testing at COM.
 - d) COM has drafted a <u>Blood-borne Pathogen</u> Exposure Control Plan. Annual attendance at a training workshop (usually arranged through the nursing laboratories) is mandatory to orient you to (OSHA) safety guidelines. Hospitals require that students attend this workshop prior to clinical experience in their facilities.
 - e) Graduation requirement course study in anatomy, physiology, and microbiology.
 - f) Nursing course study in asepsis, hygiene, immunology, and pathophysiology.
- 2. Guidelines in the Classroom and Nursing Skills Laboratory:

Instructors and students will comply with the current College of Marin-Exposure Control Plan for Blood borne Pathogens posted in the Nursing Skills Laboratory (Update Pending - Fall 2023). Universal Precautions Guidelines must be observed by all students and staff.

Methods of exposure prevention include but are not limited to:

- a) Engineering Controls: proper means for disposal of contaminated equipment and maintenance of contamination prevention facilities.
- b) Hand-washing facilities shall be readily available.
- c) Contaminated needles and other sharps shall be disposed of in a puncture-resistant container designed for this purpose.
- d) Skills practice areas shall be kept separate from personal care areas e.g., eating, drinking.
- e) All procedures involving blood or other potentially infectious materials shall be performed to minimize splashing, spraying, and splattering of this substance.
- f) Warning labels shall be affixed to containers of regulated waste.
- g) Protective equipment like gloves, masks, eyewear, and gowns will be used appropriately as needed.
- 3. Procedure for Injury or Blood Borne Pathogens exposure of Student in Clinical Area.
 - a) What are Student Responsibilities?
 - 1) Exposure Notification: Reports the exposure immediately to the nursing instructor. The nursing instructor will direct the student to the emergency department or hospital department for employee health to determine the need for post-exposure prophylaxis.
 - 2) Immediate Wound Care:

- 1. Needle stick, Laceration, or Skin Exposure: Cleanse the wound immediately with soap and water. If a puncture wound is sustained, encourage bleeding.
- 2. Ocular or Mucous Membrane Exposure: Immediately irrigate the eye or mouth with water for 5 minutes.
- 3) Call **Company Nurse** (1-877-518-6702)
- 4) The student must file a **Workers' Compensation Claim** by contacting Ron Owen (415.884.3159) in Human Resources, College of Marin. The instructor will assist as needed.
- b) What are the Instructor Responsibilities?
 - 1. Send the student to the Emergency Department for treatment.
 - 2. Call Company Nurse (1-877-518-6702)
 - 3. Complete the Supervisor's Reports (including clinical schedule-day/time).
 - 4. Supervisor's Report of Employee Incident or Injury
 - 5. Supervisor's Supplemental Questionnaire
 - 6. Questionable Workers' Compensation Injury Information (if applicable)
 - 7. Forward reports to Ron Owen (415.884.3159) in Human Resources, College of Marin.
 - 8. Notify the Program Director of the injury.
 - 9. Follows the Clinical Facility protocol for reporting an injury.
- c) What are the College of Marin Human Resources Department (Ron Owen) Responsibilities?
 - 1. Process **Workers' Compensation Claim Form (DWC1)** and submit claim to Keenan & Associates (Workers' Compensation Carrier)
 - 2. Coordinate with Nursing Instructor any communication with the Student.
- d) What does the College of Marin Workers' Compensation Cover?
 - 1. College of Marin Workers' Compensation covers students injured while working in clinical facilities. This includes immediate care of the student, follow-up care, and patient testing. Keenan will offer counseling, if needed. If Keenan is notified immediately, they will assign a caseworker to contact the patient's physician for patient follow-up testing. If they cannot be contacted, the instructor or health facility may contact the attending physician for evaluation of patient risk and permission to test the patient. Keenan will reimburse the patient testing ordered by the attending physician.
- 4. Procedure for Student Injury in the College Setting: -Note: Call 911 from any campus phone IF a student has experienced a life-threatening injury or event:
 - Severe chest pain
 - Respiratory distress or cessation of breathing
 - Severe burns
 - Uncontrolled bleeding
 - Unconsciousness (except for seizures) Any fire
 - Violent incidents involving weapons, bodily injuries, physical attacks, etc.
 - a) Students should be aware that if they sustain an injury while in class or participat-ing in a school-

sponsored activity, they must report it immediately to their instructor or supervising authority.

b) The student and the supervising authority must fill out the **Student Accident and Injury Report Form** and submit a hard copy to the Student Health Services Center within ten days of the injury to be properly covered for reimbursable expenses in accordance with policy coverage.

**The student accident insurance policy is supplementary to the student's own personal medical insurance and does not guarantee full coverage.

For more information see: https://ss.marin.edu/health-services/accidentinjury-report.

