Dr. Lakireddy
School of Health Sciences

MERCED
COLLEGE

Registered Nursing

Student Handbook

The content of this handbook may be subject to change throughout the program. Any updates/changes will be communicated via Canvas or printed materials.

Revised: July 2022

Table of Contents

Welcome to Merced College Registered Nursing Program

All of us at Merced College welcome you to nursing and extend congratulations on your being selected for the program. The college faculty, staff, and affiliating healthcare facilities will seek to provide the foundations of education and experience in nursing to meet your needs and the needs of the community. We wish you success in the program and are here to assist you in pursuing this valuable profession.

This handbook is designed to serve as an informational guide in the orientation of new students. It clarifies policies and procedures governing the practice of students in the Registered Nursing Program. This handbook is to be used as a supplement to the Registered Nursing Application Handbook, Merced College Catalog and all RN course syllabi.

The content of this handbook may be subject to change throughout the program. Any updates/changes will be communicated via Canvas or printed materials.

The Allied Health Faculty and Staff are listed below and available for assistance.

Registered Nursing Faculty	Phone	Office Number	Email
Lauren Marson, Director	384-6124	AHC – 117	lauren.marson@mccd.edu
Kitty Cazares	384-6386	AHC – 102	cazares.k@mccd.edu
Jessica Carroll	384-6307	AHC – 103	jessica.carroll@mccd.edu
Lindsay Roe	384-6211	AHC – 109	lindsaychristineroe@mccd.edu
Sharon Brown	386-6750	AHC – 110	sharon.brown@mccd.edu
Jie Zhou	381-6408	AHC – 107	jie.zhou@mccd.edu
Dr. Wanda Schindler	384-6128	AHC – 108	wanda.schindler@mccd.edu
Dan Smith	384-6127	AHC – 101	smith.da@mccd.edu
Dean of Instruction (Area 4) Valerie Albano	386-6730	AHC – 121	valerie.albano@mccd.edu
Student Success Instructors Dr. Wanda Schindler			
Allied Health Office Staff Norma DeLaTorre, Area Admin. Coordinator		AHC – 126	delatorre.n@mccd.edu
Morgan Fisher, Program Assistant			morgan.fisher@mccd.edu
Guidance and Counseling Staff Rosalie Kekahuna, Program Assist.	Lesher Building 2nd Floor		kekahuna.r@mccd.edu
Margaret Salas, Office Technician			margaret.salas@mccd.edu

AHC Counselors - Contact (209) 381-6478 or email **ecounselor@mccd.edu** to make an appointment.

Sabrina Frias	384-6096	L-206	sabrina.frias@mccd.edu
Cindy Hardcastle	384-6270	L-219	cindy.hardcastle@mccd.edu
Susan Helfgott	381-6504	L-212a	helfgott.s@mccd.edu
Sutara Lor	384-6049	L-216	lor.s@mccd.edu
Gina Vang	384-6050	L-218	gina.vang1@mccd.edu

Nursing Program Philosophy

The Registered Nursing Program Faculty believe in the importance of incorporating professional standards, guidelines, and competencies as the basis for the nursing curriculum. The program must reflect current nursing practice. To this end, a rigorous and thorough examination of the current literature on nursing practice and nursing education was conducted. These findings guided the development of the program student learning outcomes. Additionally, faculty examined the current healthcare environment in the Merced area. The program student learning outcomes, along with their related competencies, reflect the expected behaviors of the graduates of Merced's Nursing Program. Therefore, these program student learning outcomes are used to organize the curriculum, and guide all activities related to the teaching/learning process, including delivery of instruction and evaluation of student progress. The six student program learning outcomes are:

1. Provide quality, safe, patient-centered nursing care through evidence-based practice.
2. Participate in collaborative relationships with members of the interdisciplinary team to provide and improve patient care.
3. Engage in critical thinking skills and strategies and clinical reasoning necessary to provide quality patient care.
4. Provide leadership in a variety of healthcare settings for diverse patient populations.
5. Use information technology to communicate, manage knowledge, mitigate error, and support decision-making.
6. Function as a competent nurse assimilating all professional, ethical, and legal principles.

Definitions

Caring: In nursing, those values, attitudes, and behaviors that engender feeling cared for by recipients. "Clinical caring processes are relationship-centered and incorporate physical acts, being with (interacting), connecting, and knowing another" (Duffy, 2005, p. 61).

Clinical judgment: A process of observing, interpreting, responding, and reflecting situated within and emerging from the nurse's knowledge and perspective (Tanner, 2006).

Collaboration: "Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care." (Quality and Safety Education for Nurses [QSEN], 2007). Collaboration also includes communication and partnerships with providers, patients, families, and stakeholders.

Critical thinking: "Identifying, evaluating, and using evidence to guide decision making by means of logic and re-reasoning" (NLN, 2010, p. 67).

Diversity: "Recognizing differences among persons, ideas, values, and ethnicities, while affirming the uniqueness of each (NLN, 2010, p. 12).

Ethics: "Involves reflective consideration of personal, societal, and professional values, principles, and codes that shape nursing practice. Ethical decision making requires applying an inclusive, holistic, systematic process for identifying and synthesizing moral issues in health care and nursing practice, and for acting as moral agents in caring for patients, families, communities, societies, populations, and organizations. Ethics in nursing integrates knowledge with human caring and compassion, while respecting the dignity, self-determination, and worth of all persons" (NLN, 2010, p. 13).

Evidence-based care: Care that integrates the best research with clinical expertise and patient values for optimum care (IOM, 2003). Evidence is used in making decisions while patient preferences and the context of the individual patient refers to the judicious use of that evidence (Von Achterberg, Schoonhoven & Grol, 2008).

Healthcare environment: the aggregate of surrounding things, conditions, or influences; surroundings; milieu (dictionary.com). In healthcare, nurses turn the environment into a caring and healing environment by initiating and sustaining a therapeutic relationship with patients and their families (Koloroutis, 2004).

Holism: "The culture of human caring in nursing and heath care that affirms the human person as the synergy of unique and complex attributes, values, and behaviors, influenced by that individual's environment, social norms, cultural values, physical characteristics, experiences, religious beliefs and practices, and moral and ethical constructs, within the context of a wellness-illness continuum" (NLN, 2010, p. 14).

Human flourishing: "An effort to achieve self-actualization and fulfillment within the context of a larger community of individuals, each with the right to pursue his or her own such efforts. The process of achieving human flourishing is a lifelong existential journey of hope, regret, loss, illness, suffering, and achievement. Human flourishing encompasses the uniqueness, dignity, diversity, freedom, happiness, and holistic well-being of the individual within the larger family, community, and population. The nurse helps the individual in efforts to reclaim or develop new pathways toward human flourishing." (NLN, 2010, p. 66-67).

Informatics: The use of information and technology to communicate, manage knowledge, mitigate error, and support decision making (Quality and Safety Education for Nurses [QSEN], 2007).

Information management: Can be defined as "the processes whereby nursing data, information, knowledge, and wisdom are collected, stored, processed, communicated, and used to support healthcare delivery" (Nelson, 2010).

Integrity: "Representing the dignity and moral wholeness of every person without conditions or limitation" (NLN, 2010, p. 13).

Knowledge, skills, and attitudes: In nursing education there are three domains of learning in which faculty engage students. The cognitive domain represents the knowledge needed to carry out the professional roles of the nurse. The skills are the psychomotor activities that are represented by the psychomotor domain. Attitudes represent the beliefs and values about all aspects of the patient and health care that represent the affective domain. The content of each domain is equally important and necessary for the student to fulfill the roles of the professional nurse.

Leadership: Leadership is Standard 15 of the American Nurses Association's Scope and Standards of Practice. Leadership is defined and evaluated with the following measurement criteria related to the student nurse:
- Engages in teamwork as a team player and a team builder.
- Works to create and maintain healthy work environments in local, regional, national, or international communities.
- Displays the ability to define a clear vision, the associated goals, and a plan to implement and measure progress.
- Demonstrates a commitment to continuous, lifelong learning for self and others.
- Teaches others to succeed by mentoring and other strategies.
- Exhibits creativity and flexibility through times of change.
- Demonstrates energy, excitement, and a passion for quality work.
- Willingly accepts mistakes by self and others, thereby creating a culture in which risk-taking is not only safe, but expected.
- Inspires loyalty through valuing of people as the most precious asset in an organization.
- Directs the coordination of care across settings and among caregivers, including oversight of licensed and unlicensed personnel in any assigned or delegated tasks.
- Promotes advancement of the profession through participation in professional organizations. (American Nurses Association [ANA], 2004, p. 44).

Nursing judgment: "Encompasses three processes: namely, critical thinking, clinical judgment, and integration of best evidence into practice. Nurses must employ those processes as they make decisions about clinical care, the development and application of research and the broader dissemination of insights and research findings to the community, and management and resource allocation" (NLN, 2010, p. 67).

Patient: The recipient of nursing care which may be individuals, families, groups, communities, or population (American Association of Colleges of Nursing [AACN], 2008).

Patient-centered care: Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs (Quality and Safety Education for Nurses [QSEN], 2007).

Personal and professional development: "A lifelong process of learning, refining, and integrating values and behaviors that (a) are consistent with the profession's history, goals, and codes of ethics; (b) serve to distinguish the practice of nurses from that of other health care providers; and (c) give nurses the courage needed to continually improve the care of patients, families, and communities and to ensure the profession's ongoing viability" (NLN, 2010, p. 68).

Professional identity: "Involves the internalization of core values and perspectives recognized as integral to the art and science of nursing. These core values become self-evident as the nurse learns, gains experience, and grows in the profession. The nurse embraces these fundamental values in every aspect of practice while working to improve patient outcomes and promote the ideals of the nursing profession. Professional identity is evidence in the lived experience of the nurse, in his or her ways of being, knowing, and doing" (NLN, 2010, p. 68).

Quality improvement: "Use 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" (Quality and Safety Education for Nurses [QSEN], 2007). Also relates to the improvement of healthcare processes and at the local, state, and federal levels to affect positive outcomes from the impact of economics on healthcare quality.

Safety: Minimizes risk of harm to patients and providers through both system effectiveness and individual performance (Quality and Safety Education for Nurses [QSEN], 2007).

Aggregate Program Outcomes

To measure success, the Merced ADN Program expects to attain the following aggregate program outcomes:

1. Eighty percent of students will complete the program within 150% of the length of the program.

2. The pass rate of first-time NCLEX-RN° test takers will be at or above the national mean. Eighty percent of graduates will be working in a Registered Nurse position or enrolled in a higher degree nursing program within one year after graduation. Eighty percent of graduates surveyed will report satisfied or very satisfied with the education they received in Merced's Nursing Program.

3. Eighty percent of employers surveyed will report they agree or strongly agree the education new graduates received at the Merced College Registered Nursing (RN) Program provided them with the knowledge, skills, and aptitudes to perform well on initial employment.

Program Goals

The Program Goals of the Merced Nursing Program reflect the mission of the program and align with those of Merced College and include:

1. Obtain licensure to practice as a Registered Nurse through successful completion of the NCLEX-RN® Examination.

2. Function as a beginning nurse in acute, intermediate, long-term, ambulatory healthcare settings.

3. Utilize best practies as the foundation for the delivery of health care to the patient family.

4. Contribute to quality improvement of health care to support quality, safe, patient-centered nursing care.

5. Incorporate lifelong professional and personal development as part of one's identiy as a nurse.

Program Student Learning Outcomes

Faculty believes in the importance of incorporating professional standards, guidelines, and competencies as the basis for the nursing curriculum. The program must reflect current nursing practice. To this end, a rigorous and thorough examination of the current literature on nursing practice and nursing education was conducted. These findings guided the development of the program student learning outcomes. Additionally, faculty examined the current healthcare environment in the Merced area. The program student learning outcomes, along with their related competencies, reflect the expected behaviors of the graduates of Merced's Nursing Program. Therefore, these program student learning outcomes are used to organize the curriculum, and guide all activities related to the teaching/learning process, including delivery of instruction and evaluation of student progress. The six student program learning outcomes are:

1. Provide quality, safe, patient-centered nursing care through evidence-based practice.
2. Participate in collaborative relationships with members of the interdisciplinary team to provide and improve patient care.
3. Engage in critical thinking skills and strategies and clinical reasoning necessary to provide quality patient care.
4. Provide leadership in a variety of healthcare settings for diverse patient populations.
5. Use information technology to communicate, manage knowledge, mitigate error, and support decision-making.
6. Function as a competent nurse assimilating all professional, ethical, and legal principles.

The documentation from which these program student learning outcomes flow, is presented in the next section.

The Program Student Learning Outcomes align with Institutional Student Learning Outcomes as follows:
1. Provide quality, safe, patient-centered nursing care through evidence-based practice. **Merced College outcome related to cognition: Assess the impact of science and technology on the world. Patient-centered relates to Merced College's outcome related to Global & Community Consciousness: Distinguish and understand diverse cultures.**
2. Participate in collaborative relationships with members of the interdisciplinary team to provide and improve patient care. **Merced College outcome related to communication such as: Read and analyze written communication appropriate to the subject and Comprehend, analyze, and utilize aural and visual communication in its various modes.**
3. Engage in critical thinking skills and strategies and clinical reasoning necessary to provide quality patient care. **Merced College outcome related to Use Critical thinking skills to analyze, synthesize, and evaluate ideas and information.**
4. Provide leadership in a variety of healthcare settings for diverse patient populations. **Merced College outcome related to Personal development and life-long learning: Demonstrate self-management, maturity, and growth through practices that promote physical, mental, and emotional well-being, such as: Analyze and apply interpersonal skills.**
5. Use information technology to communicate, manage knowledge, mitigate error, and support decision-making. **Merced College outcome related to communication such as: Comprehend, analyze, and utilize aural and visual communication in its various modes.**
6. Function as a competent nurse assimilating all professional, ethical, and legal principles. **Merced College outcome related to Personal development and life-long learning: Demonstrate self-management, maturity, and growth through practices that promote physical, mental, and emotional well-being, such as: Demonstrate an understanding of life-long learning (professional principle) and Evaluate and adhere to professional and ethical standards.**

Sequencing of Courses
The program is designed to culminate in these student learning outcomes. Therefore, each course is leveled based on these outcomes as well as populations of patients. The sequencing of courses reflects higher cognitive levels, a different patient population, and/or more complexity in patient care provided in a variety of healthcare settings. Patricia Benner's Model of Novice to Expert is used in the development of the professional nurse. Courses build to assist students with their journey to advanced beginner by graduation, prepared to become competent nurses as they experience their first two years of practice (Benner, Tanner, & Chesla, 2009).

Current trends in nursing and health care as well as traditional standards and values of nursing practice influenced the choice of these six program student learning outcomes. Following is an explanation of the specific current trends and traditional standards and values used to develop the program student learning outcomes.

Documentation for Development of Program Student Learning Outcomes

1. Provide quality, safe, patient-centered nursing care through evidence-based practice.

   This outcome focuses on the many aspects of the nurse/patient relationship and integrates the work of the QSEN group derived from the IOM studies (Finkelman & Kenner, 2009). Safety is a major concept and is based on QSEN.org documentation as well as the NCSBN's *Nursing Pathways for Patient Safety* (2010). The importance of patient-centered care is addressed by the Institute of Medicine (2010) stating that many systems are designed to meet the needs of providers. "True patient- and family-centered care will focus on the whole patient, putting the patient, family, and care team together as a system" (p. 16). This outcome also relates to two of NLN's Competencies for ADN graduates (2010): "Advocate for patients and families in ways that promote their self-determination, integrity, and ongoing growth as human beings" (p. 33), and "Implement one's role as a nurse in ways that reflect.....a nurse committed to evidence-based practice, caring, and advocacy, and safe, quality care for diverse patients within a family and community context (p. 35). This outcome also embraces the major categories of content presented in the NCLEX-RN° test plan. The ANA's (2010 *Nursing: Scope and Standards of Practice* are applied when planning quality, patient-centered nursing care.

