

CUESTA COLLEGE

ASSOCIATE DEGREE NURSING PROGRAM



STUDENT HANDBOOK

Class of 2021

Dear Registered Nursing Student,

Welcome to the Cuesta College Associate Degree Registered Nursing (RN) program. It is our hope that your education inspires you to embrace the nursing role and implement the highest standards of care for your patients. Our curriculum will provide the general knowledge and skills necessary for you to take the national exam for licensure as an RN (NCLEX-RN) and begin your career as an entry-level nurse.

The program is comprised of dedicated faculty and staff members who work as a team to facilitate your successful completion of the program. However, this is a full-time, demanding, and rigorous program. Additional hours of study, research, preparation, and review time outside of class will be necessary to assure your success.

We are proud of our RN program and value student feedback. We have a long-standing history of our graduates passing their NCLEX-RN and obtaining gainful employment. Students are given formal and informal opportunities throughout the four semesters of the program to provide feedback about the quality of education and how it prepares them for a career in nursing. Your responses are very important to us and will be used to guide future curriculum revisions.

The RN Student Handbook contains program policies and useful information about our program. Please review the handbook thoroughly and keep it available for reference. The forms at the back of the handbook are to be read and signed after the incoming student orientation session, indicating your agreement to adhere to the policies throughout the program. The signed forms will be placed in your student file, along with all required certifications and student progress reports, during the program. Every intent is to ensure that these policies are current; however, policies may change during the duration of the program due to unforeseen circumstances or regulatory changes.

The faculty, staff, and I look forward to working with you to make this a valuable and meaningful educational experience that provides a solid foundation for your registered nursing career.

Respectfully,

A handwritten signature in black ink that reads "Marcia Scott". The signature is written in a cursive, flowing style.

Marcia Scott, MSN, RN
Director of Nursing

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SECTION I
COLLEGE & NURSING PROGRAM GOVERNANCE

CUESTA COLLEGE GOVERNANCE

Cuesta College is governed by the San Luis Obispo County Community College District. The District's Board of Trustees and college organizational charts are located on the Cuesta College Leadership webpage:
<http://www.cuesta.edu/about/leadership/>

CUESTA COLLEGE MISSION

Cuesta College is an inclusive institution that inspires a diverse student population to achieve their educational goals.

We effectively support students in their efforts to improve foundational skills, earn certificates or associate degrees, transfer to four-year institutions, and advance in the workforce.

Through innovative and challenging learning opportunities, Cuesta College enhances lives by promoting cultural, intellectual, personal, and professional growth. We prepare students to become engaged citizens in our increasingly complex communities and world.

VISION

Cuesta College is dedicated to accessible, high-quality education for the support and enhancement of student success, professional development, and the community we serve.

VALUES

Access - Success - Excellence

NURSING PROGRAM MISSION STATEMENT

Educate registered nursing students to provide safe, high quality, evidence based, collaborative, patient-centered nursing care that incorporates clinical reasoning and informatics at the entry level in an increasingly complex healthcare environment.

PURPOSE

Students are able to pass the RN licensure exam and are eligible for employment as an entry level RN.

CHAIN OF COMMAND

The Nursing & Allied Health Division adheres to the principles of direct communication. Student concerns are directed to faculty first. If resolution is not achieved, the student should follow the chain of command by then speaking with the nursing program director, followed by the dean of Academic Affairs. No level should be by-passed in communication within the organization plan.

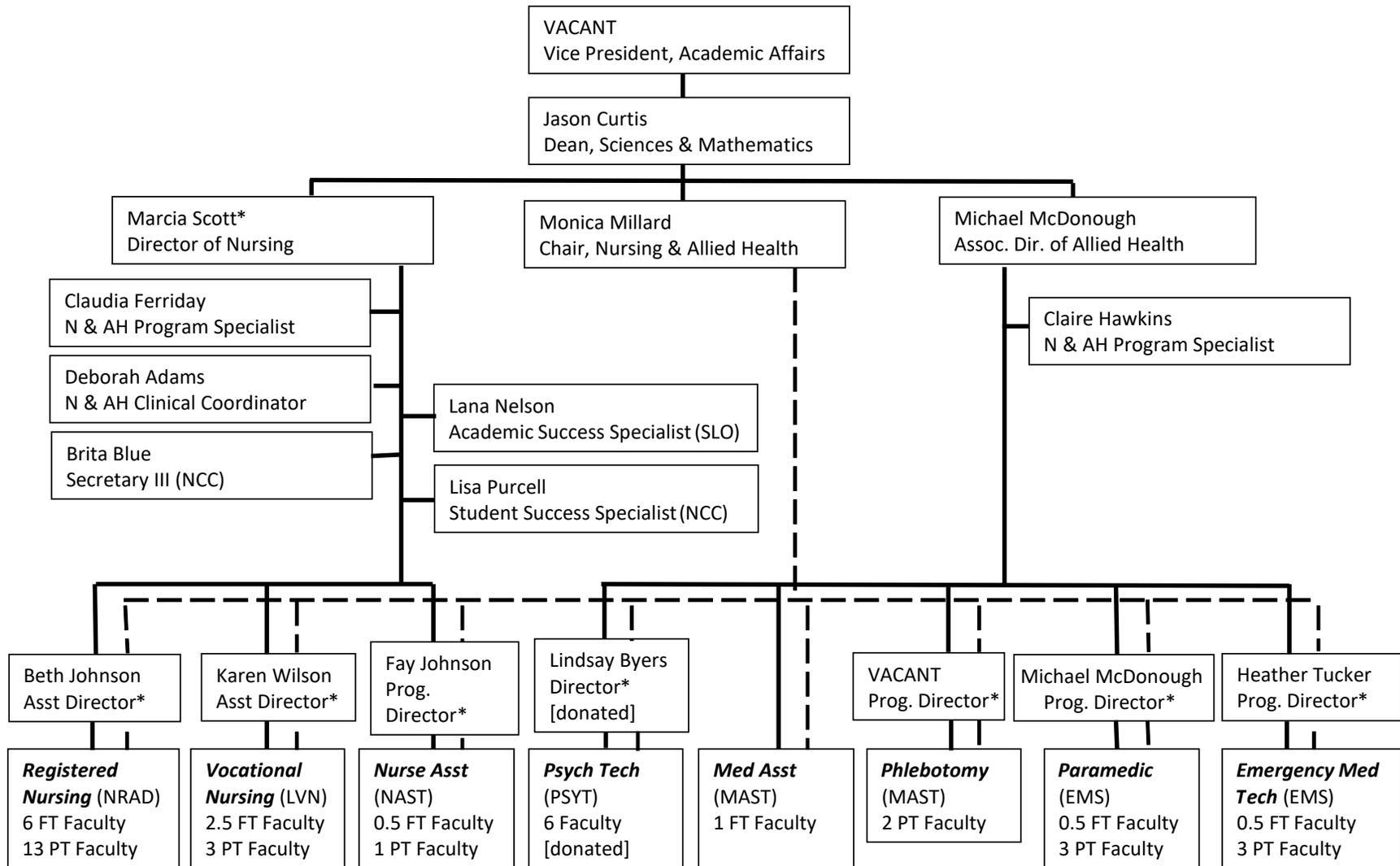
COLLEGE COLLABORATION AND SUPPORT

The Nursing & Allied Health Division collaborates with the college. We work closely with College Administration, the Nursing Selection Committee, Admissions and Records, Institutional Research, Counseling, Disabled Student Programs & Services, Financial Aid, and the Library to provide a positive educational opportunity for our students.

COMMUNITY COLLABORATION AND SUPPORT

The Nursing & Allied Health Division holds strong partnerships with community members and clinical agencies. Community Advisory Meetings are held twice a year with healthcare agency administration. The nursing program benefits greatly from generous training opportunities and financial support from community members and healthcare agencies.

CUESTA COLLEGE NURSING & ALLIED HEALTH DIVISION ORGANIZATIONAL CHART



* = "Director" position required by regulatory bodies

SECTION II
NURSING FRAMEWORK & CURRICULUM

HISTORY OF CUESTA COLLEGE REGISTERED NURSING PROGRAM

- 1967 The Associate Degree Nursing program (ADN) was approved by the California State Board of Registered Nurses (BRN) under the leadership of Juanita Booth. College Board Trustee, Carolyn Ragsdale, RN, was a strong voice to bring the program to our county. The nursing division received Joslyn Foundation donations to use for equipment and library holdings.
- 1981 A satellite program was opened to allow an additional 12 LVN to RN students to be admitted. The Caring Curriculum was developed by nursing faculty through a grant from Mrs. Ada Callahan Irving. The original Caring Curriculum was developed by Regina DePue, Edith Hall, Colleen Ehrenberg, Malcolm MacDonald, Anita Oschner, Mary Parker and Fely Platou.
- 1989 Cuesta College collaborated with Allan Hancock College to begin an LVN to RN program on the Hancock campus. The Cuesta LVN-RN satellite was discontinued.
- 1994 The Ada Callahan Irving Caring Endowment allowed for the initial ground breaking of the new Nursing Allied Health building (2500). Ada was a nurse, and her husband, Harold, was a chemistry teacher at Cuesta. Ada's dream to financially support the preservation of Cuesta as a top-quality nursing program for the community.
- 2003 The ADN class was expanded to 46 students in response to the local nursing shortage.
- 2005 ADN admission was further expanded to 56 students utilizing a Chancellor's Enrollment Growth Grant and Work Investment Act (WIA) grant through Rhorc and six community hospital partnerships.
- 2009 The RN class selection transitioned from a qualified applicant pool/waitlist to a combination merit based/qualified applicant pool. The last students admitted from the waitlist entered Fall 2009. A moratorium on applications was in place from 2007 to 2009 to complete the wait list.
- 2009 The RN simulation program began in fall 2009 with one high fidelity manikin purchased with grant funding from the Chancellor's Office. Simulation was incorporated into all four semesters.
- 2010 Multi-criteria Selection became the admission process into the RN program in fall 2010. Class size was decreased to 46 due to the premature loss of the WIA Grant 2 years into the 5-year grant, balanced with market need in our community.
- 2013 The Advanced Placement LVN to RN application was formalized, reserving three spaces for LVNs to enter the 2nd semester of the program in January 2014. Two students were admitted, graduating in September 2015.
- 2016 The RN simulation lab was remodeled with two high-fidelity manikins to provide prioritization and multiple patient care scenarios. One of the manikins is adaptable to provide maternal health scenarios.
- 2019 Since its inception in 1967, the Cuesta College RN program has produced over 1,900 Associate Degree Nursing (RN) graduates since the first class graduated in 1969.