- 5. Universal Precaution Guidelines (February 1988, CDC Guidelines)
 - a) The Registered Nursing Program at College of Marin follows the recommendations of The Centers for Disease Control and Prevention and mandates the application of blood and body substance precautions for all patients. Precautions must be strictly followed when exposure to blood or other body substances* is possible. These precautions emphasize blood and body substance precautions for all patients regardless of their isolation status, or presumed infectious status, or diagnosis. Guidelines are as follows:
 - 1. Wash hands before and after patient care. Wash hands immediately after gloves are removed.
 - 2. Wear gloves when you anticipate direct contact with moist body substances* from any patient; remove gloves after each individual task.
 - 3. Wear mask and protective eye wear during procedures likely to generate droplets of blood or the body fluids*, to prevent exposure of mucous membranes of the mouth, nose, and eyes.
 - 4. Wear a gown or disposable plastic apron when you anticipate that your clothing may be soiled with blood and other body fluids*.
 - 5. Protect your non-intact skin from contact with body substances*.
 - 6. Wash your hands, arms, face, etc., as appropriate, if you have had unprotected contact with blood or other body fluids*.
 - 7. Discard sharp instruments, needles, and syringes in puncture-resistant containers. Needles should not be bent, broken, recapped, or unnecessarily handled.
 - 8. Handle all specimens as though infectious.
 - 9. Notify your instructor immediately when you have had an accidental needle stick or splash of body substances * into non-intact skin, mouth, eyes, or nose.

*Blood or Body Substances: Blood, semen, vaginal secretion, cerebral spinal fluids, pathology specimens, wound exudate, urine, feces, sputum, vomitus, etc.

Note: The student accident insurance policy for COM is supplementary to the student's own personal medical insurance and does not guarantee full coverage.

SECTION VII

STUDENT RESOURCES, SERVICES, AND ACTIVITIES AT COLLEGE OF MARIN

Select student services will be briefly described here. For a more detailed description of the services included, and for descriptions of additional services offered at the College, students are referred to the additional information provided in this manual, the College of Marin Catalog, the College of Marin Schedule of Credit Classes, and the College of Marin Homepage at www.marin.edu.

Counseling and Advising Services

Academic, career, and personal counseling are available to all students, and they are encouraged to take advantage of these opportunities. Counseling services are in the Student Services Building on both campuses. Hours vary throughout the year but both day and evening hours are available. For information, call 415.485.9432 (Kentfield Campus).

Academic counseling provides information on degree requirements, RN Program requirements, and transfer requirements to a four-year university or college. Students should be aware that, in compliance with SB 139 (October 12, 2007), students applying for an Associate of Science Degree in Nursing who already possess a bachelor's degree or higher degree from a regionally accredited institution of higher education in the United States may be awarded an associate degree upon completion of all the coursework necessary for licensing as a registered nurse. This includes all the prerequisites to the program and the degree requirements for nursing.

Students who do not already possess a degree must meet with a counselor to determine what corequisites are required and devise a plan for completion of co-requisites prior to completion of nursing courses to graduate on time.

Career counseling is provided to students to help them develop goals or make career choices. A Career Day for student nurses is planned each spring to introduce students to various career options.

Personal counseling is available to help students with personal problems that are interfering with their education. Counselors refer students who are in serious distress to private or public mental health agencies in the area.

College of Marin Crisis Assessment, Response, and Education Team (COM CARE)

COM CARE is a service for students, faculty, and staff that is designed to assist parties identify concerns, needs, or troubling behavior related to a student's personal or academic progress, This may include an academic intervention through Counseling in collaboration with you, support for basic needs (i.e. housing or food access, financial, mental health support, personal safety concerns, technology, and more), or behavioral intervention by the Student Conduct Officer, counseling services, or other designated Care Team members.

Student Accessibility Services (SAS)

The Student Accessibility Services (SAS) philosophy and mission are to ensure an accessible and welcoming environment for individuals with documented disabilities while ensuring compliance with federal and state regulations. SAS at College of Marin provides equal access to education to students with a wide range of permanent and temporary disabilities including learning disabilities, chronic health conditions, psychological disabilities, acquired brain injuries as well as mobility, vision, and hearing impairments. The College offers educational and mobility aids, note-takers, readers, and interpreters, liaisons with instructors, other campus services, and referrals to community agencies.

NOTE: "All continuing SAS students must request accommodations in advance of each semester" (https://ss.marin.edu/sas). New students need to schedule and attend a new student intake orientation meeting

through SAS. Once established with SAS, the SAS liaison communicates with the instructor when special considerations need to be given to a student, such as additional time for testing. Students should present a letter from SAS for each course for which they want accommodation.

Please visit the SAS website at **https://ss.marin.edu/sas** for more information on how to access the services they provide.

Financial Aid

College of Marin offers a variety of federal and state programs in the form of tuition fee waivers, grants, loans, and part-time jobs to qualified students. Financial Aid provides money for books, fees, transportation, and some living expenses for students who qualify.