   Major concepts for this learning outcome include:
- The nursing process (assessment, diagnosis, goals/outcome criteria, interventions, and evaluation)
- Patient teaching
- Patient-centered care
- Evidence-based practice
- Quality measures
- Caring
- Safety
- NCLEX-RN° categories and their subcategories:
  - Safe and effective care environment
  - Health promotion and maintenance
  - Psychosocial integrity
  - Physiological integrity

2. Participate in collaborative relationships with members of the interdisciplinary team to provide and improve patient care.

   The importance of collaboration is emphasized in the work of the QSEN group derived from the IOM studies (Finkelman & Kenner, 2009) with the competencies of Teamwork and Collaboration. The QSEN and IOM competencies of Quality Improvement and Patient-Centered Care also relate to this outcome. This outcome incorporates NLN's 2010 definition of teamwork: "to function effectively within nursing and interprofessional teams, fostering open communication, mutual respect, and shared decision making to achieve quality care" (p. 69).

   The silo approach to care in which each professional works in parallel is no longer acceptable in the current healthcare environment. Health professionals must "cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable" (IOM, 2003, p. 4). Additionally, the Institute of Medicine (2010) notes that 60 to 70% of adverse events happening to patients in the acute care setting can be traced to problems with communication. Some of those problems stem from disruptive behavior by both nurses and physicians.

   This program student learning outcome addresses the nurse's role in working with other healthcare professionals to plan and implement care and quality improvement measures. The importance of the broader context of a systems approach to care rather than the narrower nurse/patient relationship as the primary focus of the work environment is imperative for meeting the quality improvement competency for this outcome (Day & Smith, 2007).

   Major concepts for this learning outcome include:
- Patient-centered care
- Teamwork/collaboration
- Quality improvement
- Levels of the work environment:
  - The larger healthcare system
  - Clinical microsystems
  - Nurse/patient relationship

3. **Engage in critical thinking skills and strategies and clinical reasoning necessary to provide quality patient care.**

Critical thinking is a broad term that encompasses all the thought processes that relate to clinical decision making and clinical reasoning. It is part of the term NLN (2010) defines as nursing judgment which encompasses three processes: critical thinking, clinical judgment, and integration of best evidence into practice (p. 67). The National Council of State Boards of Nursing (NCSBN) identified critical thinking as the number two attribute for entry level RNs (NCSBN, 2006). Critical thinking is evidenced not only by the student's use of the nursing process, but also when interfacing with the clinical microsystem and the larger healthcare system to deliver quality, safe, patient-centered care. This outcome also relates to two of NLN's Competencies for ADN graduates (2010): "Make judgments in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care and promote the health of patients within a family and community context" (p. 34) and "Examine the evidence that underlies clinical nursing practice to challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for patients, families, and communities" (p. 36).

Major concepts for this learning outcome include:
- Critical thinking
- Clinical decision making
- Clinical judgment
- Integration of best evidence
- Nursing process

4. **Provide leadership in a variety of healthcare settings for diverse patient populations.**

This outcome focuses on the core component of Leadership. Leadership is comprehensive and includes managing care, delegating to others, integrating and coordinating care, investigating and sharing best practice guidelines, and serving as a leader in many capacities within the healthcare environment. Another major component under leadership derives from the Quality and Safety Education in Nursing (QSEN) (2007) competency, Quality Improvement. Quality improvement refers to the use of data to monitor the outcomes of care processes and the use of improvement methods to design and test changes to continuously improve the quality and safety of healthcare systems (Smith, Cronenwett, & Sherwood, 2007). This outcome also relates to two of NLN's Competencies for ADN graduates (2010): "Advocate for patients and families in ways that promote their self-determination, integrity, and ongoing growth as human beings" (p. 33), and "Implement one's role as a nurse in ways that reflect integrity, responsibility, ethical practices and evolving identity.....for diverse patients within a family and community context" (p. 35).

Major concepts for this learning outcome include:
- Management of care
- Delegation
- Leadership
- Quality improvement
- Human flourishing

5. **Use information technology to communicate, manage knowledge, mitigate error, and support decision-making.**

Traditionally, communication referred to engaging in verbal and written exchange of information. More recently it also includes using information and communication technologies. Knowledge and use of information systems and nursing informatics in health care mandates that students learn about new technologies. This program student learning outcome is a specific competency recommended by QSEN. Knowledge of informatics is also recommended by the NLN in their 2008 position statement *Preparing the Next Generation of Nurses to Practice in a Technology-Rich Environment: An Informatics Agenda*. In this position paper the NLN called for nursing schools to incorporate informatics into the curriculum.

Major concepts for this learning outcome include:
- Information systems
- Nursing informatics
- Information technology

6. **Function as a competent nurse assimilating all professional, ethical, and legal principles.**

The general term professionalism is used to include all professional, ethical, and legal principles to guide the practice of the registered nurse. The foundation for this program student learning outcome flows from two American Nurses Association documents, *Nursing: Scope and Standards of Practice* and *The ANA Code of Ethics* as well as the *California Board of Registered Nursing's Nurse Practice Act*. This outcome also relates to one of NLN's Competencies for ADN graduates (2010): "Implement 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" (p. 35). Personal and professional development is part of this competency which includes lifelong learning.

Major concepts for this learning outcome include:
- Professionalism
- Ethical behavior
- Legal principles
- Standards of practice
- Personal and professional development

References

American Nurses Association [ANA] (2008). *Guide to the code of ethics for nurses*. Silver Spring, MD: Author.

American Nurses Association [ANA] (2010). *Nursing: Scope and standards of practice*. (2nd ed.). Silver Spring, MD: Author.

American Nurses Association [ANA] (2010). *Nursing's social policy statement: The essence of the profession*. Silver Spring, MD: Author.

Benner, P., Malloch., K., & Sheets, V. (2010). *Nursing pathways for patient safety.* St. Louis: Mosby & NCSBN.

Benner, P., Tanner, C., & Chesla, C. (2009). *Expertise in nursing practice: Caring, clinical judgment, and ethics*. (2nd ed.). Springer: New York.

Cronenwett, L., Sherwood, G., Barnsteiner J., Disch, J., Johnson, J., Mitchell, P., Taylor Sullivan, D., & Warren, J. (2007). Quality and safety education for nurses. *Nursing Outlook, 55*(3),122-131.

Day, L., & Smith, E. L. (2007). Integrating quality and safety content into clinical teaching in the acute care setting. *Nursing Outlook, 55*(3), 138-143.

Duffy, J. (2005). Want to graduate nurses who care? Assessing nursing students' caring competencies. In M. H. Oermann & K. T. Heinrich, (Eds.), *Annual review of nursing education, Vol. 3*, (pp. 59-76). New York: Springer.

Finkelman, A. & Kenner, C. (2009). *Teaching IOM: Implications of the Institute of Medicine Reports for nursing education*. (2nd ed.). Silver Spring, MD: American Nurses Association.

Felver, L. et. al. (2010). *Best practices in teaching and learning in nursing education*. New York: National League for Nursing.

Institute of Medicine of the National Academies. (2010). *The future of nursing: Leading change, advancing health* (Prepublication copy). Washington, DC: Author.

Institute of Medicine of the National Academies. (2010). Acute care: A summary of the October 2009 *forum on the future of nursing.* Washington, DC: Author.

Institute of Medicine (2003). *Crossing the quality chasm.* Washington, DC: National Academies Press.

Institute of Medicine (2010). *A summary of the October 2009 forum on the future of nursing: Acute care.* Washington, DC: National Academies Press.

Ironside, P. M., & McNelis, A. M. (2009). *Clinical education in prelicensure nursing programs: Results from an NLN national survey*. New York: National League for Nursing.

Koloroutis, M. (Ed.) (2004). *Relationship-based care: A model for transforming practice*. Minneapolis: Creative Health Care Management.

National Council of State Boards of Nursing (2010). *NCLEX-RN detailed test blueprint.* Chicago: Author.

National Council of State Boards of Nursing (2006). NCSBN Annual Meeting. Chicago: Author.

National League for Nursing. (2010). *Outcomes and competencies for graduates of practical/vocational, diploma, associate degree, baccalaureate, master's, practice doctorate, and research doctorate programs in nursing*. New York: Author.

Nelson, R. (2010). Nursing informatics: Educational implications. In L. Caputi, (Ed.). *Teaching nursing: The art and science* (2nd ed.). Glen Ellyn, IL: College of DuPage Press.

Quality and Safety Education for Nurses [QSEN] (2007). Accessed July 19, 2010 from http://qsen.org/competencydomains/competencies_list.

Sherwood, G., & Drenkard, K. (2007). Quality and safety curricula in nursing education: Matching practice realities. *Nursing Outlook, 55*(3), 151-155.

Smith, E. L., Cronenwett, L., & Sherwood, G. (2007). Current assessments of quality and safety education in nursing. *Nursing Outlook, 55*(3), 132-137.

Tanner, C. A. (2006). Thinking like a nurse: A research-based model of clinical judgment in nursing. *Journal of Nursing Education, 46*(6), 204-211.

Trustees of Dartmouth College (2004). *Clinical microsystem action guide.* Accessed July 19, 2010, from www.clinicalmicrosystem.org.

Von Achterberg, T., Schoonhoven, L., & Grol, R. (2008). Nursing implementation science: How evidence-based nursing requires evidence-based implementation. *Journal of Nursing Scholarship, 40* (4), 302-310.

Registered Nursing Associate in Science Degree Curriculum

All individuals who meet minimum enrollment requirements are eligible to apply to the nursing programs. Criteria and complete information on the selection process as well as the philosophy and objectives of each program are described in the Nursing Application Handbook which is available online. The handbook is extensive and may contain additional information to the following brief program outline.

Completion of the Registered Nursing Program at Merced College and all requirements of the A.S. degree qualify students to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN). (It is the student's responsibility to meet all requirements to sit for the NCLEX-RN exam.)
Mission Statement

The mission of the Merced College Registered Nursing Program is to prepare our students for careers as professional Registered Nurses by providing a continually-improving educational program which is accredited by the CA Board of Registered Nursing and instilling in our students a commitment to continued professional growth and lifelong learning.

Merced College Vision:

Merced College will provide transformative and empowering educational experiences to meet student and community needs.

Merced College Mission:

Growing our community through education and workforce training:

- lifelong learning
- basic skills
- career technical education
- transfer
- degree/certificate programs

Ensuring student success through equitable access, continuous quality improvement, institutional, and student achievement.

Nursing, Registered
The Registered Nursing Program at Merced College prepares students to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN), leading to licensure as a Registered Nurse (RN) and is designed to prepare competent nurses for service in the community. The Registered Nursing Program requires two academic years beyond the completion of the prerequisite courses and non-Nursing breadth requirements. Graduates will earn the Associate of Science Degree upon completion of designated courses and competency requirements.

Associate of Science Degree Program Requirements

ENGL-01A	College Composition and Reading **OR** ENGL-13/PHIL-13/H Critical Reasoning and Writing
BIOL-16*	General Human Anatomy
BIOL-18*	Principles of Physiology
BIOL-20*	Microbiology
MATH-C	MATH-C or MATH-62 or MATH-61 or equivalent or higher level Math course.

Program Requirements:

Required courses (non-nursing) which also fulfil A.S. Breadth requirements: (9 Units)

COMM-01 Fundamentals of Speech..3

or

COMM-01H Honors fundamentals of Speech (3)

or

COMM-04 Small Group Discussion & Problem Solving (3)

or

COMM-05 Interpersonal Communication (3)

SOC-01 Introduction to Sociology..3

or

SOC-02 Contemporary Social Problems (3)

or

SOC-03 Marriage and the Family (3)

or

ANTH-02 Sociocultural Anthropology (3)

PSYC-01A Introduction to Psychology..3

or

PSYC-01AH Honors Introduction to Psychology (3)

or

PSYC-09 Human Development (3)

or

CLDV-09 Human Development (3)

Note: Students are encouraged to meet with a counselor to ensure all other graduation breadth requirements have been met to complete an AS

Required courses (nursing): 41 units

First Semester

REGN-15	Foundations of Nursing	9
REGN-18	Pharmacology In Nursing Practice	3

Second Semester

REGN-24	Acute Medical/Surgical and Nursing of the Childbearing Family	10

Third Semester

REGN-34	Advanced Medical/Surgical Nursing and Pediatric Nursing	10

Fourth Semester

REGN-44	Acute Medical/Surgical Nursing and Mental Health Nursing	9

Units towards the Major...41
Prerequisite for Admission:...19-20
Additional BRN Requirement.. 3
Completion of MCCD-GE Breadth pattern 23
Double Counting ....(15)
Total units 71-72

Competencies as required by Merced College for graduation:
Writing: Met by completion of ENGL-01A within program prerequisites.
Math: Met by MATH-C or higher level math course.
Reading: Met by completion of A.S. Breadth courses with "C" grade or better.

Competencies as required by Merced College for graduation:
Writing: Met by completion of ENGL-01A within program prerequisites.

Math: Met by MATH-C or MATH-62 or MATH-61 or equivalent or higher level Math course.
Reading: Met by completion of A.S. Breadth courses with "C" grade or better.

Course Descriptions

Registered Nursing 15: Foundations of Nursing
4 hours lecture, 15 hours skills lab/clinical
REGN-15 (Foundations of Nursing) focuses on foundational concepts necessary for safe, patient-centered nursing care to a diverse patient population while integrating legal and ethical responsibilities of the nurse. Introduces critical thinking applied to nursing, the nursing process, diversity, and communication techniques used when interacting with patients and members of the interdisciplinary team, and applies evidence-based nursing practice. Includes acquisition of basic nursing skills. Application of knowledge and skills occurs in the nursing skills laboratory and a variety of acute and long-term care clinical settings.

Registered Nursing 15 Course Outcomes
1. Provide quality, safe, patient-centered nursing care at the basic level.
2. Identify the nurse's role in collaborative relationships with members of the interdisciplinary team.
3. Demonstrate critical thinking/clinical reasoning when providing basic nursing care to patients from diverse backgrounds.
4. Identify the role of leadership for the purpose of providing and improving patient care.
5. Identify simple examples of information management and how they are used in the clinical environment.
6. Explain how professional standards, and legal and ethical principles apply to safe, quality, patient-centered nursing care.

Registered Nursing 15 Topical Outline
1. Fundamental concepts of quality, safe, patient-centered, evidence-based nursing care
2. Collaboration and communication techniques in nursing practice
3. Critical thinking and clinical reasoning applied to nursing practice
4. Introduction to leadership and management concepts/principles
5. Introduction to information technology
6. Introduction to professionalism and standards of practice

Registered Nursing 18: Pharmacology in Nursing Practice
3 hours lecture
REGN-18, Pharmacology in Nursing Practice, presents an overview of the basic principles of pharmacology including major drug classifications and prototypes. Principles of medication administration include all aspects of best practice for safe, quality, patient-centered care including developmentally and culturally appropriate interventions. Includes dosage calculations.

Registered Nursing 18 Course Outcomes
1. Describe the theoretical basis of pharmacology to safe care of patients incorporating developmentally and culturally appropriate interventions.
2. Describe how the nurse uses knowledge of all aspects of medications to promote desired patient outcomes.
3. Plan nursing care for patients for quality patient outcomes related to the administration of medications including the use of technology and resources.
4. Analyze the collaborative role of the nurse to improve patient outcomes related to medication administration.
5. Correctly compute dosages when preparing and administering pharmacologic agents.
6. Demonstrate safe preparation and administration of medications.