CUESTA ADN CARING CONCEPTUAL FRAMEWORK PERCEPTIONS OF NURSING PRACTICE

GOALS:	- FACILITATE OPTIMAL HEALTH
PATIENTS:	- INDIVIDUALS, FAMILIES, GROUPS
PROBLEMS:	- GOAL SETTING - ENERGY - CARING
NURSING INTERVENTIONS:	- CARING - PREVENTION - MAINTENANCE - RESTORATION
SETTINGS:	- ACUTE CARE HOSPITALS - CLINICS - EXTENDED CARE - HOME HEALTH - SCHOOLS - OUTPATIENT OFFICES - COMMUNITY SERVICES
TOOLS/CONCEPTS:	- COMMUNICATION - NURSING PROCESS - JUDGMENT - ENERGY - PSYCHOMOTOR SKILLS - TEACHING/LEARNING - LIFESPAN - CARING
WORK-ROLE RELATIONSHIPS:	- PROFESSIONAL - LEADERSHIP AND MANAGEMENT - ADVOCACY

CARING CONCEPTUAL FRAMEWORK & PHILOSOPHY

The nursing program faculty are committed to a framework that integrates the concepts of caring. We believe caring is an art and a process. Caring as an art requires a commitment to caring as an important aspect of life, lifelong study of the theory and philosophy of Caring, and continual practice of caring for and about people, events, and the progress of society.

A framework, by definition, is a conceptual model that provides a certain frame of reference for members of a discipline to organize their thinking and observations, guide interpretations and relevant questions about phenomena, and facilitate judgment and decision-making.

The Caring Conceptual Framework is influenced by the philosophies of humanism and existentialism. The four conceptual components of the Cuesta Nursing Division Caring Framework are: Health, Person, Society/Environment, and Nursing.

The Nursing Faculty believe:

HEALTH: Health and illness are points on a continuum. Health is the purpose of all nursing behaviors. Optimal health is determined by the ability of the individual, family, group, or community to set realistic and meaningful goals and to mobilize energy and resources to achieve these goals. This is accomplished while caring about self and others, feeling good about one's self, and helping others feel good about themselves, with the least possible negative effects on the environment.

PERSON: An individual is of central importance, has inherent dignity, and is worthy of respect and care simply because of his/her existence. A person has an intrinsic creative drive towards higher and more positive levels of existence and self-actualization. Human caring and intimacy provide the energy that compels this positive impetus. A person is also a unified, organismic, living system. As a system, a person has all the characteristics of open systems. The more interactions a person has with the environment and other systems the healthier he/she will be. A person is holistic, having spiritual, emotional, intellectual, and physical qualities. Each person has freedom of choice and is accountable for those choices. A person is caring and enters into reciprocal caring relationships that enable him/her to strive towards health, growth, and self-actualization.

SOCIETY/ENVIRONMENT: People create social systems, which are organized for the protection, education, enculturation and welfare of all members. The basic unit of this social/environmental structure is the family, which provides intimacy, love, caring, protection, and teaching that enables people to participate in larger secondary units of society. Families form communities, based on commonalities of goals, geography, or concerns. Subgroups of the larger community tend to develop specific values, mores, and folkways, which can differ from other subgroups. One of society's basic struggles is to reconcile these differences in ways that do not discount, abuse, or exploit other subgroups or individuals. Maintaining an environment that allows for these differences gives the society its vitality. The health care system is a response to the health care needs of the community.

NURSING: Nursing is a practice profession, which uses the nursing process to care for society directly towards prevention of health problems, maintenance of health, care of those with illnesses, restoration toward optimal health, and facilitating a peaceful death. Nursing is primarily concerned with human life, the quality of that life, and the quality of the health of individuals and families. Quality is defined by the individual.

CONCEPTUAL FRAMEWORK

The conceptual framework for the nursing program at Cuesta College uses the Chater model for explication. This model proposes that any conceptual framework has three categories of data. These categories are: 1) Setting data, 2) Student data, and 3) Subject data (sometimes referred to as perception of nursing practice). This model further proposes that the program is committed to curriculum endeavors that are responsive to the data in each category. These commitments influence all curriculum decisions. The model can be visualized as three overlapping circles, illustrated in Figure 1.

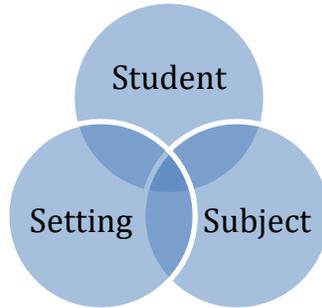


FIGURE 1
Chater's Conceptual Framework Model

Since you are familiar with the setting (San Luis Obispo County) and the students (just look at yourself and your classmates!) we will focus on the subject component of the conceptual framework.

Verle Waters refers to Chater's subject category of conceptual framework as a perception of nursing practice. Waters asserts that this part of the conceptual framework, often referred to as a nursing practice theory, is a description of the way faculty teaches nursing so that it is practiced in a way the faculty wants it to be practiced. She further states that there are seven areas that must be addressed in order to provide a picture of the faculty perception of nursing practice that is clear enough to be implemented in the curriculum, both in classroom and clinical areas. These seven areas are:

1. Nursing goals
2. The problems nurses will see as their domain
3. The patient of the nurse
4. The nursing behaviors that will be used with the specified patients who have the selected problems
5. The tools and concepts nurses use in enacting behaviors
6. The setting in which nurses work with patients
7. The work-role relationships nurses establish in order to work with patients towards the goals in the selected settings

This section of the conceptual framework will: 1) provide an introduction, 2) list the assumptions on which the perception of practice is based, and 3) describe each of Waters' seven components.

Introduction. Caring is the overriding conceptual construct of the nursing curriculum. Nursing care, in humanistic perspective, means nurse caring. Caring then becomes the process that is most pervasive in all of nursing. All of the processes, concepts and tools are used by the nurse to provide caring services.

Assumptions. The caring curriculum model is based on the following assumptions:

1. Caring is a feeling of dedication to another to the extent that it motivates and energizes action to influence life constructively and positively by increasing health, intimacy and mutual self- actualization.
2. Caring thoughts, feelings and behaviors are necessary to the attainment of health.
3. Caring behaviors are essential to the practice of nursing.
4. Caring can be effectively developed, taught, learned, practiced, and evaluated.
5. Health or a peaceful death is the purpose of all nursing behaviors.
6. Health status is determined by the ability of individuals, families, groups, or communities to: set realistic and meaningful goals; mobilize energy, use resources to attain these goals efficiently; and to do so while caring about self and others, feeling good about self, and helping others feel good about themselves, and accomplish this with the least possible negative effects on the environment.
7. Humanistic and holistic nursing is done caringly, while ritualistic and mechanistic nursing is done without caring. Though each may be done with efficiency, accuracy, and precision, the former is done with warmth and concern and is person-centered, and the latter is done with detachment and is task centered.

Perception of Nursing Practice or Nursing Practice Theory. Nursing's goal is to provide care that facilitates health and self-actualization. The problems nurses will see as their domain fall into three categories. These are goal setting problems, energy problems, and caring problems.

1. Goal setting problems are those that arise because the patient cannot or will not set goals for himself. This may be due to damage, exhaustion, disease, despair, depression, immobilization, unconsciousness, or any number of things that impair or affect the patient's ability to set goals.
2. Energy problems are those that arise because the patient's ability to generate, conserve or utilize energy is impaired. This may be due to disease, low energy reserves, nutritional problems, etc. Almost all acute health problems cause some malfunction in energy generation, conservation, or utilization.
3. Caring problems are those that result in the patient's altered ability to care for and/or about himself or other people. This may result from an altered self-concept, isolation, loss, changes in life, aging, or depression.

Since health involves the ability to set goals, the ability to mobilize energy to accomplish those goals and the ability to care for self and others while doing it, that definition supplies the three categories of nursing problems.

The patients of the Associate Degree nurse are individuals, families, and groups (this includes patient groups, agencies and colleague groups). The nursing interventions that will be used to work with the listed problems of the specified patients to accomplish the goals are in four categories or modes:

1. Caring Interventions
2. Prevention Interventions
3. Maintenance Interventions
4. Restoration Interventions

Caring Interventions are those behaviors that facilitate caring and growth. They generate energy, facilitate goal setting, and the patient's movement toward higher and higher levels of health.

Prevention Interventions are those behaviors designed to help the patient set healthy goals, avoid illness, injury, or any alteration in his progress towards self-actualization and determining his health status. It involves surveillance, screening, assessing, and observing. Script programming is the result of messages received as children and/or examples set by role models. These messages create a pattern of behavior for setting and accomplishing life goals, interacting with others, and how we feel about ourselves.