Students must complete a Free Application for Federal Student Aid (FAFSA) if they wish to be considered for all financial aid programs. The file is reviewed, and the student notified of their eligibility for funds. Some financial aid programs have qualifications, such as financial need, grade point average, or enrollment in a program of study leading to a degree or transfer to a four-year institution.

The College of Marin has several scholarships for nursing students. Please see the student services scholarships and financial aid webpage at **https://ss.marin.edu/tcc/scholarships-financial-aid** and/or contact the nursing Program Director for additional Nursing scholarships.

The Kentfield Campus Financial Aid Office is in the Welcome Center. For information, call (415) 457-8811 ext. 8822. Please review the COM Financial Aid website at **https://es.marin.edu/financial-aid** for services, forms, and deadlines.

Health Center

The Student Health Center is available to all registered College of Marin Students. The center is staffed by a Nurse Practitioner and health services assistants who are ready to help students maintain their health. Physician appointments are also available. Health Services are located on the Kentfield Campus at Portable (Lot 6),

Services Include

- First Aid, assessment, treatment, and/or referral for short-term illness and acute health concerns.
- Referral to community providers for a long-term illness.
- Campus health education and prevention outreach programs.
- Physical Exams for College of Marin program requirements.
- TB assessments and TB tests.
- Selected lab tests, free pregnancy tests.
- Appointments with a licensed healthcare provider.
- Provision of OTC medications, condoms, and feminine products with a disclaimer.
- Referral to College of Marin Psychology or Counseling services and community mental health providers when requested or indicated.
- Food Pantry for currently registered students.

Please see the Health Services website at https://ss.marin.edu/health-services for more information about their services.

Library

The librarians at College of Marin are happy to assist you with your research needs. Stop by or go to **https://library.marin.edu/** in order to book an appointment with or ask a librarian a question. Libraries are located at both campuses, with locations and hours available here: **https://library.marin.edu/**. Library orientations are offered each semester. There is a computer-based catalog, and the library subscribes to the Cumulative Index to Nursing and Allied Health Literature which indexes more than 525 medical journals. Reference librarians assist students with finding appropriate materials. The library has an on-line full-text periodical database, INFOTRAC-Expanded Academic ASAP, which includes abstracts and/or full-text articles from many periodicals specific to nursing and the health sciences. The library currently subscribes to hundreds of periodicals, (both print and electronic) related to nursing and health care.

These include *American Journal of Nursing, Geriatric Nursing, Health, Nursing 2004, New England Journal of Medicine,* and *Journal of the American Medical Association (JAMA).* Computer workstations with Internet access are available in the library. Students can schedule workstation user times and print or e-mail copies of online articles. Articles from nursing journals may be assigned in nursing courses. These articles contain current nursing information, discussion of prominent issues in nursing, and examples of client application of theoretical concepts.

Computer Learning Resources

There are several computer labs on the Kentfield Campus that are open to students. They are staffed with support people who can help with computer questions. Please see the following for more information **https://www1.marin.edu/umoja/student-resources.**

Nursing Clinical Application Laboratory (Skills Lab)

The Clinical Application Lab assists students in learning to perform the skills and procedures used in everyday nursing practice with accuracy and confidence. It is intended to be a non-threatening learning environment where mistakes may safely be made and corrected, professional attitudes and behaviors molded, and critical thinking and decision-making skills developed. It is also intended to be a place where students may receive the encouragement and support needed to grow into competent and compassionate nurses.

The utility of the Clinical Application Lab is reflective of student use. Experience has shown dramatic differences between those students who spend time in the Lab improving their skills and understanding compared to those who merely meet minimal requirements. Students who "make the Lab their own" progress through the Nursing program with greater ease, enjoy greater success in clinical assignments, and take on the responsibilities of the nursing role with less stress. Students are strongly advised to use the Lab beyond the minimal requirements and to assess their strengths and weaknesses.

Students may not use the Clinical Applications Lab independently unless permission has been granted from the Lab Tech or a faculty member is available in the building. Students may use the Lab independently during open hours (see posted semester schedule) by working with either an instructor in the building or with the Lab Tech to open the room. At the end of an open hour's session, students must turn off the lights and/or computers, close the doors so they lock, and let the lab tech or faculty member know they are leaving.

RN Student Resource Room (SMN 216)

The resource room has computers, texts, journals, and other resources available for RN students. Access and use of this room is available during school hours as the room is unlocked. There is no printer available in the room. College computer use policy applies to the computers in the resource room.

Tutoring is offered to College of Marin students by the California Chancellor's Enrollment Grant. Tutoring is performed by both faculty and sometimes peer/graduate tutors. A list of approved tutors will be provided to students on the Nursing Program Resources Canvas site. Additionally, you are welcome and encouraged to meet with your faculty during their office hours for additional support.