Registered Nursing 18 Topical Outline
1. General principles of pharmacology
2. The nurse's role in medication administration
3. Calculating dosages
4. Safe medication practices
5. Medication classifications and prototype medications and their uses

Registered Nursing 24: Acute Medical/Surgical and Nursing of the Childbearing Family
5 hours lecture, 15 hours skills lab/clinical
REGN-24 provides for the acquisition and application of nursing theory, communication, collaboration, and critical thinking skills necessary for safe, patient-centered nursing care to a developmentally and culturally diverse patient population experiencing various common medical/surgical interventions and to the childbearing family. Incorporates best practices, professional standards, and legal and ethical responsibilities of the professional nurse as applied in various healthcare settings. Includes acquisition of nursing skills required in acute care and childbearing family settings. Application of knowledge and skills occurs in the nursing skills laboratory and clinical settings.

Registered Nursing 24 Course Outcomes
1. Apply medical/surgical and childbearing family nursing concepts to plan patient-centered, evidence-based care taking into consideration individual differences, developmental level, and culture.
2. Identify the collaborative role of the nurse when working with the interdisciplinary team when caring for the childbearing family and patients requiring medical/surgical interventions.
3. Demonstrate critical thinking/clinical reasoning when caring for the childbearing family and patients requiring medical/surgical interventions.
4. Implement basic leadership concepts for the purpose of providing and improving care for the childbearing family and patients requiring medical/surgical interventions.
5. Use information technology to document care for the childbearing family and patients requiring medical/surgical interventions.
6. Identify ways in which professional standards of legal and ethical conduct apply to safe, quality, patient-centered care for the childbearing family and patients requiring medical/surgical interventions.

Topical Outline
1. Concepts of quality, safe, patient-centered, evidence-based nursing care for the medical-surgical patient and the childbearing family.
2. Collaboration and communication techniques in nursing practice on the medical-surgical and the maternal/child units.
3. Critical thinking and clinical reasoning applied to nursing practice in the care of medical-surgical patients and the childbearing family.
4. Leadership and management concepts/principles when caring for medical-surgical patients and the childbearing family.
5. Introduction to information technology for safe patient care on the medical-surgical and the maternal/child units.
6. Professionalism and medical-surgical and maternal/child standards of practice.

Registered Nursing 34: Advanced Medical/Surgical Nursing and Pediatric Nursing
5 hours lecture, 15 hours skills lab/clinical
REGN-34 builds on REGN-24, focusing on complex medical/surgical conditions of the adult patient and common pediatric conditions. Builds on nursing theory, communication, collaboration, and critical thinking skills necessary for safe, patient-centered nursing care to developmentally and culturally diverse adult and pediatric patient populations. Incorporates best practices, professional standards, and legal and ethical responsibilities of the professional nurse as applied in the acute care and pediatric settings. Includes acquisition of nursing skills required in the acute care and pediatric settings. Application of knowledge and skills occurs in the nursing skills laboratory and clinical settings.

Registered Nursing 34 Course Outcomes
1. Apply medical/surgical nursing concepts to plan patient-centered, evidence-based care to pediatric patients and patients with complex medical/surgical conditions taking into consideration individual differences, developmental level, and culture.
2. Engage in collaboration with members of the interdisciplinary team when caring for pediatric patients and patients with complex medical/surgical conditions.
3. Demonstrate critical thinking and clinical reasoning when addressing patient care issues for pediatric patients and patients with complex medical/surgical conditions.
4. Differentiate various roles of leadership and how they impact patient care and quality improvement for pediatric patients and patients with complex medical/surgical conditions.
5. Demonstrate ways information technology can be used to increase safety and quality when caring for pediatric patients and patients with complex medical/surgical conditions.

6. Interpret ways in which professional standards of legal and ethical conduct are required for safe, quality care of pediatric patients and patients with complex medical/surgical conditions.

Topical Outline
1. Concepts of quality, safe, patient-centered, evidence-based nursing care for pediatric patients and patients with complex medical/surgical conditions.
2. Collaboration and communication techniques in nursing practice in the care of pediatric patients and patients with complex medical/surgical conditions.
3. Critical thinking and clinical reasoning applied to nursing practice in the care of pediatric patients and patients with complex medical/surgical conditions.
4. Leadership and management concepts/principles when caring for pediatric patients and patients with complex medical/surgical conditions.
5. Introduction to information technology for safe care of pediatric patients and patients with complex medical/surgical conditions.
6. Professionalism and medical-surgical and pediatric standards of practice.

Registered Nursing 44: Acute Medical/Surgical Nursing and Mental Health Nursing
4 hours lecture, 15 hours skills lab/clinical

REGN- 44 builds on REGN-34, focusing on complex medical/surgical conditions of the high acuity patient and the patient at various levels of mental health promotion and mental illness management. Builds on nursing theory, communication, collaboration, and critical thinking skills necessary for safe, patient-centered nursing care to developmentally and culturally diverse patient populations. Incorporates best practices, professional standards, and legal and ethical responsibilities of the professional nurse as applied in the acute care and mental health settings incorporating all aspects of the professional nurse. Application of knowledge and skills occurs in the acute care and community settings to facilitate an effective transition from student to registered nurse.

Registered Nursing 44 Course Outcomes
1. Provide patient-centered, evidence-based care taking into consideration individual differences, developmental level, and culture for high acuity patients and patients requiring various levels of mental health promotion and mental illness management.
2. Participate in collaborative relationships with members of the interdisciplinary team when caring for patients requiring high acuity medical/surgical interventions and patients requiring interventions for mental health promotion and mental illness management.
3. Engage in critical thinking/clinical reasoning when providing care for patients requiring high acuity medical/surgical interventions and patients requiring interventions for mental health promotion and mental illness management.
4. Provide leadership in a variety of healthcare settings for patients requiring high acuity medical/surgical interventions and patients requiring interventions for mental health promotion and mental illness management.
5. Use information technology when caring for patients requiring high acuity medical/surgical interventions and patients requiring interventions for mental health promotion and mental illness management to communicate, manage knowledge, mitigate error, and support decision-making.
6. Function as a competent nurse assimilating all professional standards of legal and ethical conduct when providing care for patients requiring high acuity medical/surgical interventions and patients requiring interventions for mental health promotion and mental illness management.

Topical Outline
1. Concepts of quality, safe, patient-centered, evidence-based nursing care for patients requiring high acuity medical/surgical interventions and patients requiring interventions for mental health promotion and mental illness management.
2. Collaboration and communication techniques in nursing practice on the psychiatric/mental health and medical/surgical units.
3. Critical thinking and clinical reasoning applied to nursing practice in the care of patients requiring high acuity medical/surgical interventions and patients requiring interventions for mental health promotion and mental illness management.
4. Leadership and management concepts/principles when caring for patients requiring high acuity medical/surgical interventions and patients requiring interventions for mental health promotion and mental illness management.
5. Information technology for safe patient care on the psychiatric/mental health and medical/surgical units.

6. Professionalism and psychiatric/mental health standards of practice.

Registered Nursing 01: Transition LVN to RN
1 hour lecture, 3 hours lab/clinical
(Total of 18 hours lecture & 54 hours lab during a 9 week schedule)
REGN-01 is a series of lectures and discussions that provides the concepts and principles necessary to facilitate the transition of the Licensed Vocational Nurse to the changing role of the Registered Nurse. Incorporates best practices, professional standards, and legal and ethical responsibilities of the professional nurse as applied in various healthcare settings. Emphasis will be placed upon the registered nurse as a decision-making member of the healthcare team and the responsibilities to be assumed by such a practitioner.

Registered Nursing 01 Course Outcomes
1. Complete a patient care plan that is based on evidence-based practice and takes into consideration individual differences, developmental level, and cultural considerations.
2. Demonstrate clinical skills that a registered nurse would perform, including intravenous medication administration, initiation of an intravenous access, sterile procedure and injections.
3. Identify the collaborative role of the nurse when working with the interdisciplinary team.
4. Use information technology to document care for patients requiring medical/surgical interventions.
5. Identify ways in which professional standards of legal and ethical conduct apply to safe, quality, patient-centered care for the patients requiring medical/surgical interventions.

Topical Outline
1. Concepts of quality, safe, patient-centered, evidence-based nursing care for the medical-surgical patient.
2. Collaboration and communication techniques in nursing practice on the medical-surgical units.
3. Critical thinking and clinical reasoning applied to nursing practice in the care of medical-surgical patients.
4. Leadership and management concepts/principles when caring for medical-surgical patients.
5. Introduction to information technology for safe patient care on the medical-surgical units.
6. Professionalism in medical-surgical standards of practice.

Registered Nursing 02: Clinical Skills Transition
3 hours lab/clinical
(Total of 54p hours by arrangement during a 9 week schedule. Students are scheduled for five, 10 hour clinical days).
REGN-02 consists of practice in the clinical setting with the skills and principles necessary to facilitate the transition of the Licensed Vocational Nurse to the changing role of the Registered Nurse. Emphasis is placed on nursing skills related to first year RN nursing concepts in clinical practice.

Registered Nursing 02 Course Outcomes
1. Provide quality, safe, patient-centered nursing care through evidence-based practice.
2. Collaborate with members of the interdisciplinary team to provide and improve patient care.
3. Engage in critical thinking skills and strategies and clinical reasoning necessary to provide quality patient care.
4. Provide leadership in a variety of healthcare settings for diverse patient populations.
5. Use information technology to communicate, manage knowledge, mitigate error, and support decision-making.
6. Function as a competent nurse assimilating all professional, ethical, and legal principles.

Topical Outline
1. Concepts of quality, safe, patient-centered, evidence-based nursing care for the medical-surgical patient.
2. Collaboration and communication techniques in nursing practice on the medical-surgical units.
3. Critical thinking and clinical reasoning applied to nursing practice in the care of medical-surgical patients.
4. Leadership and management concepts/principles when caring for medical-surgical patients.
5. Implementation of information technology for safe patient care on the medical-surgical units.
6. Professionalism in medical-surgical standards of practice.

Pre-assessment Testing Requirement

Students applying to the RN Program must pass an assessment test. For the March 2021 application period, we accept TEAS V or the new ATI TEAS. Currently, a minimum composite score of 62 "first-time testing" is needed to be eligible for applying to the RN Program. This criteria is based upon statistics collected regarding the "likelihood of success"* correlated to "first-time" passing scores.

For student(s) who do not meet the minimum score in one or more sections of the ATI TEAS (even though the minimum composite score was met)—the student will meet with the Success Coordinator to create a remediation plan.

> **NOTE:** It is the student's responsibility to complete the remediation plan by the end of one year from acceptance to the program. If the student does not complete the remediation plan by the date outlined, the student will be placed into the probationary process (see page 28 for specifics).

*AB 548

Accommodations for Examinees with Disabilities

According to the U.S. Department of Education's Section 504 of the Rehabilitation Act of 1973, a student with a disability may be defined as any individual who:

    i.   Has a physical or mental impairment which substantially limits one or more major life activities;
   ii.   Has a record of such an impairments, or
  iii.   Is regarded as having such impairment.

American Disabilities Act
If you have a verifiable physical, medical, psychological, learning or other disability or perhaps you feel you may have one of these disabilities that impact your ability to carry out assigned course work, please contact the Disabled Students Program & Services (DSPS) office. DSPS staff will review your needs and determine what accommodations are necessary and appropriate. All information and documentation is confidential. In Merced, DSPS is located in the Lesher Student Services Building, Room 234, phone (209) 384-6155. In Los Baños, DSPS is located in Building A, phone (209) 381-6423.

Skills Check-off in Skills Booklet

The Skills Check-off Booklet has been revised to expand its usage in both Skills Lab and Clinical. The booklet will be used both in skills Lab and Clinical.

Skills will be checked off in the Lab, dated, and instructor initialed.

When the student demonstrates proficiency in the clinical area, the instructor will initial and date the skill.

Note: Proficiency is determined by the instructor, not the number of times a skill is observed. When the student reaches clinical proficiency, he/she will then be able to perform the skill without Instructor supervision but will need Team Leader permission. If the Team Leader is not available, the Instructor is to be paged as the back-up.

Any approved skill done by the student must follow the same criteria as if the instructor was present, e.g. three checks and all rights are done for meds, etc. All Facility Policy and Procedures must be followed and it is the student's responsibility to be aware of the criteria.

The instructor retains the right to request supervision of any skill previously signed off.

Merced College
Associate of Science

Registered Nursing

Skills Checklists

MERCED COLLEGE

Revised: April 2019

First Semester Skills

Medication administration and tube feedings may not be performed independently as an extern until proficient in clinical.

Skills	Lab	Clinical Performance Dates	Clinical Proficiency	Extern
*Abdominal Binder –L				
Ambulation (gait belt) - 2				
*Bed making—L				
*Blood Glucose testing—1				
Catheter Condom Application				
Catheter DC-1				
Cather Indwelling Insertion				
Documentation: ADL/Graphics—1				
Documentation: I & O—1				
*Elastic bandages, slings—L				
Enemas—2				

* = Must be marked as proficient prior to mid-semester clinical eval.
+ = Must be marked proficient prior to end of semester clinical eval.

7

Instructional outcomes will focus on delivering safe, therapeutic, effective patient-centered care; practicing evidence-based practice; working as part of interdisciplinary teams; focusing on quality improvement; and using information technology, California Nurse Practice Act, Section 1426(d).

General Information

Student Self-Evaluation of Course-Clinical Objectives

The student is responsible for their ongoing self-evaluation of the course. Clinical Course objectives and grading criteria are provided at the beginning of the semester. Students are expected to keep track of their ongoing grades and average. The student is encouraged to meet with the theory instructor if their grade is below or near the passing standard.

The student will also self-evaluate the ability to meet clinical objectives each semester. This self-evaluation is documented on the semester Clinical Evaluation form and the results discussed with the instructor(s) at mid-term and the final clinical evaluation conference.

Student Evaluation of Instructor and Course

Students are encouraged to complete Theory and Clinical Evaluations at the end of each course. The process is anonymous; however, it would be of assistance to the faculty if students would discuss the evaluation results. The evaluations should be objective and based on facts as perceived by the student. The evaluations should provide both positive and negative comments and suggestions. The faculty values student input as constructive data to assist them in providing continued quality education in the RN program.

Faculty

Each faculty member is available to answer questions or talk over concerns during posted office hours or by appointment. Nursing faculty responsibilities include, but are not limited to:

- Teaching and evaluating nursing students in class, laboratory, and clinical settings.

- Updating and developing curriculum materials and maintaining necessary attendance, scholastic, and personnel records.

- Evaluating nursing curricula as related to the philosophy and objectives.

Non-enrolled Persons, Children in Classrooms

Attendance in the classroom is limited to those registered in the class, unless specifically invited to do so by the instructor of the class. Students are advised to make adequate arrangements including emergency arrangements for child care. Children **may not** be brought to the classroom.

Telephones in Classroom

It is mandatory that students turn off the volume on any electronic devices while in the classroom. These items cause disruption to the entire class. If it is necessary to bring these devices into class, the vibrating mode must be utilized. Text messaging is not allowed during class time.

During testing periods, electronic devices need to be on "silent mode" or turned off and cannot be accessed.

Recorders in Classrooms

Recording by any electronic device is not allowed in the classroom without instructor permission. Confidentiality must be maintained to protect client information as well as that shared by fellow students. Should taping of lectures be required due to a verified learning disability, arrangements are to be made with the instructor.

CPR

Students must be CPR certified with AED component from the American Heart Association. The card will read: Health Care Provider, BLS Provider, or Professional Rescuer. It is the student's responsibility to maintain current certification.

Background Checks and Drug Testing

Students will be required to complete background checks prior to entering first semester. If anything is discovered that is not acceptable to the facility, the student will not be allowed to enter or remain in the Nursing Program. The cost of the background check will be the responsibility of the student. Before the Psychiatric rotation in 4th semester, students will be required to complete a Live Scan Background Check (fingerprinting). Results of this background check may take 4 – 6 months. If anything is discovered that is not acceptable to the facility, the instructor will attempt to secure alternative clinical experiences that meet content objectives. If this is not possible, the student will be unable to complete the course/program. Certain facilities also require drug testing. A positive result may keep a student out of the facility and out of the Nursing Program. A current social security number and California Driver's License or ID is required.