Maintenance Interventions are those behaviors necessary to maintain health. It involves caring for patients who need someone else to help them conserve energy or utilize it more efficiently. Nursing behaviors are designed to carry out treatment, therapies, and channel patient energy into maintenance. Such activities as daily hugging, comfort, care, therapeutic skills, and treatments are significant in this mode.

Restorative Interventions are necessary to assist in recovery from illness. They include the behaviors required for rehabilitation and restoration to optimal health (which may be a peaceful death.)

Tools and concepts that nurses use in enacting the behaviors. The major concept and tool that a nurse needs to enact in nursing behaviors is caring. The tools that support caring are:

1. Communication - containing such subconcepts such as interviewing, self-awareness, respect, establishing trust, self-revelation and interpersonal therapy.
2. Nursing process - the scientific approach to nursing practice--includes the major processes of assessment, planning, implementation, and evaluation.
3. Judgment - considers the student's critical thinking and decision-making ability. Is accountable for own nursing practice. Is self-motivated and self-directed.
4. Energy - this concept considers the student's ability to provide efficient nursing care to promote optimal health or a peaceful death.
5. Psychomotor skills - the technical practices of nursing.
6. Teaching/learning - containing learning theory, teaching studies and operations, anticipatory guidance and counseling.
7. Life span - the ability to incorporate growth and development theory and situational crisis into nursing practice.
8. Caring - process of commitment to self and others. Motivates and energizes action to influence life constructively and positively--increases intimacy and mutual self-actualization.

Settings in which the nurse works with patients are any settings where there are people. These settings are classified into three groups: primary, secondary, and tertiary settings. The primary setting is considered the community and agencies that provide first level contact with patients. Clinics, health departments, physicians' offices, and nurses are examples. Secondary settings are places patients are referred to for care. They are small county hospitals and nursing homes. Tertiary settings are large multipurpose general hospitals usually located in urban centers.

Work-role relationships the nurse establishes in order to work with patients towards the goal in the selected settings are: collegueship, management, leadership, coordination, and advocacy.

This nursing practice framework is used throughout the curriculum and reflects the basic philosophy and assumptions of the faculty. It is used to formulate objectives, organize content, select learning activities, set priorities, and design evaluation.

CUESTA COLLEGE ASSOCIATE DEGREE NURSING PROGRAM OUTCOMES AND OBJECTIVES

The nursing program is structured around a conceptual approach to learning through specific behavioral outcomes for each learning experience. Since nursing is a practice discipline, the outcomes do not reflect so much what the graduate should know as what the graduate should be able to do. The terminal program outcomes are necessarily broad and inclusive. Student learning outcomes are congruent with the program objectives. Specific program objectives define the competencies of each level within the program. The purpose of the program is to provide an educationally sound program in an atmosphere conducive to developing caring attitudes for graduates practicing at the beginning registered nurse level in this community or similar communities.

Goals of the RN Program

1. Students are able to obtain licensure/certification and pursue a career in nursing.
2. Student has facilitated optimal health for individuals, families, and groups.

RN Program Learning Outcomes and Objectives

Upon completion of the RN Program, the student will be able to:

1. Demonstrate effective therapeutic communication.
2. Implement critical thinking effectively when applying the nursing process and caring framework in providing patient care.
3. Integrate knowledge gained from biological, social, and nursing sciences with clinical practice in meeting the complex needs of diverse groups of patients in multiple settings.
4. Practice safely and ethically within scope of practice, while providing patient care and working with the health care team.
5. Demonstrate basic leadership in nursing practice.
6. Apply age appropriate concepts in nursing practice.
7. Apply cultural sensitivity when providing patient care.

CUESTA COLLEGE RN PROGRAM TERMINAL OBJECTIVES /PROGRAM AND LEVEL OBJECTIVES

Program Objective #1

Integrating nursing concepts to facilitate health and self-actualization by examining goal setting, energy, and caring problems.

LEVEL I

At the end of Level I, the student should be able to:

Use selected nursing concepts to facilitate health by examining goal setting, energy, and caring problems for individuals and their support systems.

LEVEL II

At the end of Level II, the student should be able to:

Incorporate nursing concepts to facilitate health and self-actualization by establishing priorities for care with recognition of patient's development level and needs. Consider patient's relationship within a family and support system.

LEVEL III

At the end of Level III, the student should be able to:

Incorporate the nursing process to facilitate health and self-actualization by identifying long- and short-term goals utilizing the patient, patient support system, and members of the health care team as their resources.

LEVEL IV

At the end of Level IV, the student should be able to:

Incorporate nursing concepts to facilitate health and self-actualization by ongoing evaluation of nursing care for patients with complex problems in a variety of settings.

Program Objective #2

Incorporating a database from nursing, humanities and the sciences to define nursing practice.

LEVEL I

Apply a logical approach to problem solving using data derived from nursing, humanities, and sciences to define nursing practice for individuals and their support system.

LEVEL II

Recognize relevant facts and reach logical conclusions with increasing number of variables to support nursing practice for individuals and their support systems.

LEVEL III

Base nursing judgment on rationale incorporating nursing, humanities, and the sciences. Anticipate outcomes and evaluate patient response.

LEVEL IV

Integrate problem solving techniques from nursing, humanities, and the sciences with more complex patients in a variety of settings.

Program Objective #3

Applying the nursing interventions of caring, prevention, maintenance, and restoration as a basis for nursing practice.

LEVEL I

Use the nursing process as a basis for implementing the interventions of caring, prevention, maintenance, and restoration in structured situations with the individual and their support systems.

LEVEL II

Use the nursing process as a basis for providing interventions that reflects prioritization of individual needs for the patient and their support system in moderately structured situations.

LEVEL III

Use the nursing process as a basis to prioritize and organize interventions for more complex patients with less supervision.

LEVEL IV

Use the nursing process as a basis to prioritize and organize interventions for patients at risk with increasing independence.

Program Objective #4

Being responsible, accountable, and ethical for self and for one's nursing practice.

LEVEL I

Accountable for own learning, ethical problems, and nursing practice.

LEVEL II

Assume responsibility for personal professional growth and ethical nursing care. Identify own strengths and weakness and formulate a plan to improve.

LEVEL III

Accountable for nursing care provided to more complex patients. Demonstrate motivation and organization. Incorporate ethical principles in decision- making.

LEVEL IV

Accountable and responsible for all care provided. Select learning experience to become a nurse generalist. Integrate ethical principles into patient care. Collaborate with others to solve ethical problems.

Program Objective #5

Implementing nursing care utilizing concepts of communication, nursing process, judgment, energy, psychomotor skills, teaching/learning, lifespan, and caring to patients of diverse backgrounds and cultures.

LEVEL I

Provide nursing care to individuals utilizing the concepts of communication, nursing process, judgment, energy, psychomotor skills, teaching/learning, lifespan, and caring in structured situations to patients with diverse backgrounds and cultures.

LEVEL II

Provide culturally relevant nursing care throughout the lifespan with increased understanding of communication, nursing process, judgment, energy, psychomotor skills, teaching/learning, lifespan, and caring for patients and support systems in moderately structured situations.

LEVEL III

Provide culturally relevant care for patients and support system incorporating concepts of communication, nursing process, judgment, energy, psychomotor skills, teaching/learning, lifespan, and caring with less supervision.

LEVEL IV

Provide culturally relevant care for patients and support systems at risk integrating the concepts of communication, nursing process, judgment, energy, psychomotor skills, teaching/learning, lifespan, and caring with increased independence.

Program Objective #6

Applying research to nursing practice.

LEVEL I

Use research findings to support nursing care.

LEVEL II

Apply nursing research findings to care of individuals and their support systems.

LEVEL III

Incorporate research findings to support nursing care in greater depts.

LEVEL IV

Integrate nursing research findings into care of patients and support system at risk.

Program Objective #7

Establishing learning patterns that value lifelong personal and professional growth.

LEVEL I

Demonstrate principals of learning and awareness that personal and professional growth is a lifelong process.

LEVEL II

Demonstrate accountability for own personal and professional learning.

LEVEL III

Incorporate behavior that demonstrates independence and enthusiasm for personal and professional growth.

LEVEL IV

Internalize lifelong learning concepts to a rapidly changing health care environment.

Program Objective #8

Developing collaborative work-role relationships with all members of the health care team in acute care and community settings.

LEVEL I

Demonstrate the behaviors necessary to be a caring colleague. Describe the behaviors and relevance of professional nurse advocacy, based on the analysis of the factors involved in advocacy.

LEVEL II

Communicate with members of the health team to promote effective work-role relationships. Demonstrate the behaviors of professional advocacy for individuals and their support systems.

LEVEL III

Participate in planning with all members of the health care team. Demonstrate the behaviors of professional advocacy in providing nursing care for individuals and their support systems.

LEVEL IV

Collaborate effectively with members of the health care team and promote patient well-being. Identify ways to work within the organizational framework to be nurse and patient advocate.

Program Objective #9

Practicing nursing that is responsive to current and changing health care needs.

LEVEL I

Identify components of the current health care environment.

LEVEL II

Adapt knowledge of the current health care setting into nursing practice to meet needs of patients and their support systems.

LEVEL III

Able to incorporate changes in the health care environment into nursing practice for individuals and their support systems.

LEVEL IV

Integrate changes in the health care environment with agency policies and procedures into own nursing practice

Program Objective #10

Assuming a leadership role as a professional member of the health care team and the community.

LEVEL I

Identify leadership qualities of a registered nurse. Identify nursing roles to promote health in the community.

LEVEL II

Begin to incorporate the leadership role of the RN into own nursing practice. Practice in community health promotion in the community.

LEVEL III

Incorporate caring concepts into own leadership role. Identify and begin to incorporate qualities of leaders in community health care agencies

LEVEL IV

Practice caring leadership role by organizing nursing care with the health care team. Collaborate with leaders in the community for health education and promotion.