Lockers

Nursing students have the use of a locker on the 2nd Floor of the Science, Math, and Nursing Building in the Bershad Wing. Incoming students should procure a personal lock, choose an unoccupied locker, and notify the administrative assistant in the Department of Nursing of their selected locker number. Lockers are to be maintained by students and food storage is discouraged. All lockers are to be emptied and cleaned prior to program completion at the end of the second year.

Student Academic Clubs

Student clubs reflect the diversity of interests of the student body and provide a focus for student activity, involvement, and development. The Student Nurses' Association at the College provides leadership for the nursing student body. SNA elections for officers are held each spring.

How to Schedule Make-Up Tests

If make-up testing is sought through the Testing Center, the student will be notified by the faculty that the test has been received by the Testing Center and should then schedule a make-up test within the allotted time frame. Please follow the complete instructions located on the Student Services website at: Student Services: Make-Up Testing). The Test Proctoring Center can be found on the 1st floor of the Student Services Center (SS 115-117).

If the student qualified for SAS assistance, you would still need to arrange with your instructor by what date you will need to take the exam.

Trajecsys

This new online product will be launched in Fall, 2024. Trajecsys is a tool for tracking and archiving clinical hours completion, skills practice, clinical evaluation forms, and other related documentation. You will be introduced and oriented to Trajecsys during your first few weeks in the program. To learn how register for your account, view this <u>webinar tutorial</u>:

Reference Letters for Students

Students requesting reference letters for scholarships and employment must give the faculty member a minimum of one week's notice. The request should be made in writing and include all the necessary information for the faculty member to complete the letter. Only two letters of reference for each graduating senior will be written.

Remember that your performance and conduct will dictate what is written. The letter is a product of your clinical evaluation, your class work, and your activities in the Program. For example, if you had no absenteeism and wrote excellent nursing care plans, the faculty member could praise these qualities. If the opposite were true, the faculty member could not speak highly of you for attendance or care planning. Your clinical performance in responsibility and accountability, communication, planning and implementing care, performing skills, and leadership/management become crucial pieces in letters of reference.

Student Representatives in Nursing Department Governance

Student Nurses' Association

The Student Nurses' Association at the College plays an active role in the program, providing leadership for the nursing student body. In the past, the SNA improved the equity and inclusion of the RN program through the creation of the Equity Team and distribution of their quarterly Equity Team Newsletter, raised funds for the Pinning ceremony and scholarships to 1st year students, and aided student participation in community projects and services. Please contact the SNA officers (see Welcome Letter) for more information on how you can get involved with the SNA.

Student/Faculty Forum Meetings

Twice each semester, students and faculty meet to discuss matters pertaining to the program, process improvements, accomplishments, and future directions. This is a terrific opportunity for students and faculty to come together to better understand the nursing program experience from multiple perspectives, as well as to share ideas and exchange information.

Students in Department Governance

The nursing faculty feel it is essential for students to participate in the decision-making process regarding curriculum, regulations, and procedures of the Department Nursing. We support this participation by requesting student volunteers to serve on faculty work groups. Faculty welcome the opportunity to formally share information and learn the students' perspective on specific issues.

What are the benefits of serving as a student representative?

By serving as a student representative, you will develop leadership and management skills in working with faculty and your peers. You will learn how to give and receive feedback about your education and can initiate change. The title of Student Representative can also be added to your resume. Faculty letters of recommendation may note your contribution as a representative. The program appreciates the valuable participation and input of student representatives at program meetings.

In the Fall, two students will be selected by their peers to serve as student representatives on Faculty and work groups. Faculty meetings are held once a month. Students can alternate attendance so that at least one representative from the first year and second year class attends every meeting. These representatives are responsible for gathering information from their peers regarding student concerns and requests, and for bringing this information to the appropriate committee. The student representatives then report back to their classmates on the meeting's outcome.

The representative should function to bring group concerns to the attention of the faculty member(s). If a student has individual concerns, they are expected to approach the faculty member concerned.

After student representatives are selected in the Fall, an orientation meeting will be held to clarify any questions. Students will receive a schedule of all meetings to sign-up for available dates. Meeting minutes will be made available electronically and posted on Canvas or in a shared drive.

COLLEGE OF MARIN

Registered Nursing Program

*ACCOUNTABILITY CONTRACT WITH STUDENT

The RN Student Handbook has been read and understood. I intend to comply with all the nursing regulations and requirements listed in this Handbook and any future changes in the Program policies that may be made. Failure to comply will result in disciplinary measures.

I understand that this RN Student Handbook is subject to change at any time. I also understand and agree that my clinical schedule may change due to rotation assignment or clinical facility/faculty availability.

Name Print _____

Name Signature_____

Date_____

*Please sign and date this page online at www.trajecsys.com