Immunity Status

Students must upload their PPD test results to American DataBank (**ABD**) annually for TB clearance. If the PPD has been positive in the past, a Negative X-ray report must be uploaded. Students must also submit to **ABD** proof of adequate Rubeola, Rubella, Mumps and Varicella titers, or immunization. Routine immunizations such as MMR, Tetanus, and Polio are required for the student's protection as well as the protection of patients. In addition, facilities require a flu vaccination during flu season and also must be uploaded through **ABD**. A face mask may be required for a student to wear in the clinical setting if they refuse a flu vaccination during the high-risk flu season.

As a student in an Allied Health Program, you have an increased risk of contracting Hepatitis B, which can lead to a very serious illness. Prior to entering the clinical experience, students will be required to specify, in writing, their Hepatitis B vaccine status. Hepatitis Notice, Vaccine Status, and waiver of liability is contained in the appendix. It should be noted that a clinical facility has the right to refuse a student clinical assignment if the student has not been immunized. Students are also asked to sign a "Hold Harmless Form" acknowledging the potential for infectious exposure, and releasing Merced College of any responsibility. **It is the students' responsibility to keep "Updates" current in ABD or the student will be removed from their clinical rotation.**

Transportation

Due to the rural nature of our area, various health care facilities located within and outside of Merced County are utilized. Each student is expected to provide his/her own means of transportation.

Physical and Mental Health

A student must be in an optimal physical and mental condition in the clinical area to ensure the safe and effective care of patients. The Registered Nursing Program supports the American Disabilities Act and endorses the "Core Performance Standards" as adopted from the Southern Council on Collegiate Education for Nursing. If a student believes that they cannot meet one or more of these standards without accommodation or modifications, they may request appropriate assistance and guidance. The Registered Nursing Program will determine, on an individual basis, whether or not the necessary accommodations or modifications can reasonably be made. See Appendix.

Sexual Misconduct

Merced College is committed to a safe and productive learning environment. Merced Community College District and Title IX policy prohibit sexual misconduct which includes sexual assault, sexual harassment, domestic or dating violence, and stalking. For more information on community resources, prevention information, and reporting options proceed to our website http://www.mccd.edu/safety/save/index.html.

Core Performance Standards

Issue	Standard	Examples of Necessary Activities (Not All Inclusive)
Critical Thinking	Critical thinking ability for effective clinical reasoning and clinical judgment consistent with level of education preparation.	Identify case-effect relationship in clinical situations. Use of the scientific method in the development of patient care plans. Evaluation of the effectiveness of nursing interventions.
Professional Relationships	Interpersonal skills sufficient for professional interactions with a diverse population of individuals, families and groups.	Establishment of rapport with patients/clients and colleagues. Capacity to engage in successful conflict resolution. Peer accountability.
Communication	Communication adeptness sufficient for verbal and written professional interactions.	Explanation of treatment procedures, initiation of health teaching. Documentation and interpretation of nursing actions and patient/client responses.
Mobility	Physical abilities sufficient for movement from room to room and in small spaces.	Movement about patient's room, work spaces and treatment areas. Administration of rescue procedures – cardiopulmonary resuscitation.
Motor Skills	Gross and fine motor abilities sufficient for providing safe, effective nursing care.	Calibration and use of equipment. Therapeutic positioning of patients.
Hearing	Auditory ability sufficient for monitoring and assessing health needs.	Ability to hear monitoring device alarm and other emergency signals. Ability to discern auscultatory sounds and cries for help.
Visual	Visual ability sufficient for observation and assessment necessary in patient care.	Ability to observe patient's condition and responses to treatment.
Tactile	Tactile ability sufficient for physical assessment.	Ability to palpitate in physical examinations and various therapeutic interventions.

Adapted from: REB Council on Collegiate Education for Nursing. (March, 1993). The Americans with Disabilities

If a student's physical condition or behavior is symptomatic of alcoholism, substance abuse, or emotional illness the instructor has the right and responsibility to remove that student from the patient care area. Before returning to the clinical area, the student will be referred to a Mental Health Counselor, meet with the instructor, the Program Director and/or Dean of Allied Health. At this time a written statement of the incident will be prepared by the instructor; this report may be supplemented with a statement by the student.

Illness

In order to protect patients, peers, and others a student should not report to class or the clinical area if any of the following is present:

1. Fever (anything above normal temperature). This can be the prodromal period and exposure can be infectious.
2. Diarrhea
3. Upper respiratory condition where secretions cannot be managed.
4. Open, draining lesion or skin condition that has potential for harboring or being colonized with pathogenic microorganisms.
5. Anyone with oral herpes lesions may be restricted from working in clinical areas such as nursery or oncology.
6. Conjunctivitis "pink eye" - Restricted from clinical area until 24 hours of antibiotic therapy or if excessive drainage of eyes or redness continues without signs of improvement.
7. Students with casts, splints, or any injury that inhibits movement and interferes with patient safety or student's own safety.
8. The clinical instructor may request a doctor's written release before a student may return. Doctor, dentist, or personal appointments are not to be made during school hours.

Reporting of Absence from Clinical Area

Students are to report to clinical assignments at the time(s) designated on their schedules. The method of reporting lateness or absences will be given by the individual instructor. Not reporting an absence will reflect on clinical evaluation under communication and may interfere with a student's progress in meeting objectives.

Accident or Injury

If a student is injured in any way while in attendance in the clinical area or classroom, the accident must be reported immediately to the instructor. The instructor will contact the 24 hour injury hot line (Company Nurse 877-854-6877) and report the incident. The student will be instructed by the hotline regarding treatment if needed.

Dress, Grooming and Equipment

Dress Code

Nursing is a profession identifiable in part by personal appearance. As a student nurse representing Merced College and the nursing profession, it is expected that students adhere to the following dress code.

Uniform: Merced College ROYAL BLUE dress or ROYAL BLUE pants with Merced College ROYAL BLUE tunic. Male students will wear Merced College ROYAL BLUE tunic with white or black undershirt and ROYAL BLUE pants. Tight fitting or too short clothing is unacceptable. Jeans or stretch pants are not considered uniform pants. Uniforms must be spotlessly clean and pressed and worn only during assigned hospital time or as directed. White or black plain blouse or turtle neck may be worn under the tunic. A ROYAL BLUE jacket with the Merced College emblem may also be worn. The uniforms and emblems are available through the Merced College Bookstore.

Shoes: White professional appearing shoes only. Open-toed sandals, clogs, or canvas shoes are unacceptable. Shoes must be clean and shoe laces washed frequently.

Hosiery: White hosiery is worn with the uniform dress. Knee-high stockings or white socks may be worn with the pant suit.

Mercy Hospital HR highlights the following regarding Professional Attire:

- All tattoos must be covered regardless of their location, size, shape, etc.
- No boots to be worn over a person's pants.
- Badges must be worn above the waist.
- No visible body piercings other than ears.
- Expanders/plugs cannot be larger than ¼ inch.
- Skirts must be at knee length or longer, hosiery must be worn.
- Long sleeves under the scrub tops must be white, black or the same color as the scrub top.
- No extreme hair colors (i.e. – fire engine red).
- Leggings cannot be worn as pants.

Location Specific Attire:

Professional looking street clothes are to be worn at Marie Green Psychiatric Facility, and when researching clinical assignments at any facility. White lab coats are to be worn over professional clothes when researching clinical assignments. Merced Behavioral Health requires the student uniform.

Unacceptable attire includes: jeans, see through blouses, low cut or tight fitting clothing, above knee skirts, high heels, bare legs, open-toed shoes, sleeveless tops, tank-tops, hooded sweatshirts, etc.

Identification: Students are required to wear their **Merced College ID Badge** at all times while in clinical areas.

Grooming

Immaculate grooming and daily personal hygiene are essential due to close proximity to the client and others. Since odors of any kind may be offensive to patients, products with strong odors should be avoided while working in clinical areas (i.e. perfumes, tobacco, etc).

Hair: Hair must be pulled back and <u>controlled</u>, following facility dress code. Only "natural" colors are allowed.

Nail Care: Fingernails must be kept short and clean at all times. Artificial nails are not allowed. Only colorless nail polish is allowed.

Make-up: Subtle make-up in moderation is acceptable.

Jewelry: No Jewelry may be worn except a wedding ring and small earring posts if ears are pierced.

Gum: Gum chewing is not allowed in the clinical area.

Equipment

A watch with a second hand, black pen, bandage scissors, hemostat (Kelly clamp), penlight, and stethoscope are considered necessary equipment for clinical.

Clip-on picture name tags, Merced College ID badges must be worn. These are obtained from the Admissions and Records Department.

Patient Confidentiality

Be aware of your responsibility as well as the legal implications in respecting the rights of others, especially the right to privacy. Confidentiality of patient information must never be violated. HIPPA violations may result in dismissal from the Merced College RN Program.

Professional Behavior

As a student nurse, you are held to the standards of conduct as determined by Merced College Board Policy and the ANA Code of Ethics and the National Student Nurses' Association, Inc. The highest ethical standard is

required by students in the Registered Nursing Program. This includes, but is not limited to, the need for students to have respect for themselves, fellow students, facility, administrators, other professionals and the chain of command. The Merced College RN Program recognizes and embraces the Tri-Council of Nursing "Nursing Civility Proclamation". Read below:

Nursing Civility Proclamation

Tri-Council for Nursing

WHEREAS, the public views nurses as the most ethical and honest profession in the United States.

WHEREAS, overt and covert acts of incivility, disrespect, bullying, and other toxic emotional behaviors have a negative effect on nurses and others including burnout, fatigue, depression, panic attacks, substance abuse, moral distress, among other physiological effects.

WHEREAS, toxic emotional behaviors have a negative effect on organizations including employee engagement and patient satisfaction, clinical quality and patient safety, nursing turnover, and can exacerbate the nursing shortage:

WHEREAS, toxic emotional behaviors contribute to poor communication and teamwork, a leading cause in preventable harm in those who entrust their lives to nurses and other healthcare professionals to care for them.

WHEREAS, nurses are ethically obligated to care for each other and those we provide care to with civility regardless of race, ethnicity, socio-economic status, gender, physical ability, religious affiliation, language, sexual orientation, age, political orientation, veteran status, occupational status, geographical location and any other cultural diversities.

NOW, therefore, be it resolved that we, the Tri-Council for Nursing, do hereby proclaim that Nursing Civility is to be practiced throughout the United States of America to establish healthy work environments that embraces and values cultural diversity, inclusivity, and equity.

We, the Tri-Council for Nursing call upon all nurses to recognize Nursing Civility and take steps to systematically reduce all acts of incivility in their professional practice, workplace environments, and in our communities

American Association of Colleges of Nursing (AACN)
American Nurses Association (ANA)
American Organization of Nurse Executives (AONE)
National League for Nursing (NLN)

Nursing Civility Proclamation   Page 117

Attendance, Course Progression, Graduation Policies

Attendance - Classroom and Clinical

Regular attendance and class participation are expected of all students enrolled in the Merced College Registered Nursing Program. Attendance and participation policies may be included in each semester's syllabi. The student is expected to study all assigned materials prior to class lectures and come prepared to participate in the learning process.

It is expected that students will be on time for theory and clinical. Frequent absenteeism and/or tardiness in clinical, skills lab, or theory may affect the student's ability to meet objectives.

A student who is tardy to theory causes disruption of the class and the student may miss important information. Frequent tardiness may result in disciplinary action such as Mandatory Skills Lab and/or probation.

1) If a student is absent in a theory class, it is their responsibility of obtain notes and handouts from fellow students.
2) Students are required to meet faculty recommendations regarding make-up assignments.
3) Some quizzes may be given at the beginning or end of a class session or be taken home and may not be made up if a student is absent when the quiz is given.

Skills lab hours are critical for meeting clinical objectives and attendance is expected.
Skills Simulation is considered clinical, thus rules related to clinical apply to Skills Simulation.
Clinical rotations allow students to demonstrate clinical skills and apply theoretical concepts during patient care (contextual learning). Therefore, **all** clinical assignments are important in meeting semester objectives. For this reason, any clinical absence can result in the following (at the instructor's discretion):

1) Mandatory Skills Lab attendance
2) Probation
3) Required make-up of clinical hours
4) Written assignment

Students must report absence to clinical instructor as directed on day of absence.
Repeated clinical absences will require the student to meet with faculty and the program director.

Student Evaluation

Clinical evaluation occurs formally, at midterm and at the end of each semester. The RN faculty evaluates the student's clinical application of theory to practice according to stated clinical objectives. Leveled clinical objectives describing expected behaviors are contained in this handbook and in each semester syllabus.

Feedback for clinical evaluation is also given throughout the semester. It may be given verbally, to reinforce positive student outcomes. A Skills Lab/Mandatory Attendance form may be issued to direct students to increase proficiency of a specific skill. An Advisement form may be issued to identify a single deficiency. A Needs Improvement/Learning Experience Plan form may be issued to document faculty observations of a trend in student behavior needing improvement. This form will identify a plan that will facilitate the student to meet the course clinical objectives. It is the student's responsibility to meet clinical objectives, elicit feedback, and promote open communication about progression toward that goal.

Guidelines for satisfactory clinical performance by nursing students are determined in reference to:

1. The particular objectives of the course.
2. The terminal clinical objectives of the semester.
3. The developmental clinical objectives of the program.
4. The Nurse Practice Act of California - Standards of Competent Performance.
5. The American Nurses' Association Code for Nurses.

The process of clinical evaluation is designed to give ample time for students to learn and improve with the hope that probation or more serious action will not be necessary.

Safe Practice

Students who fail to meet the safety standard may have the probation process waived with immediate termination from the program. Readmission will not be allowed to any nursing program at Merced College.

At no time would a student assume responsibility for Nursing care without the knowledge and supervision of their instructor.

There are certain expected behaviors of a Student Nurse throughout the entire RN Program. These areas are: accountability, physical jeopardy, emotional jeopardy, therapeutic communication and asepsis. These basic expectations have been identified to ensure safe practice. Following are areas identified as part of basic practice. Examples are given in each area and are not intended to be all inclusive.

Note: Violations of HIPAA fall under Safe Practice (see Emotional Jeopardy). By signing the Code of Ethics – Confidentiality notice on **ABD**, students agree to the standards of patient confidentiality.

Accountability

Accountability of the student is directed to the concerns and best interests of the client. Accountability includes:

1. Notify the instructor and the agency (when directed to do so) in advance of unavoidable absences.
2. Arriving at the clinical site at the assigned time.
3. Assuming responsibility for care of assigned client.
4. Reporting information about client's care/condition within appropriate time frame.
5. Being accountable for one's own actions.
6. Assuming responsibility for practice of clinical skills in related courses.
7. Being accountable for knowledge/skills acquired in previous related courses.
8. Communicating with staff, instructor and fellow students which contributes to safe practice and learning.
9. Showing evidence of preparation for clinical assignment at the start of clinical practicum.

Physical Jeopardy

Physical jeopardy includes those behaviors that put the client/self at risk of physical injury either by self or others. Critical elements that would protect the client/self from physical jeopardy include:

1. Protecting clients/self by utilizing principles of body mechanics.
2. Safely assisting the disabled client.
3. Leaving bed in low position when care is completed and/or when nurse is not at bedside.
4. Utilizing Agency standard with regard to side rail use.
5. Properly identifying client when beginning care or giving medication.
6. Observing proper use of restraints consistent with Agency standard.
7. Any action or inaction that threatens the client's physical well-being.
8. Following the standards for medication administration and policy of Merced College RN Program.