Program Objective #11

Implementing nursing care that is culturally competent.

LEVEL I

Identify culturally competent nursing behaviors.

LEVEL II

Apply culturally competent care to meet the needs of patients and their support systems.

LEVEL III

Accountable for providing care that reflects cultural competence for cultures other than the caregiver.

LEVEL IV

Integrates cultural competence into all patient care. Able to discern cultural sensitivity of agency policy and procedures.

**CUESTA COLLEGE ASSOCIATE DEGREE NURSING
REQUIRED COURSEWORK FOR THE ADN PROGRAM, 30-UNIT OPTION AND ELECTIVES**

I. REQUIRED COURSES

PREREQUISITE COURSEWORK

NURSING PROGRAM COURSEWORK

<u>Pre-Req Semester 1</u>	<u>Pre-Req Semester 2</u>	<u>Program Semester 1</u>	<u>Program Semester 2</u>	<u>Program Semester 3</u>	<u>Program Semester 4</u>
BIO204 Microbiology (5 credits)	*BIO205 Anatomy (4 credits)	NRAD201 - Intro to Caring (2 credits)	NRAD202A - Concepts (3 credits)	NRAD203A - Concepts (2 credits)	NRAD204-ADN Leadership/Mgt. (1 credit)
PSYC201 Psychology (3 credits)	*BIO206 Physiology (5 credits)	NRAD201A - Concepts (2 credits)	NRAD202B - Practicum (8 credits)	NRAD203B - Practicum (5 credits)	NRAD204A - Concepts (2 credits)
ENGL201A (4 credits)	SOC201A (3 credits)	NRAD201B - Practicum (5 credits)	NRAD202D - Data (2 credits)	NRAD203D - Concepts (2 credits)	NRAD204B - Practicum (6 credits)
HISTORY/POLI SCI (3 credits)	SPCM201A (3 credits)	NRAD201D - Data (2 credits)	NRAD120 (0.5 credit)	NRAD120 (0.5 credit)	NRAD204D - Concepts (2 credits)
HUMANITIES/ARTS (3 credits)		NRAD120 (0.5 credit)			
18 credits	15 credits	11.5 credits	13.5 credits	9.5 credits	11 credits
					Total in Nursing = 45.5 credits
					Total in ADN = 78.5 credits

II. RECOMMENDED ELECTIVE COURSES FOR ALL NURSING STUDENTS:

- NRAD103H - Third Semester Nursing Readiness (0.5 credits)
- NRAD004E - NCLEX Preparation (0.5 credits)

SECTION III
PROGRAM REQUIREMENTS & POLICIES

BP 5500 Standards of Conduct

References: Education Code Sections 66300, 66301, 76030 - 76038;
Accreditation Standard II.A.7.b

I. Purpose

A. The Board of Trustees shall establish rules and regulations for student conduct while on campus and/or engaged in any college-sponsored activity. The Superintendent/President shall establish procedures for the imposition of discipline on students in accordance with the requirements for due process of the federal and state law and regulations.

B. This policy and the procedures shall clearly define the conduct that is subject to discipline, and the procedures shall identify potential disciplinary actions, including but not limited to the removal, suspension or expulsion of a student.

C. The Board shall consider any recommendation from the Superintendent/President for expulsion. The Board shall consider an expulsion recommendation in closed session unless the student requests that the matter be considered in a public meeting. Final action by the Board on the expulsion shall be taken at a public meeting.

D. The procedures shall be made widely available to students through the college catalog and other means. The Vice President of Student Services or designee shall be responsible for enforcing rules and regulations and administering the disciplinary functions for all activities of students at times and places when students are under the District's jurisdiction; however, an individual instructor is given the power to remove a student from his or her class for good cause for the day of the removal and the next class meeting. The instructor shall immediately report the removal to the Vice President of Student Services for appropriate action.

II. Scope of Application

A. These rules apply to all actions of students of the District on District property and at all activities sponsored by the District or registered student organizations, whether occurring on or off the campuses or other instructional sites. Pursuant to Education Code Section 76034, no student shall be removed, suspended, or expelled unless the conduct for which the student is disciplined is related to college activity or college attendance, with the exception of disciplinary response to sexual assault and sexual exploitation. Student conduct occurring off campus and not part of a District activity will subject the student to the District's jurisdiction, standards of student conduct, and student discipline process if the student's off-campus conduct is sufficiently related to college attendance, i.e., disruption of the work and discipline of the college has actually occurred from the student's off-campus conduct, or facts exist that reasonably lead to a conclusion by District officials that disruption on campus will soon follow the student's off-campus conduct. In addition, a student's conduct off campus may in certain circumstances be outside the jurisdiction of the District for purposes of the District's discipline process, yet result in adverse action within the student's pre-professional academic program if such program has requirements imposed by law as a condition to admission to the profession for which the academic program is preparing the student, e.g. nursing.

B. The following conduct shall constitute good cause for discipline. Good cause includes, but is not limited to, the following offenses:

1. Violation of District policies, procedures, or regulations.
2. Failure to comply with directions of District officials acting in the performance of their duties; disrupting, obstructing, or interfering with instructional, administrative, disciplinary, or other functions or activities of the District.
3. Cheating, plagiarism (including plagiarism in a student publication), or engaging in other academic dishonesty.
4. Unauthorized use of a personal electronic device in an instructional or testing environment (such as smart watch, cell phone or tablet).

San Luis Obispo County BP 5500 Community College District

5. Dishonesty, forgery, alteration or misuse of college documents, records or identification; or knowingly furnishing false information to the District.
6. Causing, attempting to cause, or threatening to cause physical injury to another person.
7. Possession, sale or otherwise furnishing any firearm, knife, explosive or other dangerous object, including but not limited to any facsimile firearm, knife, or explosive, unless, in the case of possession of any object of this type, the student has obtained written permission to possess the item from a District employee, which is concurred in by the college president.
8. Unlawful possession, use, sale, offer to sell or purchase, or furnishing, or being under the influence of, any controlled substance listed in Chapter 2 (commencing with Section 11053) of Division 10 of the California Health and Safety Code, an alcoholic beverage, or an intoxicant of any kind; or unlawful possession of, or offering, arranging or negotiating the sale of any drug paraphernalia, as defined in California Health and Safety Code Section 11014.5.
9. Committing or attempting to commit robbery or extortion.
10. Causing or attempting to cause damage to District property or to private property on campus.
11. Unauthorized possession or use of any personal property or equipment of the District.
12. Stealing or attempting to steal District property or private property on campus, or knowingly receiving stolen District property or private property on campus.
13. Willful or persistent smoking (including electronic cigarette devices) in any area where smoking has been prohibited by law or by regulation of the college or the District.
14. Committing sexual harassment as defined by law or by District policies and procedures.
15. Engaging in harassing or discriminatory behavior based on disability, gender, gender identity, gender expression, nationality, race or ethnicity, religion, sexual orientation, or any other status protected by law.
16. Engaging in intimidating conduct or bullying against another student through words or actions, including direct physical contact; verbal assaults, such as teasing or name-calling; social isolation or manipulation; and cyberbullying; "bullying" means any severe or pervasive physical or verbal act or conduct, including communications made in writing or by means of an electronic act, directed toward one or more students that has or can be reasonably predicted to have the effect of one or more of the following:
 - a. Placing a reasonable student or students in fear of harm to that student's or students' person or property;
 - b. Causing a reasonable student to experience a substantially detrimental effect on his or her physical or mental health;
 - c. Causing a reasonable student to experience substantial interference with his or her academic performance;
 - d. Causing a reasonable student to experience substantial interference with his or her ability to participate in or benefit from the services, activities, or privileges provided by the District.
17. Engaging in intimidating or bullying against District personnel through words or actions. Disruptive behavior, willful disobedience, habitual profanity or vulgarity, or the open and persistent defiance of the authority of, or persistent abuse of, District personnel.
18. Willful misconduct which results in injury or death to a student or to college personnel or which results in cutting, defacing, or other injury to any real or personal property owned by the District or on campus.
19. Lewd, indecent, or obscene conduct on District-owned or controlled property or at District-sponsored or supervised functions.

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20. Engaging in expression which so incites students as to create a clear and present danger of the commission of unlawful acts on college premises, or the violation of lawful District administrative procedures, or the substantial disruption of the orderly operation of the District.

21. Persistent, serious misconduct where other means of correction have failed to bring about proper conduct.

22. Unauthorized preparation, giving, selling, transfer, distribution, or publication, for any commercial purpose, of any contemporaneous recording of an academic presentation in a classroom or equivalent site of instruction, including but not limited to handwritten or typewritten class notes, except as permitted by any District policy or administrative procedure.

23. Unauthorized entry upon or use of District facilities.

24. Sexual Assault, defined as actual or attempted sexual contact with another person without that person's consent, regardless of the victim's affiliation with the community college, including, but not limited to the following:

(1) Intentional touching of another person's intimate parts without that person's consent or other intentional sexual contact with another person without that person's consent.

(2) Coercing, forcing, or attempting to coerce or force a person to touch another person's intimate parts without that person's consent.

(3) Rape, which includes penetration, no matter how slight, without the person's consent of either of the following:

(A) The vagina or anus of a person by any body part of another person or by an object.

(B) The mouth of a person by the sex organ of another person.

25. Sexual exploitation, defined as a person taking sexual advantage of another person for the benefit of anyone other than that person without that person's consent, regardless of the victim's affiliation with the community college, including, but not limited to, any of the following:

(1) Prostituting another person.

(2) Recording images, including video or photograph, or audio of another person's sexual activity, intimate body parts, or nakedness without that person's consent.