Emotional Jeopardy

Emotional jeopardy includes those behaviors that would induce or increase emotional stress. Critical elements that would protect the client from emotional jeopardy include:
1. Maintaining confidentiality of all information, utilizing client's records where seen only by authorized personnel in assigned areas.
2. Screening client from view for procedures by closing door to room, drawing curtains, exposing only necessary body parts when giving care, and keeping voice audible only to person being addressed.
3. Any action or inaction that threatens the client's emotional well-being.

Therapeutic Communication

Therapeutic communication focuses on the client, is carried out with sensitivity, respect and emotional concern for others, utilizing techniques and principles of communication.
1. Introducing self to client.
2. Explaining procedures to client and significant others at level of their understanding.
3. Forewarning client when an action may cause discomfort.
4. Utilizing clarification and reflection during client/nurse interactions.
5. Being alert to non-verbal clues from client in the clinical setting.

Asepsis

Asepsis includes those behaviors utilizing either medical or surgical asepsis. Critical elements that would insure client safety in the areas of asepsis include:

1. Protecting client from contamination.
2. Protecting self from contamination
3. Confining contaminated materials to designated area.
4. When a sterile field is required, establishing and maintaining a sterile field for the duration of the procedure.

Students who fail to meet the safety standard and are dismissed from the RN program will not be allowed admission in to any nursing program at Merced College.

Grades

Course grading may evaluate a number of types of learning activities including, but not limited to: examinations, quizzes, portfolio tools, oral presentations, case studies, clinical rounds and skill demonstrations. Grades for individual assignments are determined by the faculty. Any disputes in grades should be addressed to the faculty at the time they are distributed. Grading criteria for each course is contained in the course syllabus and made available to the student at the beginning of the semester. A grade of "C" (75%) or better is required to progress to the next semester. All courses will be graded according to the following scale:

A	-	90-100%	B	-	80-89%
C	-	75-79%	F	-	Below 75%

Clinical and Lab portions of courses are graded on a pass/fail basis. Failure in the clinical or lab portion of the course results in failure of the entire course.

For co-requisite courses – failure in one course will result in a failing grade for the co-requisite course.

Evaluations are a very important tool to assess student progress in the program. The student signature on the evaluation does not imply agreement, but rather indicates that the student has reviewed the evaluation. Students are not required to sign the evaluation, but if they do not, the faculty will duly note such on the form where the signature would have occurred.

Missed Tests

It is the program's policy that late tests will be penalized 5% regardless of the cause. Late tests not completed within **three (3)** class days of the due date may be assessed a 20% penalty, OR, at the discretion of the instructor, not accepted. It is the personal responsibility of the student to notify the instructor giving the test either verbally or by phone, when unable to take the test on the expected due date.

Late test taking must be scheduled with the individual instructor. The test must be taken on the first available day following the exam unless otherwise approved by the Instructor.

Academic Honesty

The occupation of Nursing demands the highest standard of integrity. Students in the Nursing Program are expected to be free of suspicion of dishonest behavior both in the classroom and in the clinical area. **Academic dishonesty can result in dismissal from the program**. Examples of academic dishonesty include, but are not limited to: cheating, plagiarism, collusion, misuse of college computers and software, and other dishonest conduct such as stealing. The Merced College policy for Academic Honest Procedure itemizes faculty and student responsibilities to encourage honesty such as:

Faculty Responsibilities

Faculty members have a responsibility to encourage honesty in their classrooms. In the absence of academic honesty, it is impossible to assign accurate grade and to ensure that honest students are not at a competitive disadvantage. Faculty members are encouraged to do the following:

1. Explain the meaning of academic honesty to their students.
2. Include information about academic honesty in their course syllabi.
3. Conduct their classes in a way that discourages cheating, plagiarism and other dishonest conduct.
4. Confront students suspected of academic dishonesty and take appropriate disciplinary action in a timely manner (see "Procedures for Dealing with Violations of Academic Honesty" which follow.)

Student Responsibilities

Students share the responsibility for maintaining academic honesty. Students are expected to do the following:

1. Refrain from acts of academic dishonesty.
2. Refuse to aid or abet in any form of academic dishonesty.

Procedures for Dealing with Violations of Academic Dishonesty

Action by the Instructor:

1. An instructor who has evidence that an act of academic dishonesty has occurred shall notify the student of such evidence by speaking with the student or notifying the student in writing.

2. AFTER notifying the student(s) and giving them the chance to respond, the instructor may take one or more of the following disciplinary actions:

   a. Issue an oral reprimand and/or give the student an "F" grade, zero points, or a reduced number of points on all or part of a particular paper, project, or examination (for example, in first cases where there is reasonable doubt that the student knew that the action violated the standards of academic honesty.) No report form is necessary.

   b. Give the student an "F" grade, zero points, or a reduced number of points on all or part of a particular paper, project, or examination. A written memo of this action (Use "Academic Dishonesty Report" Form) is to be sent to the Vice-President of Student Services and a copy to the Vice-President of Instruction.*

*NOTE: A grade of "F" assigned to a student for academic dishonesty will not be final if the student chooses to drop the course before the 14th week of the semester. In that case, the student will receive a "W" grade on their transcript.

Guidelines for Problem Resolutions

In order to resolve problems, concerns, or questions the student should first communicate with the individual instructor. If resolution does not occur, the student is encouraged to meet with the RN Program Assistant Director and/or RN Program Director. If students feel further resolution is necessary, they are encouraged to meet with the Allied Health Division Dean.

The procedure for filing a formal Student Grievance and Due Process Procedures is identified in the appendix. Merced College supports the policy of guaranteeing every student the right to grieve or appeal any official action or incident which, in the judgment of the affected student, is unfair or precludes full realization of equal educational opportunities.

Probation Process

Probation is a warning and an indication that changes must occur in performance if the student is to progress satisfactorily in the program. This procedure is a means of identifying student problem(s) in writing, describing what actions have taken place to correct the problem(s), and specifying what changes must occur. Once probation is initiated, conferences and written notations will indicate student progress toward meeting objectives.

Probation will be initiated in response to patterns of behavior/performance which interfere with a student's progress in meeting objectives. Examples are but not limited to: absences that prevent meeting clinical objectives, incomplete assignments, lack of preparation for clinical practice, inability to apply theory to clinical practice, lack of accountability, not calling in to an agency when ill, inadequate communication compromising patient safety, or not arranging for make-up assignments.

Probation can occur at any time in the program when these or similar problems arise. Probation length depends on the types of problem(s) and on the resolution of problem(s).

The student will not be able to work as an Extern while on probation.
Probation Process:
1. Student meets with the instructor. Problem areas are identified and a plan for improvement is established within a time line.
2. Lack of progress toward improvement will result in the student being placed on probation. The student meets with the faculty team and the Program Director and/or Assistant Director. Problem areas are discussed, documented, and a written plan for remediation initiated.
3. Regular conferences and written notations will take place and indicate progress toward objectives.
4. If a team review of all available information indicates a lack of progress, within the given time frame, recommendation regarding retention will be made by the faculty.
5. Together, the faculty and the RN Program Director will review the recommendations and make a decision regarding dismissal. The decision or summary of the conference will be written.
6. Repeated instances of probation will result in dismissal from the program.
7. If a team review of all available information indicates progress, probation status may be removed.

Once a student has been placed on probation, the theory and clinical objectives must be satisfactorily met by the end of the semester. A student must complete the semester with a "C" or better with satisfactory clinical performance in order to progress in the program. **A student on probation is not allowed to extern.**

**Any violations of safety can be grounds for immediate revocation of probation and dismissal from the program.

Readmission Policy & Procedure

1st Semester

A student who withdraws from the program for any reason before successful completion of the first semester must apply as a **NEW** applicant through the RN Application Process. No special consideration will be given. Applicants who are selected and then declined **OR** are not successful completing the first semester may apply again but **WILL NOT** be recognized as a "consecutive" applicant. Applicants may only be accepted to the program a maximum of two times.

First semester students who exit the program due to safety are not eligible to re-apply to the RN program **and are ineligible to apply to any other nursing program at Merced College.

2nd, 3rd, and 4th Semesters

Readmission to the Registered Nursing Program is dependent upon space availability in 2nd, 3rd, and 4th semesters. After a review of written and performance achievement evaluations and/or interview with the teaching team and the Program Director, a decision will be made using the following procedure:

1. A student in good standing who withdraws from the program, regardless of the reason for the drop, may be readmitted one time (with a maximum of <u>one semester absence</u>) by submitting a letter requesting readmission to the RN Program 30 days prior to the semester for which they are applying (based on space availability).

2. Readmission of students who were not in satisfactory standing at the time they withdrew from the program, will be readmitted one time only based upon the following:

   a. Applications must be made <u>within one semester</u> of withdrawal or dismissal.
   b. Submission of evidence and/or demonstration that instructor's written recommendations for readmission (ie. remediation plan) have been satisfactorily fulfilled.
   c. A written and/or performance examination encompassing previous content may be required of previous courses in the RN program.
   d. Available space in course.

3. Students who are repeating a class must meet all of the requirements of that class.

4. If there are more requests for re-admission than space:
   a. Priority will be given to LVN transition students over returning RN students.
   b. Priority will be given to students who complete their remediation plans.

5. For students dismissed for safety considerations, readmission will not be allowed into any Nursing program at Merced College.

Graduation Requirements

1. Upon successful completion of the all the requirements of the Merced College Registered Nursing Program, the student receives the Associate in Science Degree as established by the Board of Governors of the California Community Colleges and Merced Community College. The student is eligible to take the National Council of Registered Nursing Licensure Examination (NCLEX - RN). The BRN (Board of Registered Nursing) recommends that any applicant who has a previous violation that resulted in a fine over $1,000 or any violation that involves alcohol, drugs or child endangerment, begin collecting documentation when accepted into the RN Program. Documentation may include: ticket or violation with peace officer's summary, evidence of payment, remediation or required attendance in a program, and/or evidence of counseling. It is the student's responsibility to submit

this information with their graduation application. The BRN will determine whether to process the application that allows testing or issue of licensing on an individual basis.

2. It is the student's responsibility to begin the graduation application process upon entry into the program. Graduation evaluations must be filled out appropriately and completely. Students are requested to see a counselor for completion of an Educational Plan to ensure that any problems with graduation are alleviated.

3. During the last year of the RN program, students must apply to the Evaluations Office and complete a "Degree Application for Associate of Science." Students must follow Merced College guidelines.

4. The Merced College graduation ceremony is held in May. The College will notify the graduating student of the date, time and location of the ceremony. Provisions are made for the purchase of caps and gowns.

5. The Registered Nursing graduates usually plan a pinning ceremony to celebrate the completion of the Registered Nursing Program. This is a traditional ceremony distinct from the Merced College Graduation ceremony. The purpose of this ceremony is to receive the Merced College Registered Nursing pin in a symbolic ceremony of nursing tradition. The planning process is started during the last year of the program in order to schedule the use of on Campus facilities. All ceremony costs, including music, refreshments, decorations, candles, and photography are shared by the graduating students.

6. Students are encouraged to participate in the Merced College graduation activities as well as the Registered Nursing pinning ceremony.

State Board Applications

1. All third semester students are required to have an updated graduation evaluation in their nursing program file by the end of the 3rd semester.

2. Applications to take the NCLEX Examination for Registered Nurse licensure are to be downloaded from the BRN website and submitted to the BRN 2 weeks prior to expected graduation. The BRN website is: www.rn.ca.gov (Rev Dec. 2016). See instruction below.

   a. Go to www.rn.ca.gov
   b. At the top of the page, click on Click Here For Current Information Regarding Applications
   c. Under Online Exam Application: , go to Click here
   d. Read instructions and create an account to apply online

3. All RN courses and graduation requirements must be successfully completed with at least a "C" (75%) grade before the student can take the licensing exam. No incompletes grades will be accepted.

4. Those students who DID NOT complete all prerequisites or required nursing courses at Merced College are required to verify that transfer course documentation is on file in the Merced College Admissions and Records Office. Only official transcripts from individual schools will be accepted.

5. Read all directions for the exam and for licensure carefully.

6. LVN's have special requirements if they select the "30 Unit Option." These students should check with the Allied Health Office. NOTE: This option is currently unavailable and is going through the curriculum process.

7. LVN's must provide documentation (transcripts and catalog descriptions) for OB content. If no documentation is available, LVN's must complete Challenge criteria for content (see Program Director for specifics).

Student's Rights

A student in the Registered Nursing Program has the right to:

1. Access official educational records directly related to the student.
2. Explanations of entries in the educational records.
3. Challenge contents in the educational records. (Educational Code #7623)
4. Have educational records kept confidential unless the student signs a written consent for release of such information as contained in the records.*
5. A written course schedule, including assignments, expectations, and grading system during the first class session.
6. Be informed of unacceptable performance verbally and by written documentation concerning such performance.
7. Schedule office appointments with instructor(s) for counseling or for assistance (with course work if needed during the work week of the instructor).
8. Fair and impartial treatment. See appendix for Sexual Harassment Policy and Grievance and Due Process Procedures.
9. Confer with the Director of the Registered Nursing Program if in dispute with an instructor about a grade, evaluation, or other problem. (Refer to Fairness and Grievance Procedure).
10. Contact the Board of Registered Nursing regarding an unresolved dispute after completing the college problem resolution process.

*The Board of Registered Nursing and the Board Consultant has the right to inspect the files of the students maintained in the Nursing Department for accreditation purposes.

Students <u>do not</u> have the right to:

1. Retain student status in the Registered Nursing Program without meeting program requirements in terms of academic and clinical performance.
2. Abuse the attendance policy.

Fairness and Grievance Procedure

Nursing Faculty have the authority to deny access to, or exclude a student from, a course, program, or activity on the grounds that the student is failing to meet the requirements of the course, program, or activity. Faculty also has the authority to evaluate the work of students in courses, programs, and activities.

In this context, fairness applies to faculty or administrative actions that are not covered under the college policy on student conduct and that deny students access to classes or activities, or that involve the evaluation of their academic work or performance in a activity. Unfairness with regard to the above has been defined as:

1. Actions which do not treat students equally.

2. Actions which are arbitrary.

3. Actions which are based upon unreasonable or irrelevant standards, rules, policies, or procedures.

The Registered Nursing Program supports the grievance process contained in the Merced College Board Manual, Policy #5530 "Student Grievance Procedures". Prior to initiating the process, the following steps are recommended:

1. The student discusses the issue of concern with the instructor most closely involved. An attempt is made to resolve the conflict.

2. If the matter cannot be resolved through discussion with the instructor, the student may discuss the matter with the Director of the Registered Nursing Program.

3. If the matter requires further attempts at resolution, the student may appeal for assistance from the Dean of the Allied Health, Child Development and Public Safety. The Dean will advise the student about further steps that can be taken to resolve the grievance.

4. Mediation services are available through the Counseling Department.

Legal and Ethical Considerations

Accountability

Accountability has long been one of the hallmarks of a profession. Bergman sees two preconditions required before one can be accountable.

> The basic precondition is to have the ability... to decide and act on a specific issue. One must be given or take, the responsibility to carry out that action. Next, one needs the authority, i.e. formal backing, legal right to carry the responsibility. Then, with the preconditions, one can be accountable for the action one takes. (Bergman, 1981, pp. 54-55.)

This handbook spells out a long list of requirements the student must fulfill, but it's primary purpose is to acquaint the student with the program and its expectations. When the student understands what is expected he/she will be responsible and accountable.

Legal Responsibilities

The instructor must have knowledge of all nursing care the student assumes. The Nurse Practice Act of the State of California clearly defines the limits of care permitted. The student must perform within those guidelines.

The instructor has the legal responsibility to remove the student from the clinical setting if it is determined a student poses a threat to the health and safety of the patient.

"Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content" (California Nurse Practice Act), Section 1425.1 (a)).

A student may render nursing service when it is incidental to the course of study of one of the following:

1. A student enrolled in a Board approved pre-licensure program or school of nursing.
2. A nurse licensed in another state or country taking a Board approved continuing education course or a post-licensure course.

Code of Ethics

Ethics serve as a guideline for the conduct of members of a profession. Established standards, referred to as codes of conduct or codes of ethics, set forth the rules and ordinances used for guidance of the members' professional activity. The faculty supports the following as guiding all program behavior. See appendix for Code of Ethics-Confidentiality Standard to be signed by each student.

Code for Nurses for Nurses
American Nurses Association, 2001

1) The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.

2) The nurse's primary commitment is to the patient, whether an individual, family, group, or community.

3) The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.

4) The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.

5) The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.

6) The nurse participates in establishing, maintaining, and improving healthcare environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.

7) The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.

8) The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.

9) The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

National Student Nurses' Association, Inc.

Code of Academic and Clinical Conduct

Preamble

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments.

The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust with which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

A CODE FOR NURSING STUDENTS

As students are involved in the clinical and academic environments we believe that ethical principles are a necessary guide to professional development. Therefore within these environments we:

1. Advocate for the rights of all clients.
2. Maintain client confidentiality.
3. Take appropriate action to ensure the safety of clients, self, and others.
4. Provide care for the client in a timely, compassionate and professional manner.
5. Communicate client care in a truthful, timely and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
7. Promote excellence in nursing by encouraging lifelong learning and professional development.
8. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
9. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff, and peers to mentor nursing students.
12. Refrain from performing any techniques or procedure for which the student has not been adequately trained.
13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
14. Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorizations are obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or any substance in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain an optimal level of personal health.
17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

Adopted by the NSNA House of Delegates, Nashville, TN on April 6, 2001

Student Support Services

Nursing students are advised to see the current Merced College catalog for more complete descriptions of the following resources available to all enrolled students.

Guidance Services

Guidance services have been developed to meet the special needs of individual students. These include:

1. The Career/Transfer Center provides services to assist individuals in making occupational and educational decisions.
2. Professional counseling services include assistance to students in academic, vocational, personal areas. Referrals for specialized assistance with tutoring, financial aid, interest and aptitude testing, and career decision making, are available.
3. Students with physical, communicative, and/or learning disabilities are encouraged to contact the Disabled Student Services Office where they are provided with services to meet their particular needs.
4. Extended Opportunity Programs and Services (E.O.P.S.) at Merced College is a program for educationally and economically disadvantaged students.
5. Merced College, through a program of scholarship, grants, loans, work-study and part-time job placement, provides financial assistance to students to allow them to pursue and complete their education.
6. Job Placement is a free employment service for currently enrolled students at Merced College.
7. All Merced College students are eligible for Student Health Services which are coordinated through the Student Health Counseling Office.
8. The Tutorial Program offers tutoring in most of the courses offered by Merced College. Individual and group tutoring is provided at no cost to students. Students may obtain assistance in math or writing skills. Tutors from the second year of the nursing program are available to assist first year students.
9. Merced College is approved for training of veterans in connection with Chapters 30, 31, 32, 34, 35, 106, Title 38, United States Code.
10. H.O.P.E (Helping Our Peers Excel) was started in 1992 to recruit and train college students to assist others in dealing with personal issues.

The Learning Resource Center

The Learning Resource Center is situated west of the Allied Health Building. Students and faculty members have available in the library over 40,000 books, together with approximately 200 periodicals and newspaper subscriptions. The library has a current microfilm subscription, extensive back holdings, and an index to the *New York Times*. Students have access to several computer information stations which provide a variety of resources including Internet access. Word processors and 10-cent copy machines are available.

Child Development Center

Child Development Center services are on campus. These services are designed for children of students, staff, and community members. A charge is levied for this service; however, financial assistance is available for qualified students.

Application for National Licensure Examination

Students completing the Associate in Science Degree requirements or the Board of Registered Nursing 30-Unit Option are eligible to apply to take the RN licensure examination. Applications forms are

available online at: www.rn.ca.gov. Students will be offered assistance for completing the forms. Additional information can be accessed at the Board of Registered Nursing website: www.rn.ca.gov.

Scholarships and Financial Assistance

A variety of resources for funding a student's nursing education program are available through the Office of Financial Aid. The office is located in the Administration Building. The deadlines for applying are listed in the college calendar.

Open Skills Laboratory

The Nursing Skills Laboratory is available for student use. Students are encouraged to utilize the laboratory to reinforce and update specific nursing skills. Skill lab supplies, mannequins, equipment, videos, resource textbooks, and computer assisted instruction programs and instructor assistance are available during the posted skills lab hours.

Student Health Services

Students are eligible for Student Health Services coordinated through the Student Health Services Office. A complete listing of the services provided can be found on the Merced College website.

http://www.mccd.edu/resources/health/index.html

Helpful Hints from Peers

DO:

1. Learn to laugh at yourself and exercise increased humor under stress.
2. Talk it over with someone. Seek out a close friend to have an intimate conversation. If needed, utilize the counselors in the Guidance office.
3. Place stress in a favorable context by viewing it as an opportunity.
4. Work off anger by physical exercise.
5. Recognize the value of continued exercise. The higher the amount of stress, emphasize competitive sports which demand more concentration after school.
6. Make it a point to brighten someone else's day by providing a helping hand or positive praise.
7. Analyze where the stress is coming from: job, school, home, family, community obligations.
8. Regulate your environment.
9. Place problems in priority and tackle the most important first.
10. Work on the toughest priorities when mentally at your peak during the day.
11. Recognize that life is not a "bowl of cherries" - trouble, disappointment, pressure, and failure are all part of life.
12. Retreat from problems temporarily with some new type of relaxing diversion: sports, reading, developing a new skill, music, or a movie.
13. Seek out opportunities to commune with nature. Experience the natural wonders.
14. Learn how to say "NO" tactfully.
15. Analyze what makes you happy.
16. Schedule your reading.
17. Note any consistent pattern of pain or sickness during stressful situations.
18. Learn to relax by using relaxation techniques.
19. Learn ways to compliment yourself and be your own best friend.
20. Get a good night's sleep.

DON'T:

1. Establish unrealistic goals.
2. Fall behind on your reading/viewing assignments.
3. Take on more than you can handle, i.e., extra work hours.
4. Cram the night before an exam.
5. Load up on caffeine and/or sugar before a test.

Adapted with permission from Evergreen Valley College Nursing Program, San Jose, CA.

Pinning Ceremony

Pinning Ceremony Information

Why a Pinning Ceremony?

The pinning of a future Registered Nurse is a symbolic gesture of welcome into the profession of Nursing. Wearing the Merced College Nursing pin allows all of our Nursing alumni to proudly identify with each other as well as acknowledging the privilege of having succeeded in the Merced College's Registered Nursing program. It is important that through the pin and the uniform, the pinning ceremony represents the profession's ideology and the community's means of identifying the nurse. The ceremony has far-reaching significance for the graduates, faculty, college, Nursing alumni, community and the profession of Nursing. All aspects of this ceremony represent the highest standard of professionalism for Nursing.

Pinning Ceremony and Reception:

The Pinning Ceremony includes the Pinning and Reception on campus. This does not include a dinner or party at other locations. Any events outside the ceremony and campus reception must be planned and supported outside of regular class times.

All students must wear white uniforms (dresses or pants for women) and white clinical shoes (no exceptions).

Getting Started

At the beginning of each semester, the members of the graduating class are to meet with the RN Faculty. This meeting should take place by the third week of the semester. The Instructors, in conjunction with the RN Program Assistant Director, will arrange for the date by reserving the Merced College Theater for practice and the pinning ceremony. If the Staff Dining Room is to be utilized for the reception, class officers are to coordinate with the RN Program Assistant Director to schedule/reserve this space.

The pinning ceremony has some areas that are voted on by students. These include:

1. Nursing caps (all or none)
2. Type of refreshments (if any)
3. Speakers (class, guest or both)
4. Music
5. Decorations
6. Invitations
7. Campus Reception

Responsibilities/Assignments

The following should be assigned to one or more graduates:

1. Facilities
2. Donations/Fund Raising: students are expected to send thank you letters for graduation donations
3. Invitations
4. Decorations/Flowers
5. Photographer
6. Programs
7. Speakers
8. Refreshments
9. Clean-up
10. Music

Fundraising

To offset graduation costs (theater rental, printing of invitations/programs, decorations, luncheons, or reception costs), students **may** decide as a group to collect dues and/or to fundraise. Any monies collected will be deposited into the classes' foundation account at Merced College. Contact the Allied Health Secretary or RN Program Director regarding the creation of a Foundation account.

All monies deposited into a RN Foundation account are to be spent on the graduation ceremony. Any funds remaining in the account after all expenses are paid can be designated as follows:

- Donated to a future RN class graduation fund.
- Donated toward a RN scholarship.
- Purchase a gift for the college (i.e. plaques, benches, planting a tree).

No monies will be distributed to individuals EXCEPT when being reimbursed for graduation ceremony costs (need original receipts – the Allied Health office staff will help create/submit PO's).

Invitations

Formal invitations are to be selected and voted on by the class. It is required that invitations be sent to individuals of the college community (see list below). Therefore the students are responsible for ordering enough invitations for both the students and the college community.

Students will coordinate with the Allied Health office for the printing of invitations and programs (**500** of each will need to be ordered). Students **must** provide the paper and envelopes. The Allied Health office will cover the cost of printing.

District Board of Trustees	Program Faculty and Staff
President of College	Allied Health Faculty and Staff
Vice President of Administrative Services	Adjunct Faculty and Clinical Assistants
Vice President of Student Personnel	Significant Community Members
Vice President of Instruction	Allied Health Counselors
Dean of Instruction	Learning Resource Director
Dean of Students	Hospital Clinical Sites
Director of Nursing at Hospital Sites	Merced County Public Health

Class Pins

Students <u>may</u> purchase Merced College pins individually from the College Bookstore. It is recommended that this is done eight weeks before graduation to ensure arrival before graduation.

Pinning Ceremony Guidelines (Areas <u>NOT</u> voted on by students)

1. The nursing students at their pinning ceremony will wear the traditional white nursing uniforms. This includes white clinical shoes. **This is mandatory and not optional**. Dresses will be at the knee or mid-calf. Jewelry should be conservative, similar to clinical dress code.

2. A graduation program contains:
   a. Processional
   b. Welcome–RN Director
   c. Introduction of Faculty, guests and significant community members present (by the Director of Nursing)
   e. Music (optional)
   f. Speaker(s)
   g. Pinning
   h. Music (optional)
   i. Recessional

3. The RN Program Director and the Faculty will provide advice and counsel regarding the final copy of the proposed program and class speaker's speech.

4. Only students who have completed all of the nursing program courses successfully and who meet the dress code will participate in the program.

5. Nursing students need to send thank you letters for graduation donations.

Board Policy

3430

Administrative Procedures

5530 & 5540

Book - Board Policies
Section - 3000 - General Institutional Policies
Title - Prohibition of Harassment
Code - 3430
Status - Active

Legal
Education Code Sections 212.5;
Education Code Sections 44100;
Education Code Sections 66252;
Education Code Section 66281.5;
Government Code Section 12923;
Government Code Sections 12940;
Government Code Section 12950.1;
Civil Code Section 51.9;
Title 2 Sections 10500 et seq.;
Title VII of the Civil Rights Act of 1964, 42 U.S. Code Annotated Section 2000e;
Age Discrimination in Employment Act of 1967 (ADEA);
Americans with Disabilities Act of 1990 (ADA)

Adopted - January 18, 2005

Last Revised - November 10, 2020

Last Reviewed - October 8, 2020

Prior Revised Dates - 07/09/2019

All forms of harassment are contrary to basic standards of conduct between individuals. State and federal law and this policy prohibit harassment, and the District will not tolerate harassment. The District is committed to providing an academic and work environment that respects the dignity of individuals and groups. The District shall be free of unlawful harassment, including that which is based on any of the following statuses: race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status, or because he/she/they is perceived to have one or more of the foregoing characteristics.

The District seeks to foster an environment in which all employees, students, unpaid interns, and volunteers feel free to report incidents of harassment without fear of retaliation or reprisal. Therefore, the District also strictly prohibits retaliation against any individual for filing a complaint of harassment or for participating in a harassment investigation. Such conduct is illegal and constitutes a violation of this policy. The District will investigate all allegations of retaliation swiftly and thoroughly. If the District determines that someone has retaliated, it will take all reasonable steps within its power to stop such conduct. Individuals who engage in retaliatory conduct are subject to disciplinary action, up to and including termination or expulsion.

Any student, employee, unpaid intern, or volunteer who believes that he/she/they has been harassed or retaliated against in violation of this policy should immediately report such incidents by following the procedures described in AP 3435 Discrimination and Harassment Complaints and Investigations. The District requires supervisors to report all incidents of harassment and retaliation that come to their attention.

This policy applies to all aspects of the academic environment, including but not limited to classroom conditions, grades, academic standing, employment opportunities, scholarships, recommendations, disciplinary actions, and participation in any community college activity. In addition, this policy applies to all terms and conditions of employment, including but not limited to hiring, placement, promotion, disciplinary action, layoff, recall, transfer, leave of absence, training opportunities and compensation.

To this end the Superintendent/President shall ensure that the institution undertakes education and training activities to counter harassment and to prevent, minimize, or eliminate any hostile environment that impairs access to equal education opportunity or impacts the terms and conditions of employment.

The Superintendent/President shall establish procedures that define harassment on campus. The Superintendent/President shall further establish procedures for employees, students, unpaid interns, volunteers, and other members of the campus community that provide for the investigation and resolution of complaints regarding harassment and discrimination, and procedures to resolve complaints of harassment and discrimination. State and federal law and this policy prohibit retaliatory acts by the District, its employees, students, and agents.

The District will publish and publicize this policy and related written procedures (including the procedure for making complaints) to administrators, faculty, staff, students, unpaid interns, and volunteers particularly when they are new to the institution. The District will make this policy and related written procedures (including the procedure for making complaints) available in all administrative offices and will post them on the District's website.

Employees who violate the policy and procedures may be subject to disciplinary action up to and including termination. Students who violate this policy and related procedures may be subject to disciplinary measures up to and including expulsion. Unpaid interns who violate this policy and related procedures may be subject to disciplinary measure up to and including termination from the internship or other unpaid work experience program.

Book - Administrative Procedures
Section - 5000 - Student Services
Title - Student Rights and Grievances
Code - 5530
Status - Active
Adopted - January 8, 2008
Last Revised - October 13, 2015

When a student feels subjected to unfair action or denied rights as stipulated in published College regulations, policies, or procedures, redress can be sought according to the grievance procedure.

A grievance action may be initiated by the student against any District employee or a fellow student. A grievance may include:
1. Any violation or unfair application of published College regulations, policies, or procedures (not including those prohibiting discrimination, including harassment).
2 One or more acts of, or perceived threat of, harassment or aggression (not including harassment on a protected basis such as sex, race, or disability).
3. Improper or unwarranted imposition of discipline.
4. Fraud, bad faith, or incompetence by an instructor. Simple clerical errors should be corrected in cooperation with the instructor, area dean, and/or Admissions and Records Office as needed.