(3) Distributing images including video or photograph, or audio of another person's sexual activity, intimate body parts, or nakedness, if the individual distributing the images or audio knows or should have known that the person depicted in the images or audio did not consent to the disclosure and objected to the disclosure.

(4) Viewing another person's sexual activity, intimate body parts, or nakedness in a place where that person would have a reasonable expectation of privacy, without that person's consent, and for the purpose of arousing or gratifying sexual desire.

26. Any act which is defined as a felony, misdemeanor or infraction under the laws of the State of California.

Approved: 6/9/1976

Reviewed: 12/8/2015

Revised: 10/6/1993; 6/5/2002, 6/2/2010, 4/02/2014

CUESTA COLLEGE BOARD OF TRUSTEE NURSING STUDENT CONDUCT POLICY

CODE OF CONDUCT FOR STUDENTS IN THE ASSOCIATE DEGREE NURSING PROGRAM
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6202

The Board of Trustees determines that the following policies govern the participation of alcohol- or drug-impaired students in the Associate Degree Nursing program.

1. The nursing program, in addition to offering an academic program, includes clinical course work. The safety of patients under the care of student nurses must be assured. The instructor and the nursing program director will take immediate corrective action to remove a student impaired by alcoholism or drug abuse from the clinical program if the student demonstrates by his/her conduct and performance in the clinical setting that he/she is a danger to the health and safety of patients under his/her care.
2. After evaluation and due process, students considered by the nursing program director to be impaired by drugs or alcohol will be allowed to continue their studies, including clinical course work, as long as they are adhering to the provisions of a contract between the college and the student for the student's retention.
3. Information on the student's condition is confidential and will not be disclosed except when necessary to protect the safety of patients under the care of student nurses.
4. An individual contract of retention will be developed by the student, rehabilitation therapist, and the nursing program director and shall specify:
 - a. that the student must participate in an approved drug or alcohol treatment and rehabilitation program for the duration of his/her nursing program studies.
 - b. that evidence of satisfactory attendance and progress will be provided to the college on a regularly scheduled basis.
 - c. that the student will consent to periodic random drug screening as part of the treatment and rehabilitation program.
 - d. that the impaired student will give all medications under direct supervision and that the student will not have access to keys to medications.
 - e. that if the student fails to adhere to the conditions of the contract for retention, the same procedure will be followed as with any other student on probation; the circumstances of the violation will be reviewed by the nursing faculty as a whole; and recommendations for the retention or dismissal will be made to the nursing program director, who will then make the decision after advising the Dean of Student Services.
5. Information on the student's dismissal from the nursing program will be reported to the Board of Registered Nursing when such information is requested by the Board of Registered Nursing.

STUDENT NURSE CODE OF CONDUCT

Cuesta College nursing students are expected to conduct themselves in a professional manner. Cuesta College bases its policies on the philosophy, objectives, and statutes contained in the California BRN Nurse Practice Act and the American Nurses Association Code of Ethics. Students will meet the standards and conduct themselves in a manner consistent with the Nurse Practice Act and Code of Ethics found below:

California Code of Regulations,

Title 16. Professional and Vocational Regulations

Division 14. Board of Registered Nursing

Article 4, Standard 1443.5. Standards of Competent Performance found at

<http://www.rn.ca.gov/pdfs/regulations/npr-i-20.pdf>

§ 1443.5. Standards of Competent Performance.

A registered nurse shall be considered to be competent when he/she consistently demonstrates the ability to transfer scientific knowledge from social, biological and physical sciences in applying the nursing process, as follows:

- (1) Formulates a nursing diagnosis through observation of the client's physical condition and behavior, and through interpretation of information obtained from the client and others, including the health team.
- (2) Formulates a care plan, in collaboration with the client, which ensures that direct and indirect nursing care services provide for the client's safety, comfort, hygiene, and protection, and for disease prevention and restorative measures.
- (3) Performs skills essential to the kind of nursing action to be taken, explains the health treatment to the client and family and teaches the client and family how to care for the client's health needs.
- (4) Delegates tasks to subordinates based on the legal scopes of practice of the subordinates and on the preparation and capability needed in the tasks to be delegated, and effectively supervises nursing care being given by subordinates.
- (5) Evaluates the effectiveness of the care plan through observation of the client's physical condition and behavior, signs and symptoms of illness, and reactions to treatment and through communication with the client and health team members, and modifies the plan as needed.
- (6) Acts as the client's advocate, as circumstances require, by initiating action to improve health care or to change decisions or activities which are against the interests or wishes of the client, and by giving the client the opportunity to make informed decisions about health care before it is provided.

Note: Authority cited: Section 2715, Business and Professions Code. Reference: Sections 2725 and 2761, Business and Professions Code.

American Nursing Association Code of Ethics for Student Nurses and Nurses found at:

<http://nursingworld.org/codeofethics>

The ANA House of Delegates approved these nine provisions of the Code of Ethics for Nurses at its June 30, 2001, meeting in Washington, DC. In July 2001, the Congress of Nursing Practice and Economics voted to accept the new language of the interpretive statements, resulting in a fully approved revised Code of Ethics for Nurses with Interpretive Statements. This code of Ethics was revised and published in 2015 to reflect changes in the practice environment following an extensive formal review process established by the ANA. The nine interpretive statements form the Code of Ethics are as follows:

1. The nurse practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for, and protects the rights, health and safety of the patient.

4. The nurse has the authority, accountability, and responsibility for nursing practice; makes decisions, and takes action consistent with the obligation to promote health and provide optimal care.
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character, and integrity, maintain competence, and continue personal and professional growth.
6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
7. The nurse in all roles and settings advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

CLASSROOM ETIQUETTE

1. Observe classroom etiquette by arriving for class on time and returning from breaks on time. You will be marked tardy for returning late from a break.
2. Cell phones should be silenced.
3. No sleeping, shopping, or playing electronic games. You will be asked to leave class.
4. No eating or snacking during class.
5. Disturbances in class that distract the instructor or classmates will not be tolerated. Students may be asked to leave class.
6. Treat faculty, staff and classmates respectfully.
7. Students are considered guests in clinical agencies and are to act respectfully and politely.
8. Guest lecturers will be treated with gratitude and respect. They volunteer their time to share their expertise with students.

CUESTA COLLEGE RN STUDENT DRESS CODE

1. Cuesta College RN Students are to adhere to the dress code.
2. Cuesta College student nurse photo identification badge and hospital required student photo identification are worn at all times above the waist when in a clinical agency.
3. Failure to maintain a professional appearance as a representative of Cuesta College RN program will result in being asked to leave the clinical area, resulting in an absence.
4. Instructions to obtain the required uniform, specific brand, and styles will be given to admitted students at the incoming student orientation.
5. The uniform is professional dress and should only be worn for clinical simulation and when in the clinical setting to perform patient research for clinical preparation.
6. Infection Control practices require that your uniform not be worn in public settings, such as the grocery store.
7. If you are outside of the clinical setting, your uniform should be covered.

The clinical uniform of the Cuesta College RN Student Nurse will be:

1. White top with sleeves.
2. White scrub/uniform pants.
3. White scrub jacket may be worn with the uniform.
4. White shoes. Shoes must be Clean, with low heal, closed or strapped heel and closed-toe.
5. White or flesh-colored hose or socks.
6. Uniform in good repair, clean, and fresh appearance.
7. Conservative facial makeup.
8. No scented perfume, essential oil, aftershave, lotion, or cigarette smoke. Reliable deodorants should be used.
9. No jewelry except a watch, wedding band, and single pair of stud or discrete earrings. No gauge earrings. No necklaces. No visible piercings of the nose, eyebrow, and tongue.
10. Trimmed and clean fingernails. No acrylic nails or nail polish.
11. Hair clean and controlled so it will not to fall forward while performing nursing care. No unnatural vibrant hair colors.
12. Mustaches and beards must be clean, trimmed and short. If exposed, necks are to be clean-shaven.
13. No visible tattoos. Tattoos must be covered at all times while in clinical.
14. Good oral hygiene.
15. No gum chewing.

Clinical professional dress code for patient research:

1. Photo identification badge and white student nurse uniform are to be worn for patient research.
2. Faculty will determine when situations would allow professional dress with photo identification badge.
3. Students will not wear jeans, shorts, or sleeveless shirts in situations of professional dress code. Students found to be wearing inappropriate attire will be asked to leave and will accrue an absence.
4. Students may be given specific dress code guidelines for alternate clinical sites such as psychiatric, community health or pediatric settings.

PHYSICAL REQUIREMENTS & FUNCTIONAL ABILITIES

Certain functional abilities are essential for the delivery of safe, effective nursing care. These abilities are essential in the sense that they constitute core components of nursing practice, and there is a high probability that negative consequences will result for patient/patients under the care of nurses who fail to demonstrate these abilities. Programs preparing students for the practice of nursing must attend to these essential functional abilities in the education and evaluation of its students.

The nursing faculty at Cuesta College have identified those functional abilities considered essential to the practice of nursing. The functional abilities are reflected in course objectives and in clinical evaluation tools, which are the basis for teaching and evaluating all nursing students.

Applicants seeking admission into the nursing program who have questions about the functional abilities and appropriate reasonable accommodations are invited to discuss their questions with one of the nursing program faculty or the program director. Reasonable accommodation will be directed toward providing an equal educational opportunity for students with disabilities while adhering to the standards of nursing practice for all students. Continuing students who are unable to maintain functional abilities with reasonable accommodation will be withdrawn from the program.

The practice of nursing requires the following functional abilities with or without reasonable accommodations:

1. **Visual acuity** sufficient to assess patients and their environments, and to implement the nursing care plans that are developed from such assessments.
Examples of relevant activities:
 - Detect changes in skin color or condition.
 - Collect data from recording equipment and measurement devices used in patient care.
 - Detect a fire in a patient area and initiate emergency action.
 - Draw up the correct quantity of medication into a syringe.
2. **Hearing ability** sufficient to assess patients and their environments, and to implement the nursing care plans that are developed from such assessments.
Examples of relevant activities:
 - Detect sounds related to bodily functions using a stethoscope.
 - Detect audible alarms within the frequency and volume ranges of the sounds generated by mechanical systems that monitor bodily functions.
 - Communicate clearly in telephone conversations.
 - Communicate effectively with patients and other members of the healthcare team.
3. **Tactile ability** sufficient to assess patients, and to implement the nursing care plans that are developed from such assessments.
Examples of relevant activities:
 - Detect changes in skin temperature.
 - Detect unsafe temperature levels in heat-producing devices used in patient care.
 - Detect anatomical abnormalities, such as subcutaneous crepitus, edema, or infiltrated intravenous fluid.
4. **Strength and mobility** sufficient to perform patient care activities and emergency procedures.
Examples of relevant activities:
 - Safely transfer patients in and out of bed.
 - Turn and position patients as needed to prevent complications due to bed rest.
 - Hang intravenous bags at the appropriate level.
 - Accurately read the volumes in body fluid collection devices hung below bed level.
 - Perform cardiopulmonary resuscitation.
 - Ability to lift 50 pounds repetitively and unaided.

5. **Fine motor skills** sufficient to perform psychomotor skills integral to patient care.
Examples of relevant activities:
 - Safely dispose of needles in sharps containers.
 - Accurately place and maintain position of stethoscope for detecting sounds of bodily functions.
 - Manipulate small equipment and containers, such as syringes, vials, ampules, and medication packages, to administer medications.
6. **Ability to speak, comprehend, read, and write in English** at a level that meets the need for accurate, clear, and effective communication.
Examples of relevant activities:
 - Verbally communicate patient care needs to members of the healthcare team.
 - Verbally communicate teaching plans to patients.
 - Comprehend medical orders to implement care without assistance of interpreter.
 - Document legal record of patient care.
7. **Physical endurance** sufficient to complete assigned periods of clinical practice.
8. **Emotional stability** to function effectively under stress, adapt to changing situations, and follow through on assigned patient care responsibilities.
9. **Cognitive ability** to collect, analyze, and integrate information and knowledge to make clinical judgments and management decisions that promote positive patient outcomes.

PHYSICAL EXAM

A physical examination is to be completed and signed by a healthcare provider to ensure the student is physically and emotionally able to meet the functional abilities required to perform safe patient care. The physical is to be completed no sooner than June prior to beginning the nursing program and is required to be on the nursing program physical examination forms at the student's own cost. The physical examination will be maintained in the student file in the nursing office throughout the nursing program. If, at any time, either before or after acceptance into the program, a student's physical or emotional health is such that it is a potential threat to the well-being of a patient or themselves, the student will be denied access to clinical agencies. The student may be required to obtain an updated physical exam and medical clearance to participate in clinical activities if altered health status or changes occur during the program. Refer to the functional abilities section in this handbook for a full description.

PROOF OF IMMUNITY

Proof of immunity records for MMR, Varicella, T-dap, Hepatitis B, annual flu, and Tuberculosis screening are required by clinical agencies to be in the student file in the nursing office throughout the nursing program. Students may not attend clinical practicum without current immunity records and Tuberculosis screening in their student nurse file at Cuesta College. Missed clinical due to a missing or expired immunity or Tuberculosis screening records will count as a clinical absence. Tuberculosis screening is to be done in the summer, so it does not expire during the academic year.

STUDENT INSURANCE

Students carry their own personal health insurance. The college carries professional liability and injury for the nursing student while in clinical. Additional professional liability insurance is a personal choice. Low cost health insurance is available through the student health center.

STUDENT INJURY & EXPOSURE

Cuesta College nursing students experiencing an injury on campus or in a clinical setting must report the incident to their instructor and the nursing program director. If necessary, the student will be seen in the emergency room or medical care center, whichever is deemed appropriate for the situation. The student and instructor complete an Incident Report. The form is obtained from your instructor. If medical treatment is required, the student is to complete the Workman Compensation Claim Forms with the Human Resource Department within 24 hours. If documentation is not completed within the timeframe or these forms are not submitted, Workers' Compensation may not cover the injury. If the incident involves verbal or physical threats, state law requires reporting to the Cuesta College Public Safety Department. Facility paperwork also needs to be completed per agency policy.

CPR CERTIFICATION FOR THE HEALTHCARE PROVIDER

CPR (Cardio Pulmonary Resuscitation) certification for the healthcare provider is required for students to attend clinical. Students may not attend clinical without a current copy of their CPR certification card in their student file in the nursing office at Cuesta College. A new CPR certification must be obtained the summer prior to beginning the RN program to ensure that it will not expire before graduation. If, for some reason, a CPR certification is expired, the student may not attend clinical. Missed clinical due to expired CPR certification will count as a clinical absence.

BACKGROUND AND DRUG SCREEN CLEARANCE

A background check and drug screen clearance are required by clinical facilities and will be completed by the student before clinical placement can occur. The Background Check and Drug Screen Policy, and a list of convictions and/or charges that would prevent clinical participation can be viewed on the division website.

In addition, students are required to report any arrest or pending charge that occurs while the student is enrolled in the nursing program to the nursing program director within two weeks of the occurrence. Consequences of such actions will be evaluated on an individual basis.

A DOJ (Department of Justice) fingerprint background check will be required in the 4th semester that will be submitted by the student to the California Board of Registered Nursing (BRN) for licensure eligibility.

The cost of all background checks is the responsibility of the student.

SIMULATION LAB

Simulation is incorporated into all four semesters of the program. Students participate in simulation during scheduled lab, open lab, and as part of their clinical rotations.

Simulation experiences provide the nursing student the opportunity to use clinical judgment and critical thinking while caring for a patient in a safe learning environment. Scenarios increase in complexity as the student progresses through the program.

The student nurse dress code is enforced during simulation. Preparation for simulation per the instructor is required. Respect of classmates and a confidential environment that promotes a safe learning environment is a requirement to participate in simulation, and violations of either will prohibit participation. Missed simulation days reflect as clinical or theory absences.

MENTORING PROGRAM FOR RE-ENTRY, TRANSFER AND CURRENT STUDENTS

A mentoring program exists for re-entry and transfer students to facilitate a smooth transition into the Cuesta College RN program. Re-entry and transfer students will be scheduled to meet with the program director, success specialist and a clinical faculty member prior to class and clinical to be introduced to the basics of entering the program. Re-entry and transfer students will also be assigned a mentor by faculty. Current students will be paired with a mentor, who is a fellow classmate, by submitting a request to faculty, success specialist or the program director. In addition, faculty are available during office hours and appointments to mentor transfer and re-entry students.

CERTIFIED NURSING ASSISTANT (CNA) ELIGIBILITY

Students are eligible to take the Certified Nursing Assistant (CNA) exam after completion of the first semester of the nursing program. Information on how to take this exam will be available upon request from the nursing program director after completion of the first semester. The application is completed and submitted to the California Department of Public Health for approval to test by equivalency and may take 1 - 3 months for the state to process before testing is allowed.

STUDENT NURSE INTERNSHIP ELIGIBILITY

The student internship is an elective work-study course for Registered Nursing students who have completed the first two (2) semesters of nursing classes. The purpose is to provide the student an opportunity to practice selected nursing skills learned in previous semesters of coursework under the supervision of a Registered Nurse (RN) mutually chosen by the health care facility employer and the student. Information and expectations will be provided to students at the end of 2nd semester by the course instructor. Internship positions at the facilities are dependent on facility need and vary from year to year. Students are responsible

to apply and interview for the position with the facility where they wish to intern. This procedure will be explained by the course instructor. If awarded a student internship position and work in the 'expanded role', the student must enroll in NRAD 219. Information from the BRN regarding student workers (student interns) can be found at: <http://www.rn.ca.gov/pdfs/regulations/npr-b-15.pdf>

LETTER OF RECOMMENDATION REQUESTS

Students may request verbal or written recommendations from faculty. The student needs to request permission from the faculty member and then submit a "Student Reference Request" form to the faculty. As courtesy to the faculty, the request should be made at least two weeks in advance. This form may be found on the nursing website at: https://www.cuesta.edu/academics/scimath/nah/nah_resources.html

PROGRAM EVALUATION

Students are given the opportunity to participate in all areas of the program. Student input is valued and often requested. Opportunities for student evaluations of the Cuesta College ADN program and faculty include but are not limited to:

1. All faculty members are evaluated by students, peers, and administration in adherence to the college process and timelines.
2. At the completion of each semester, students are emailed a confidential survey from the nursing program director. This survey requests feedback and comments regarding theory courses, clinical instruction and facilities, skills and lab, textbooks, and available student resources.
3. At the conclusion of 4th semester, students are requested to complete a confidential program survey that obtains feedback on all four semesters of the nursing program, from the viewpoint of a student who very recently and sequentially progressed through the four semesters.
4. Opportunities are scheduled throughout the program for students to provide informal feedback to faculty and the director:
 - a. Class Representatives from each class are invited to attend faculty meetings once a month.
 - b. The nursing program director schedules monthly meetings throughout the semester.
5. An Alumni Survey will be emailed to graduates approximately one year after completing the program to obtain feedback on all areas including prerequisites, program advisement, clinical facilities, and the curriculum.
6. Employer surveys are conducted with employers of nursing program graduates approximately one year after they have been working as a nurse.