The following are **not** grounds for use of the student grievance procedure:
1. Complaints of discrimination, including harassment, on the basis of age, sex, sexual orientation, gender, ethnic group identification, race, ancestry, national origin, religion, color, or mental or physical disability, described in College rules and regulations, which shall be resolved by the Office of Human Resources or the appropriate district officer or agency. These complaints shall follow the process and time line identified in the Policy and Procedures for Complaints of Unlawful Discrimination, Administrative Procedure 3430.
2. Student concerns regarding the awarding of grades (except as a result of actions described above as grounds for student grievance), which generally shall be resolved through the Office of Instruction. Complaints of discrimination, including harassment, regarding the awarding of grades shall be resolved under the Policy and Procedures for Complaints of Unlawful Discrimination. *See Board Policy and Administrative Procedure 4231 for more information regarding grade changes.*
3. Local, state, and federal law violations which should be resolved through the appropriate legal action. Campus Police can be contacted for violations that need immediate action.

Allegations of sexual discrimination, including sexual harassment, are to be referred to the Title IX Coordinator who is the District officer responsible for investigation. Allegations of discrimination based on disability are to be referred to the Section 504/ADA Coordinator who is the District officer responsible for investigation. Individuals may also contact and/or file a complaint with:
For issues related to sex, race, disability, or age discrimination:
The Office for Civil Rights, U.S. Department of Education
50 Beale Street, Suite 7200, San Francisco, CA 94105
1-415-486-5555 (voice); 1-415-227-8124 (TTY)

● For issues related to disability:

The U.S. Department of Justice, Civil Rights Division,
Disability Rights section, 950 Pennsylvania Avenue, NW, Washington, D.C. 20530
Telephone: 1-202-514-0301 (voice) or 1-202-514-0383 (TTY)

● For employment issues:

The U.S. Equal Employment Opportunity Commission,
Communications, 1801 L Street N.W., Washington, D.C. 20507
Telephone: 1-800-669-EEOC (voice); 1-800-669-6282 (TTY)

● For accreditation issues:

The Accrediting Commission for Community and Junior Colleges
Western Association of Schools and Colleges
10 Commercial Boulevard, Suite 204
Novato, CA 94949
Telephone: 415-506-0234 ~ Fax: 415-506-0238 ~ Email: accjc@accjc.org

OVERVIEW
There are two phases to the Student Grievance Procedure:
1. Informal Resolution
2. Formal Grievance

1. Informal Resolution
Every attempt should be made to resolve the issue at this level.

43

There are several ways a student can attempt to resolve a complaint, dispute, or disagreement with a faculty/staff member/other student in an informal manner.

The steps below outline in detail the informal resolution process that **a student must follow before filing a formal grievance.** It is expected that in good faith all parties involved will try and resolve the issue at this level.

(1)   The student should attempt to solve his or her complaint, dispute or disagreement by meeting with the faculty/staff member/other student.

(2)   If this is unsuccessful, the student then should meet with the faculty or staff member's supervisor or dean. If the grievance involves another student, contact should be made with the Dean of Student Services.

(3)   At this point during the informal resolution process, any party involved may request the Dean of Student Services to appoint a mediator to assist in resolving the complaint, dispute or disagreement. Mediators are Merced College faculty and/or staff who have been trained in mediation skills. They serve in a neutral role. The mediator shall schedule and facilitate meetings between the parties involved.

(4)   If the student and faculty/staff member/other student are unable to resolve the issue, the student may initiate a formal grievance.

2. Formal Grievance

There are four phases to the Formal Grievance Procedure:

1.   Review by Dean of Student Services
2.   Consideration by Grievance Hearing Committee
3.   Grievance Hearing Committee Decision and Recommendation
4.   The College Superintendent/President's Decision

1.Review by the Dean of Student Services

Not all disputes and disagreements between students and faculty/staff member are grievable. Before a student is granted a formal grievance review, he/she shall submit a *Student Petition for Grievance Review and/or Hearing* to the Dean of Student Services, who will review the petition to determine if a grievable act has occurred in accordance with the Administrative Procedure.

In order for the grievance to proceed to a Grievance Hearing Committee, the Dean must find that the grievance alleges that an instructor, an administrator, a member of the classified professionals, or a fellow student committed one or more of the following acts:

- Any violation or unfair application of published College regulations, policies, or procedures (not including those prohibiting discrimination, including harassment).
- One or more acts of harassment or aggression, or a perceived threat of same (not including harassment on a protected basis such as sex, race, or disability).
- Improper or unwarranted imposition of discipline.
- Fraud, bad faith, or incompetence by an instructor. Simple clerical errors should be corrected in cooperation with the instructor, area dean, and/or Admissions and Records Office as needed.

Note: The faculty/staff member/other student being grieved against will be informed in writing of the Statement of Grievance and may supply a one-page rebuttal, plus supporting documentation or additional information. The rebuttal and five (5) copies must reach the Dean of Student Services the day before the scheduled determination.

If the Dean finds that the grievance alleges an act *other* than the above, the following may occur:

1. The request for a grievance hearing may be rejected because the grievance does not allege a grievable act as defined by the Administrative Procedure.

2. The student may be asked to revise the Statement of Student Grievance to restate the facts to identify a grievable act as defined by the Administrative Procedure.

If the grievance is rejected:

If the grievance is rejected by the Dean of Student Services, the student may appeal in writing to the Vice President of Student Services, who will review the appeal within ten (10) instructional days and will seek the advice of representatives of the Academic Senate and Associated Students of Merced College. No further appeals are possible.

If the grievance is approved:

If the Dean of Student Services finds that the grievance alleges a grievable act as defined by the Administrative Procedure, the Dean will forward the grievance to the Vice President of Student Services.

If the grievance must be revised:

If the student is requested to revise the Statement of Grievance by the Dean of Student Services, he or she must refile with the Dean of Student Services within ten (10) instructional days of receipt of the request. The student should note that this is a revision at the top of the Statement of Grievance form. The Dean of Student Services then will either reject the request for a grievance review or forward the revised grievance to the Vice President of Student Services.

If a student wishes to proceed with the Grievance Hearing, the office of the Vice President of Student Services will arrange for the hearing to commence within twenty (20) regular semester instructional days of the decision of the Grievance Hearing Committee. NOTE: For the purposes of this procedure, regular semester instruction days are considered instruction days during fall and spring semesters.

2. Consideration by Grievance Hearing Committee

If the student's Statement of Grievance is granted a Consideration by Grievance Hearing Committee, the Consideration will proceed as follows:

(a) Each party to the grievance will be permitted to submit a written brief setting forth his or her position as to the outstanding issues relating to the grievance.

(b) Each party to the grievance may submit written statements by relevant witnesses supported by affidavits if such statements tend to prove or disprove any of the outstanding issues relating to the grievance. A copy of each written statement will be forwarded to each party to the grievance. A witness statement form is included in the grievance packet.

(c) The burden shall be on the person filing the grievance to prove by a preponderance of the evidence (i.e. more likely than not) that the facts alleged are true and that his or her grievance should be sustained.

(d) Each party to the grievance shall represent him or herself and shall also have the right to be represented by a person of their choice. The Committee may request that legal counsel advise the Committee as to procedural and legal matters related to the review, but no legal counsel shall be a member of the Committee nor be permitted to sit with the Committee during deliberations.

(e) A copy of all evidence submitted by each party of the grievance shall be maintained. The deliberations of the Committee shall be recorded. All evidence and tapes will be kept in the College Superintendent/President's Office or other location designated by the College Superintendent/President.

The Committee shall review the evidence submitted. The Committee, at its discretion, may interview any member of the College community, including the parties involved in the dispute, in order to reach a decision in this matter. Once the Committee has completed its review and fact-finding activities, it shall issue a decision in the case.

3. The Hearing Committee Decision and Recommendation

The Committee shall reach a decision and make a recommendation based upon only the evidence submitted by the parties to the grievance, and within the parameters set forth by this Administrative Procedure. Within twenty (20) regular semester instructional days following the conclusion of the review, the Committee shall prepare a written Proposed Decision and Recommendation, which it shall submit to the College Superintendent/President with copies to the parties. The Proposed Decision shall contain specific findings on each issue of the grievance, together with the Committee's recommendation for resolving the matter.

4. The College Superintendent/President's Decision

Within ten (10) regular semester instructional days following the Committee's submission of its Proposed Decision and Recommendation to the College Superintendent/President, the parties shall be allowed to submit written objections to the Committee's decision. During this time, the parties to the grievance may review any evidence submitted to the Committee. After consideration of any objections filed, the College Superintendent/President may accept or reject the findings and recommendations of the Committee. However, the College Superintendent/President shall not reject or make substantial modifications to the Committee's decision without review of the record and consultation with the Committee. The decision of the College Superintendent/President shall be final for purposes of these procedures.

<div align="center">

Appendix

</div>

1. **Grievance Hearing Committee composition**
    1. Two students selected by the Vice President of Student Services from a list of not less than five (5) names submitted by the ASMC President with the approval of the ASMC Executive Board.
    2. Two faculty members selected by the Vice President of Student Services from a list of not less than five (5) names submitted by the Academic Senate. If the complaint is against a classified employee, two classified employees will be appointed to the panel in lieu of faculty members.
    3. A member of the college administrative staff selected by the Vice President of Student Services.
    4. No member may serve as a member of the Committee if that person has been directly involved in any matter giving rise to the grievance, made any statement indicating bias in the matter, or otherwise could not act in a neutral manner. The Vice President of Student Services is responsible for removing a member from the committee if either party of the dispute challenges a member for bias and if bias is determined by the Vice President. The Vice President of Student Services must receive any challenges by the parties involved in the grievance to the make-up of the committee in writing at least two (2) instructional days before the scheduled hearing.
2. **Multiple Complaints**

    When there are like complaints against one individual, students may request that the complaint be heard at one hearing. If the Vice President of Student Services notices like complaints against one faculty/staff member, he/she shall ask students if they wish their complaint to be heard as a group.

Merced College
Student Petition for
Grievance Review and/or Hearing

Name of
Petitioner _____
Address _____
Phone _____
Received _____

Date of Grievable
Act _____
OR
Reasonable knowledge that grievable act has occurred.
Date _____
(Must be within twenty (20) instructional days of grievable act.)

Statement of Grievance

A grievance action may be initiated by the student against any District employee or a fellow student. Please select which of the following is the basis for your grievance:

- Any violation or unfair application of published College regulations, policies, or procedures (not including those prohibiting discrimination, including harassment).
- One or more acts of, or perceived threat of, harassment or aggression (not including harassment on a protected basis such as sex, race, or disability).
- Improper or unwarranted imposition of discipline.
- Fraud, bad faith, or incompetence by an instructor. Simple clerical errors should be corrected in cooperation with the instructor, area dean, and/or Admissions and Records Office as needed.

Please complete *only* if you have made revisions to the petition or attached information:
INITIAL _____   **REVISED (Date):**_____

Specific basis for grievance (Add additional information on an attached sheet. Be as concise as possible.)
_____
_____
_____
_____
_____

Specific relief requested:
_____
_____
_____
_____
_____

Witness Statements: Please attach witness statement forms if appropriate.

Please complete *only* if you have made revisions to the petition or attached information:
INITIAL _____   **REVISED (Date):**_____

Witness Statements: Please attach witness statement forms if appropriate.

Witness Statement Form

The witness statements are an important element of the grievance hearing process and will be considered carefully. Statements should be as accurate and concise as possible. The hearing panel may request additional information from a witness if needed.

Name: _____
Mailing Address:_____
Telephone Number: _____
Witness Signature:_____
Date: _____

Statement: If preferred, attach a typed statement to this form.

Adopted 10/13/15

Book - Administrative Procedures
Section - 5000 - Student Services
Title - Academic Honesty Procedure
Code - 5540
Status - Active
Adopted - November 5, 2002

Academic dishonesty is a violation of the Student Code of Conduct and is handled by the Vice-President of Student Personnel.

 Merced College has the responsibility to ensure that grades assigned are indicative of the knowledge and skill level of each student. Acts of academic dishonesty make it impossible to fulfill this responsibility, and they weaken our society. Faculty, students, administrators, and classified professionals share responsibility for ensuring academic honesty in our college community and will make a concerted effort to fulfill the following responsibilities.

FACULTY RESPONSIBILITIES
Faculty have a responsibility to encourage academic honesty in their classrooms. In the absence of academic honesty, it is impossible to assign accurate grades and to ensure that honest students are not at a competitive disadvantage. Faculty members are encouraged to do the following:

1. Explain the meaning of academic honesty to their students.
2. Include information about academic honesty in their course syllabi.
3. Conduct their classes in a way that discourages cheating, plagiarism and other dishonest conduct.
4. Confront students suspected of academic dishonesty and take appropriate disciplinary action in a timely manner (see "Procedures for Dealing with Violations of Academic Honesty" which follow.)

STUDENT RESPONSIBILITIES
Students share the responsibility for maintaining academic honesty. Students are expected to do the following:

1. Refrain from acts of academic dishonesty.
2. Refuse to aid or abet any form of academic dishonesty.

ADMINISTRATIVE RESPONSIBILITIES

1. Disseminate the academic honesty policy and the philosophical principles   upon which it is based to faculty, students, and staff.
2. Provide facilities, class enrollments, and/or support personnel which make it practical for faculty and students to discourage cheating, plagiarism and other dishonest conduct.
3. Provide appropriate software and technology to identify students who have borrowed or downloaded essays and have claimed them as their own.
4. Support faculty and students in their efforts to maintain academic honesty.

CLASSIFIED PROFESSIONALS RESPONSIBILITIES

1. Support faculty, students, and administration in their efforts to make cheating, plagiarism and other dishonest conduct nearly impossible.
2. Notify instructors and/or appropriate administrators about observed incidents of academic dishonesty.

EXAMPLES OF VIOLATIONS OF ACADEMIC HONESTY

Academic dishonesty includes cheating, plagiarism, collusion, misuse of college computers and software, and other dishonest conduct as outlined below. It is not limited to the following examples:

CHEATING

1. Obtaining information from another student during an examination.
2. Communicating information to another student during an examination.
3. Knowingly allowing another student to copy one's work.
4. Offering another person's work as one's own. This would include downloading essays from the Internet or using another student's work from a disk.
5. Taking an examination for another student or having someone take an examination for oneself.
6. Sharing answers for a take-home examination unless specifically authorized by the instructor.
7. Using unauthorized materials (such as notes or "cheat sheets") or unauthorized equipment (such as dictionaries or calculators) during an examination.
8. Altering a graded examination or assignment and returning it for additional credit.
9. Having another person or a company do the research and/or writing of an assigned paper or report.
10. Misreporting or altering the data in laboratory or research projects.

PLAGIARISM

1.	Purposefully presenting as one's own the ideas, words, or creative product of another.
2.	Carelessly or through lack of knowledge presenting as one's own the ideas, words, or creative product of another.
3.	Purposely failing to credit the source for direct quotations, paraphrases, ideas, and facts which are not common knowledge.
4.	Failing to credit the source for direct quotations, paraphrases, ideas, and facts which are not common knowledge through carelessness or lack of knowledge.
5.	Changing only slightly the wording of another.
6.	Using another person's catchy word or phrase.
7.	Paraphrasing without using proper citations.
8.	Copying word-for-word.

COLLUSION

1.	Knowingly or intentionally helping another student perform an act of academic dishonesty.

MISUSE OF COLLEGE COMPUTERS AND SOFTWARE

1.	Unauthorized use of computer accounts.
2.	Unauthorized copying of programs or data belonging to others.
3.	Making, acquiring, or using unauthorized software on college equipment.
4.	Using college computers to play computer games when other users need the resources.
5.	Attempting to crash the system.
6.	Removing licensed software from offices, classrooms, labs, and the library.
7.	Using the computers or telecommunications systems in a way that interferes with the use of those systems by others.
8.	Using the computers or telecommunications systems for personal or for-profit ventures.

OTHER DISHONEST CONDUCT

1.	Stealing or attempting to steal an examination or answer key.
2.	Stealing or attempting to change official academic records.
3.	Forging or altering grade change cards.
4.	Intentionally impairing the performance of other students' laboratory samples or reagents, by altering musical or athletic equipment, or by creating a distraction meant to impair performance.
5.	Forging or altering attendance records.
6.	Supplying the college with false information.