ABSENCE AND TARDY POLICY IN CLASSROOM AND CLINICAL

Regular attendance in lecture and clinical is extremely important to your success in the program. Lectures are designed to help the student understand nursing concepts necessary to be a safe and effective nurse. Clinical days are opportunities for students to apply theory to practice with the benefit of an instructor to guide and supervise.

Therefore, the following apply:

1. Notify the instructor prior to a clinical, classroom, or scheduled lab absence by phone call, email or text.
2. Absences without notifying the instructor prior to class or clinical are considered unexcused.
3. Absences may not exceed the number of times a course meets in a week.
4. Make-up for absences exceeding the acceptable limit for the course is not guaranteed.
5. The decision to allow for theory and clinical make-up will be made by faculty and the program director. If it is determined that the student is eligible for make-up, faculty will work with the student to develop an appropriate make-up plan on an individual basis.
6. Missed simulation days will constitute a clinical or theory absence.
7. Students are not allowed to make up an absence in advance.
8. Three times late to class and/or clinical will constitute an absence.

9. A student who is absent due to illness for three (3) consecutive days may be asked to present a doctor's written note releasing the student to return to school and /or clinical.
10. Excessive absences or absences that prevent the student from meeting course and/or clinical objectives will be just cause for dismissal.
11. All course requirements and make-ups must be completed by the last day of class. All 4th semester coursework must be completed prior to the preceptorship and all preceptorship requirements must be completed to participate in the nursing pinning ceremony.

RESEARCH OF PATIENT MEDICAL RECORDS

1. Research of a patient medical record is for the purpose of the RN program curriculum and course requirements only.
2. Students will follow agency protocol for review of medical records.
3. Medical records, including any document with patient identifying information, are NOT to be removed from the clinical units or photocopied. These actions are a violation of patient confidentiality (HIPAA).
4. Electronic Medical Records may only be accessed while present at the clinical site. Accessing an Electronic Medical Record while off site is considered a violation of patient confidentiality (HIPAA).
5. Violations of this policy and/or patient confidentiality are cause for discipline and may result in dismissal from the program.

RN PROGRAM TEST QUESTION CONSTRUCTION

To meet the standards of the NCLEX-RN Test Plan and prepare students for this testing format, nursing faculty in all levels of the program will develop exams with alternate item questions in addition to the standard multiple-choice type question. Alternate item exam questions may include:

- Select-all-that-apply, which require a candidate to select one or more responses.
- Fill-in-the-blank items, which require a candidate to type in number(s) in a calculation item.
- Hot spot items, which ask a candidate to identify one or more area(s) on a picture or graphic.
- Chart/exhibit format where candidates will be presented with a problem and will need to read the information in the chart/exhibit to answer the problem.
- Ordered Response items, which require a candidate to rank order or move options to provide the correct answer.
- Graphic options, which present the candidate with graphics instead of text for the answer options and they will be required to select the appropriate graphic answer.

Reference: NCSBN.org

NCLEX-RN (LICENSURE EXAM) PREPARATION & REVIEW CLASS

The Nursing Program is currently able to offer Kaplan NCLEX Preparation through all four semesters & Live Review Class through grant funding from the California Community College Chancellor's Office as a resource to our students.

An NCLEX-RN integrated program is provided during the nursing program to assist with the goal of RN licensure. Content review and computerized practice exams, using NCLEX style questions, are integrated into nursing courses. In addition, a 4-day content and test strategy review course is provided after completion of the nursing curriculum. This review covers content from all semesters of the nursing program. .

1. Integrated Tests can only be taken by students in a proctored classroom through advance arrangement with faculty. The integrated tests measure your knowledge at the end of courses as you progress through school. Your level of knowledge is compared with the national norm group. The exams selected by faculty will reflect content that has been covered in each semester of your courses. Once you have taken the tests, you will be able to review your results and access remediation explanations for any of the questions at any time.
2. There is no specific content to study in preparation for the integrated exams that are assigned by instructors.

3. Focused Review Tests are provided, which may be taken as often as desired at any time. Faculty may assign focused review tests as homework.

RN LICENSURE (NCLEX) APPLICATION PROCESS

Resources are available on the California BRN website at rn.ca.gov and the National Council of State Boards of Nursing website at ncsbn.org. In addition, the program director will provide information on the process and timeline to submit your application to the BRN to take your licensure exam in the 4th semester NCLEX prep class.

SKILLS LAB COMPETENCIES

1. Competency guidelines will be in the course syllabus.
2. Competency schedules will be developed by the lab instructor. Students must adhere to this schedule.
3. If a student does not pass the competency, repeat of the competency will be scheduled on a different day, allowing time for the student to review and practice the skill.
4. Repeat of a competency cannot be scheduled on the same day as a failed skills competency.
5. Students who need to repeat a competency must make an appointment ahead of time with the course instructor.
6. If a student fails a competency twice, they will not be able to return to clinical until they have passed that skill competency. This may result in missed clinical day(s) and missed opportunities for performing the skill in clinical. This jeopardizes the student's ability to meet clinical objectives.
7. If a student fails a competency a third time, the student will be evaluated for eligibility to continue in the program.

PHARMACOLOGY MATH GUIDELINES

1. Mathematical computations must be labeled using appropriate unit of measurement (i.e., mg, mL, mcg, units, drops).
2. Calculations for weight-based dose ranges must be demonstrated in clinical.
3. Rounding rules: '4' or less, round down; '5' or greater, round up
4. A calculation with an answer resulting in a number less than '1' must have a leading zero. Failure to use a leading zero can result in a medication overdose.
 - Example: "0.25mg" is the correct way to write ".25 mg"
5. A calculation with an answer resulting in a number greater than '1' must not have a trailing zero. Adding a zero can result in a medication overdose.
 - Example: "1.0mg" is the correct way to write "1mg"
6. Calculations need to be rounded to doses that are deliverable using the appropriate delivery device. Multiple syringe sizes may be needed to deliver the correct dose. The following are examples of different deliverable doses using different size syringes:
 - 0.38 mL should be drawn using a 1mL syringe
 - 2.45 mL should be drawn using a 1mL syringe and a 3mL syringe
7. For converting pounds to kilograms in both adult and pediatric patients, calculation needs to be truncated to the hundredth place and rounded to the nearest tenth.
 - Example: 52 pounds = 23.636363 (calculator answer) → 23.63 → 23.6 final answer
 - The final answer is used to calculate weight-based dose ranges.
8. When calculating deliverable doses for both adult and pediatric patients, results will be rounded to the hundredth place.
 - Example: Order: methylprednisolone 60mg. Available: methylprednisolone 125mg/2mL. Dose: 0.96mLs
9. For medications such as Lipids and Critical Care drips requiring the use of a Smart Pump, infusion rates may require rounding to the tenth place to administer a deliverable dose.
 - Example: Lipids 13.3 mL/hr

QUIZ AND TEST REVIEWS BEFORE MIDTERM & FINAL EXAMS

1. Formal quiz and test reviews will be scheduled by the faculty member whenever possible prior to mid-term and final examinations. Review sessions are not guaranteed.
2. Quizzes and tests may be reviewed in the instructor's office during office hours or by appointment.
3. Students sign their name on a roster for each test review.
4. Tests will be in files organized by course and students may view only one course test file at a time.
5. There will be no group work or talking during test reviews.
6. Students may write concepts and ideas only. Quizzes and tests are never to have questions written, copied, photographed or reproduced by the student.
7. No cell phones or electronic devices are to be used during test reviews. Backpacks and any other personal items will not be allowed into test review sessions.
8. Violations of this policy are cause for discipline and may result in dismissal from the program.

MISSED QUIZ & TEST MAKE-UP

1. The student must call or notify the faculty administering the test in advance of the test to obtain a pre-excused absence and permission to make up the quiz or test.
2. Failure to show up for a test at the assigned time without previously notifying the instructor may result in a zero for that exam. The decision regarding make-up will be made by the faculty and director.
3. Tests and quizzes must be made up within one week, and prior to the next class meeting.
4. It is the student's responsibility to make arrangements for make-up tests with the class instructor.
5. Discussion of the quiz or test with any classmate while waiting to take the test will be cause for dismissal from the program.

DISABLED STUDENT PROGRAMS AND SERVICES (DSPS) TESTING ACCOMMODATIONS

Cuesta College Disabled Student Programs and Services (DSPS) are available on campus for students who need an alternative setting or accommodations for tests. Students are to make an appointment with DSPS to determine and understand options available for them. The following guidelines have been agreed upon by the nursing faculty and the DSPS department.

1. Test forms must be submitted to the instructor and DSPS staff one week in advance of each test date and two weeks before finals.
2. The student and faculty must agree upon the test date and start time when completing the test form. Once made, the day and time cannot be changed without prior approval from faculty.
3. Students will schedule to take the test as close as possible to when the rest of the class is testing.
4. Testing will begin at the agreed upon start time. There will be no extension of time for showing up late.
5. Absences will follow the Missed Quiz and Test Make-up Policy.
6. Students testing in DSPS are not to discuss the test with students who have, or have not, tested yet. Students are to remain away from classmates, to the extent possible, who have already tested until testing is complete.

FINAL EXAM POLICY & EXCEPTION GRID

Students must score a minimum of 70% on the final exam to pass the course. Exception: Student scoring between 65 – 69% may pass the course if the average of all pre-final test scores meet or exceed the following:

Pre-Final Average Score (tests/quizzes only)	Final Exam Score %
76	69
77	68
78	67
79	66
80 & above	65

Please note:

- There will be no rounding up on the pre-final average score or the final exam score.
- Performance up until the final exam accounts for the percentage of the final grade as indicated in the course syllabus.
- Meeting the requirements above or scoring 70% or higher on the final does not automatically qualify a student to pass the course.