PROCEDURES FOR DEALING WITH VIOLATIONS OF ACADEMIC HONESTY

ACTION BY THE INSTRUCTOR

1.	An instructor who has evidence that an act of academic dishonesty has occurred shall notify the student of such evidence by speaking with the student or notifying the student in writing.

2.	AFTER notifying the students and giving him or her the chance to respond, the instructor may take one or more of the following disciplinary actions:

    a.	Issue an oral reprimand and/or give the student an "F" grade, zero points, or a reduced number of points on all or part of a particular paper, project, or examination (for example, in first cases where there is reasonable doubt that the student knew that the action violated the standards of academic honesty.) No report form is necessary.

    b.	Give the student an "F" grade, zero points, or a reduced number of points on all or part of a particular paper, project, or examination. A written memo of this action (Use "Academic Dishonesty Report" Form) is to be sent to the Vice-President of Student Personnel and a copy to the Vice-President of Instruction.

    c.	Assign an "F" to the student for the course in cases where the dishonesty is more serious, premeditated, or a repeat offense. A written memo (Use "Academic Dishonesty Report" Form) must be completed by the instructor and sent to the Vice-President of Student Personnel and a copy to the Vice-President of Instruction.*

    *NOTE: A grade of "F" assigned to a student for academic dishonesty will not be final if the student chooses to drop the course before the 14th week of the semester. In that case, the student would receive a "W" grade on his transcript.

1. Upon receipt of the first Academic Dishonesty Report Form concerning a student the Vice-President of Student Personnel shall send a letter of reprimand to the student which will inform the student that

- Academic dishonesty is grounds for academic disciplinary probation for the remainder of his or her career at Merced College.
- Another incident of academic dishonesty reported by any instructor shall result in a hearing by the Student Discipline Committee and may result in a one-year suspension from the college.
- The student may make an appointment with the Vice-President of Student Personnel to discuss the incident and its ramifications.

2. Upon receipt of a second Academic Dishonesty Report Form concerning a student, the Vice-President of Student Personnel shall immediately refer the student to the Student Discipline Committee. If the Committee finds the charges to be valid, the Committee will suspend the student for one calendar year (two full semesters and one summer session).

3. For more serious incidents of academic dishonesty, the Vice-President of Student Personnel will meet with the student and immediately take appropriate disciplinary action or refer the student to the Student Discipline Committee. Offenses warranting suspension on the first offense include, but are not limited to, the following:

- Taking an examination for another student or having someone take an examination for oneself.
- Altering a graded examination or assignment and returning it for additional credit.
- Having another student or a company do the research and/or writing of an assigned paper or report.
- Stealing or attempting to steal an examination or answer key.
- Stealing or attempting to change official academic records.
- Forging or altering grades.

4. If, after a student returns from a suspension for Academic Dishonesty, the Vice-President of Student Personnel receives yet another Academic Dishonesty Report Form, the Vice-President of Student Personnel shall recommend to the Merced College Superintendent/President that the student be expelled from the District.

NOTE: Disciplinary actions which are taken by the Vice-President of Student Personnel or the Student Discipline Committee and which are based on alleged cheating may be appealed as specified in the Student Grievance Policy.

(This Academic Honesty Procedure has been adapted from the Academic Honesty Policy of Golden West College with permission.)

Adopted 11/05/02

Forms

The following forms will be

signed electronically on

American DataBank

Merced College

Allied Health

Student Acceptance Statement

Of

Registered Nursing Program
Student Policies and Procedures

I have read all of Merced College's Registered Nursing Program Student Handbook with care. I both understand and accept the responsibilities of my role as a Registered Nursing student at Merced College.

_____

Print Name

_____   _____

Student's Signature   Date

Merced College

Allied Health

Consent to Practice

1. I understand that, as a nursing student at Merced College, I may practice skills in the nursing skills lab. I may also choose to be the practice subject for invasive and/or non-invasive procedures. These skills may include the use of medical and surgical asepsis and include, but are not limited to:

   a. Blood glucose testing
   b. Hygiene activities (bathing)
   c. Positioning and range of motion exercises
   d. Activities of daily living (oral care, feeding, transfers, crutch walking, etc.)
   e. Vital signs (temperature, pulse, respirations, pulse ox, blood pressure)
   f. Physical assessments
   g. Intravenous insertions

2. I agree that I am voluntarily entering into these activities with full knowledge of the risks they involve toward my own personal safety.

3. I agree to hold harmless the district, its governing board and employees from any and all losses, expenses, claims, actions, damages, or liability for any injury to myself which results from any acts or omissions by myself and others which occur while I am participating in the activities set forth in the paragraphs above.

Merced College

Allied Health

ADA Compliance Statement

In compliance with the 1990 Americans with Disabilities Act (ADA), the School of Nursing does not discriminate against qualified individuals with disabilities.

> Disability is defined in the Act as a (1) physical or mental impairment that substantially limits one or more of the major life activities of such individuals; (2) a record of such impairment; or (3) being regarded as having such an impairment.

For the purposes of nursing program compliance, a "qualified individual with a disability" is one who, with or without reasonable accommodation or modification, meets the essential requirements for participation in the program.

The nursing faculty endorses the recommendations of the Southern Council on Collegiate Education for Nursing (SCCEN) and adopts the "Core Performance Standards" (page 26 of handbook) for use by the program (see over). Each standard has an example of an activity that nursing students are required to perform to successfully complete the program. Each standard is reflected in the course objectives.

Admission to the program is not based on the core performance standards. Rather, the standards are used to assist each student in determining whether accommodations or modifications are necessary. The standards provide objective measures upon which students and faculty based informed decisions regarding whether students are "qualified" to meet requirements. Every applicant and student receives a copy of the standards.

If a student believes that he or she cannot meet one or more of the standards without accommodations or modifications, the nursing program will determine, on an individual basis, whether or not the necessary accommodations or modifications can reasonable be made.

Statement of Awareness*

I have read the above ADA Compliance Statement and have received a copy of the Core Performance Standards which identify the essential eligibility requirements for participation in the nursing program.

Merced College
Allied Health

Hepatitis Notice

Hepatitis is a term meaning "Inflammation of the liver." There are four forms of the disease: Hepatitis A, Hepatitis B, Hepatitis C, and Hepatitis D. They are all caused by viruses, but are very different. Hepatitis A, also known as infectious hepatitis, is the most common form of hepatitis. Hepatitis A virus is found in the human feces and is usually spread by eating something contaminated. Hepatitis C (HCV) accounts for a substantial portion of acute and chronic liver disease in the U.S. The primary modes of transmission of HCV are parenteral (blood transfusion, IV drug abuse, needlestick). Although not transmitted as efficiently as Hepatitis B, HCV can be transmitted sexually and perinatally. Hepatitis D infection only exists in the presence of HBV with the route of transmission similar to HBV. Fortunately, Hepatitis D is uncommon in the U.S. HEPATITIS B: (HBV) is a virus formerly known as serum hepatitis. HBV is a major cause of acute and chronic hepatitis, cirrhosis, and primary hepatocellular carcinoma. The virus can be found in an infected person's body fluids, including blood, semen, vaginal secretions, saliva, and urine. HBV is more dangerous than other viruses because the virus can survive for more than seven days in dried blood or on exposed surfaces, thus increases the chances for infection.
Some HBV infections can be asymptomatic; however, symptoms of HBV may also include jaundice, anorexia, nausea, arthritis, rash, and fever.

A screening test for Hepatitis B surface antibody to determine whether you are presently immune to Hepatitis B is available. That test is performed on drawn blood.
Should it be determined that you are not immune to Hepatitis B, a vaccine is available which could decrease your chances of contracting Hepatitis B. Realize that as a student and future employee in a health occupation, you have an increased risk of contracting this serious illness.
There are risks involved in performing the test to determine if you are immune to Hepatitis B. Those risks include, but are not necessarily limited to bleeding, injury from the needle to various structures surrounding the vein from which the blood is drawn, including injury to nerves, blood vessels, and surrounding tissue which could result in paralysis, paresthesia, or numbness and tingling, or formation of a blood clot which could dislodge and enter your blood stream causing severe injury or death.
There are also risks attendant in receiving the vaccine against Hepatitis B, including but not necessarily limited to an adverse reaction to the vaccine which could cause anything from mild discomfort to severe injury or death caused by an anaphylactic or allergic reaction to the vaccine. In addition to all of the above, there are also unknown, rare, unpredictable and unanticipated complications which can possibly occur.

A high percentage of health people who receive two doses of vaccine and a booster achieve high levels of surface antibody (anti-HB's) and protection against Hepatitis B. Persons with immune-system abnormalities, such as dialysis patients, have less response to the vaccine, but over half of those receiving it do develop antibodies. Full immunization requires three doses of vaccine over a six month period, although some persons may not develop immunity even after three doses. There is no evidence that the vaccine has ever caused Hepatitis B. However, persons who have been infected with HBV prior to receiving the vaccine may go on to develop clinical Hepatitis in spite of immunization.

Merced College
Allied Health

Hepatitis B Vaccine Status

INSTRUCTIONS: Please complete the following form in duplicate. One copy is to be included in your clinical notebook for examination by clinical personnel during your orientation process to each new clinical facility and the second copy will be filed in your personal file.

I have received the Allied Health Division's communication concerning Hepatitis B. I understand that vaccination is indicated for me because of the possibility that I may be exposed to Hepatitis B in the course and scope of my clinical training and future employment. I have also been advised as to the potentially dangerous risks and consequences of my failure to be tested and receive the vaccination at this time.

I have also been advised that a clinical facility has the right to refuse my student clinical assignment if I have not been immunized - even if I sign a waiver of liability.

My signature below constitutes my acknowledgment:

That the testing procedure and vaccination set forth has been adequately explained to me and that I have received all of the information I desire concerning such procedure and vaccination; and
I have read, understand and agreed to the testing and/or vaccination procedure indicated below.

Check One:
I plan to be tested to determine Hepatitis B immunity. If test results indicate immunity, I will provide verification, otherwise I plan to seek immunization through my private doctor or by a health care facility and I will provide a copy of my verification when I have completed the three inoculations.

I do NOT want to be tested for Hepatitis B immunity, but I do plan to seek immunization through my private doctor or by a health care facility and I will provide a copy of my verification when I have completed the three inoculations.

I am already immunized and will provide verification.

I have decided not to pursue immunization for Hepatitis B even though I understand I am at some risk of contracting this disease. Therefore, with my signature below I am releasing and hold harmless Merced College and all clinical facilities of any responsibility for my exposure to or contracting of Hepatitis B.

T:\Shared Orientation Forms\Hepatitis Notice.docx

Merced College
Allied Health

Code of Ethics - Confidentiality

CONFIDENTIALITY NOTICE:

One of the cardinal concepts in all codes of ethics relating to health care relates to the confidentiality of information. The information provided to a student nurse is not legally privileged but student nurses are often privy to conversations between patients and their physicians, as well as to confidential information contained in patient charts. They often witness circumstances where patients are unable to preserve their dignity and may behave in ways which might cause them shame or embarrassment if known to friends or family. Many patients do not want it known that they are ill or have been hospitalized. Some may wish to keep their diagnosis confidential. Information that may seem of no consequence to you may constitute a very sensitive issue for the patient. Any breach of confidence, even if no names are mentioned, may rightly be interpreted by others as an indication that the nurse does not respect professional confidence. Betrayals of confidence cause individuals to lose faith in the health care team and may result in their hesitation to reveal facts that are essential to their care.

The patient's right to confidentiality is not violated by appropriate communications among health care workers when the information is pertinent to the patient's care. It is justifiably assumed in such a case that the transfer of information is for the patient's benefit and that all personnel involved are bound by the ethics regarding confidentiality. Appropriate communications are those directed privately to those who have need of the information. Conversations about patients must never be held in public areas such as waiting rooms, elevators, cafeterias, or outside the clinical facility. Confidential information will not be discussed outside the working environment with unauthorized individuals, or outside of the context of conducting Hospital/Facility business. Confidential information may be in the form of electronic, verbal, magnetic, photographic film and/or written data. In California, any violation of HIPAA that results in personal gain can result in a maximum penalty of a 10-year prison sentence and up to a $250,000 fine.

CONFIDENTIALITY STANDARD:

I will not discuss personal information about the patients that I come in contact with in clinical observations and/or clinical experiences, except with authorized medical and/or clinical personnel.

I will not put patients' names (only initials) on papers handed in for class or lab and will remove any signs of patient identification from information/chart that I bring to class or lab to share or as part of an assignment.

I will only access patient information for those I am providing patient care.

I have read, understand and agree to abide by the standards set forth concerning patient confidentiality. I am also aware that violations of confidentiality is subject to disciplinary action – which can include termination.

Merced College
Allied Health

Confidentiality Agreement for Simulation

Our goal is to provide simulation experiences that will advance the quality and safety of the care you provide to your patients, and increase confidence and competence as a future healthcare provider. We are committed to having the evaluation process of your performance in simulation be directed toward helping you achieve technical, professional, and personal growth as a critically thinking healthcare provider.

Ground Rules for Participation

1. Confidentiality must be maintained by participants and instructors regarding conversations that take place during simulation activities.
2. Confidentiality must be maintained by participants and instructors regarding the content of the scenarios so that the learning experience for all participants will be maximized.
3. All simulation participants will treat each other with mutual respect. This pertains to verbal and non-verbal language.
4. The simulation lab is learning environment and situations simulated in the lab are to be used as a learning tool only.
5. Videotaping of simulation scenarios may take place during your participation in the scenarios. Video recordings are electronically stored for continued educational purposes and research, but shall NOT be used for any other purposes, unless specifically requested and written permission is given.
6. All participants will treat simulators/manikins as real life patients during simulation exercises.
7. Participants will treat simulators/manikins as real life patients during simulation environment or of simulation scenarios. Simulation center staff will take pictures for education, research and grand purposes.

I have read and agree to abide by the ground rules that govern my participation in the Simulation Program at Merced College.

T:\Shared Orientation Forms\Confidentiality Agreement for Simulation.docx

Merced College
Allied Health

Consent and Release to Photograph

I hereby consent to Merced College's use of my photograph or likeness or voice on the internet and on any other electronic/digital media. I agree to release and hold harmless Merced College, its members, trustees, agents, officers, contractors, volunteers and employees form an against any and all claims, demands, actions, complaints, suits or other forms of liability that shall arise out of or by reason of, or be caused by such use of my photograph, likeness or voice.

It is further understood and I do agree that no monies or other consideration in any form, including reimbursement for any expenses incurred by me, will become due to me, my heirs, agents, or assigns at any time because of my participation in any of the above activities or the above-described use of my photograph, likeness or voice.

_____   _____
Student's Signature   Date

Merced College
Allied Health

Consent for Release of Information

I agree to the release of information regarding myself in educational/vocational planning and activities related to my academic and career pursuits.

All information will be kept confidential and maintained as part of my records with Merced College. I authorize release of the following:

- Copy of CPR card

- My Social Security Number

- Birthdate—**Month and Day Only**

- Immunization Record

- Background Check/Drug Screening

- CalWORKS/TANF eligibility documents

- Educational and occupational assessment and evaluation

- Employment Development Department (EDD–Verification of Enrollment)

- Current employment status

- Educational records, including progress reports

- Release of information to Human Services Agency staff

- Release of information to The Department of Workforce Investment

- Release of information to County Agencies as directly related to educational/vocational planning and activities related to my academic and career pursuits

- Release of information to departments on campus at Merced College as directly related to CalWORKS issues and/or sharing of resources to assist students

- Release of Information to departments on campus at Merced College as directly related to education/vocational planning and activities related to my academic and career pursuits.

This release shall remain in effect throughout students enrollment or until revoked by the undersigned.

_____   _____

Student's Signature   Date