STUDENT SUCCESS AND RETENTION POLICY

The student must maintain a 70% or better in all nursing course work to pass each semester and remain in the nursing program.

The program has an aggressive retention policy. Students are required to meet with the instructor of record and success specialist for any Test/Quiz score <75%, or any time the student receives a Clinical Practice Plan.

CREDIT BY EXAMINATION (CHALLENGE OF COURSE)

Occasionally, a student believes they have mastered the nursing content of a course and may choose to seek credit by examination (challenge the course). In order to receive credit by examination (challenge a course), the student must perform the following by the second week of the first class session.

1. Research and follow the current Cuesta College Credit by Exam Policy as stated in the Cuesta College catalog.
2. Submit evidence for consideration to the nursing program director including:
 - a. Name of the course to be challenged
 - b. Rationale
 - c. Supporting evidence, including course descriptions, previous education, or work experience, that justifies ability to challenge the course

PROGRAM WITHDRAWAL: LEAVE OF ABSENCE and RE-ENTRY POLICY

A student who chooses to withdraw from the nursing program should inform the nursing program director to review their leave of absence and re-entry options.

ONE YEAR LEAVE OF ABSENCE (LOA) REQUEST

Students currently enrolled in the nursing program may request a one-year leave of absence (LOA) using the following guidelines.

1. A formal written request for a LOA is to be submitted to the program director within two weeks of the last class attendance.
2. A plan for success must accompany the student's written request for the one-year LOA. The plan should include how the student will stay current in nursing theory and skills during the LOA and what they will do during the time off to be successful if re-entry occurs. When possible, employment or volunteering in healthcare during the LOA is recommended to increase success upon re-entry.
3. LOAs are approved by the nursing program director and faculty.
4. LOAs are good for one year only.
5. A student may receive only one LOA.
6. Re-entry following a one-year LOA is not guaranteed but considered on a space available basis and according to the re-entry policy.
7. Upon completion of the plan, the student will make an appointment with the director and provide documentation of the actions taken during their leave to optimize their success upon their return to the program. The director will review the student's completed plan with nursing faculty to determine if the student is eligible to return.
8. Students who drop the program within the first two weeks of the first semester are ineligible for a LOA and will need to reapply to program in a subsequent year. All admission criteria specific to the year they are applying, and the Cuesta College catalog must be met.

RE-ENTRY and ENROLLMENT

The re-entry and enrollment policy applies to returning Cuesta students, Advanced Placement LVN to RN, 30-unit non-degree LVN to RN option, transfer students, and international nursing graduates. It is the responsibility of all students entering the program to know theory content and be able to perform all skills taught in previous semesters in order to meet current course objectives and provide safe patient care in clinical practicum.

1. Re-entry and enrollment is on a space available basis *only* and is approved by the nursing program director and faculty.
2. Re-entry and enrollment will be granted only once.
3. A written request to re-enter/re-enroll will place your name on the priority wait list of students requesting re-entry/enrollment.
4. Re-entry and re-enrollment require a current and clear physical examination, background check and drug screen, and meeting all program and college requirements in place at the time of re-entry.
5. The program director and faculty will consider academic standing upon departure and potential success upon re-entry to determine eligibility for re-entry.
6. Theory and clinical courses must be taken concurrently. Students re-admitted into a semester must take all required courses in that semester.
7. Re-entry and enrollment students are required to meet with the Success Specialist prior to return to develop a plan for success.
8. A student may be re-admitted to the nursing program one time only.

Available spaces will be filled utilizing the enrollment and re-entry policy and considering the following statuses in the order written:

- ***Returning Cuesta ADN nursing students:*** Cuesta nursing students who exited from the program with a LOA, due to an unforeseeable emergency and justifiable reason.
- ***Cuesta nursing students who have received a failing grade in a nursing theory course, less than 70%:*** Cuesta nursing students may request in writing to be readmitted into the semester from which they failed i.e., if a student fails 202A, they may request in writing to re-enter the second semester on a space available basis the next time the course is offered.
- ***Advanced Placement LVN to RN students:*** Advanced Placement LVN to RN students not admitted through the formal application process for this pathway. Advanced Placement LVN to RN students who have completed all prerequisite coursework and requirements as defined by the generic RN application, including assessment testing. A formal application process exists to allow up to three reserved Advanced Placement LVN to RN students into the second semester.
- ***Cuesta nursing students who have received a failing grade in a nursing clinical course, less than 70%:*** Cuesta nursing students may request in writing to be readmitted into the semester from which they failed i.e., if a student fails 202B, they may request in writing to re-enter the second semester on a space available basis the next time the course is offered.
- ***Transfer Students:*** Students from other schools of nursing who have not been out of nursing school for more than one year must meet the academic criteria of the class to which they are seeking admission.
- ***30-Unit Non-degree Option LVN to RN student:*** LVN's who are approved to enter in the third semester and take 30 credits to complete the RN program.
- ***International Nurses:*** Licensed nurses from other countries seeking endorsement in the USA must have academic transcripts interpreted by an official agency (i.e.: ACEI Application for Academic Evaluation). Previous education will be assessed to determine equivalency of academic criteria into the semester to which they are seeking admission. Additional documentation may be requested.

CLINICAL PRACTICE PLAN

The intent of the Clinical Practice Plan is to support student success. A nursing faculty member initiates the Clinical Practice Plan when a student is not meeting critical elements, clinical objectives, and/or an area of the clinical evaluation tool. The student receives a copy of the Clinical Practice Plan.

- It is the student's responsibility to complete the terms of the Clinical Practice Plan.
- Completed Clinical Practice Plans need to be returned to the clinical instructor.
- A Clinical Practice Plan may or may not include skills lab practice. If skills practice is a requirement of the Clinical Practice Plan, the student is required to make an appointment with the skills lab faculty for completion.
- Repeated difficulty meeting critical elements, clinical objectives, or a concept from the evaluation tool may result in probation.

See *Clinical Practice Plan* on next page.

**Cuesta College RN Program
Clinical Practice Plan**

Level: 1 2 3 4

To:

From:

Date of event(s):

Referred to Success Specialist: YES NO

Student is responsible for contacting the Success Specialist

At this time, you are practicing below the safe standard as outlined in the critical elements, clinical objectives and the clinical evaluation tool in the following area(s):

Communication	Judgment	Psychomotor	Lifespan
Nursing Process	Energy	Teaching Learning	Caring

Description of performance deficiency and student response:

I want you to be successful! We have agreed on the following action plan for strengthening your practice:

1. Review the Critical elements, clinical objectives in the "B" syllabus and Clinical Evaluation tool.
2. Demonstrate accountability and responsibility for your practice.
3. Return completed plan to your clinical instructor.
4. Other specific instructor recommendations:

You must complete your plan in order to return to clinical by_____.

I have read the above and discussed the contents in a meeting with the instructor.

Student Signature

Date Signed

Clinical Instructor Signature

Date Signed

A copy is provided to: Level Faculty, Skills Lab Instructors, Director, Assistant Director, Success Specialist, and Student File

Skills lab practice documentation. To be completed by skills lab instructor.

Date	Time	Topic/Skills Comments	Instructor signature

CLINICAL PROBATION

1. Probation is a warning that the student has demonstrated a pattern of unsafe practice. This indicates that the student's performance is below 70% per the clinical evaluation tool.
2. If a student has received Clinical Practice Plans and continues to practice in an unsafe manner as evaluated by the clinical instructor, the situation is evaluated by all nursing faculty to make a decision to place the student on probation. The type of practice plan, pattern of practice plans, and inability to self-correct are considered in the decision to place a student on probation.
3. Practice that would result in automatic probation:
 - Practicing outside your scope as a student nurse
 - Confidentiality/HIPPA violation
 - Violation of the IVP policy
4. When placed on probation, the instructor will discuss the situation and the Clinical Probation form will be completed. The student will sign this form as an indication the contents have been discussed in a meeting with the student and instructor.
5. During the probation period, the student will receive a weekly Probation Progress Report from the clinical instructor.
6. If at any time during this probationary period the student continues to practice in an unsafe manner or below 70%, the student will be administratively dropped.
7. Faculty may extend the probation period if there has been insufficient opportunity to show progress.
8. In order to complete and end probation, the student must successfully complete all actions and expectations as outlined on the Clinical Probation form.
9. Clinical performance will be monitored throughout the program to evaluate for repetition of prior unsafe practice patterns.
10. Students who are on probation may not be eligible for out-rotations per instructor discretion.
11. If at any time during the probationary period the student performs below the level of 70%, the result will be a clinical failure. The student's clinical performance must be at the level of 70% prior to the end of the semester in order to pass the course. Students may not continue in theory classes if a clinical failure has occurred. At this point, a student will be administratively dropped from the program.

Cuesta College RN Program Clinical Probation

Level: 1 2 3 4

To:

From:

Date of event(s):

Please check the appropriate box

- Functioning outside the scope of practice for a student nurse.
- Violation of Cuesta College nursing program policy related to:
 - Confidentiality/HIPAA
 - IV push medication.
- Demonstrated pattern of unsafe practice.

Communication	Judgment	Psychomotor	Lifespan
Nursing Process	Energy	Teaching Learning	Caring

See Clinical Practice Plan(s) dated: _____

Description of performance deficiency or repetition of prior unsafe practice pattern.

Student action(s) necessary to address deficiencies and end probation:

Student expectations during probation:

- *Student must make an appointment to meet with the Director of Nursing prior to returning to clinical.*
- *While on probation the student is required to meet with the Success Specialist weekly.*
- *While the student is on probation, the instructor must supervise all skills.*
- *Students who are on probation may not be eligible for out-rotations per instructor discretion.*

Date Probation period begins: _____

Date Probation will be evaluated to determine your ability to continue in the RN program: _____

- *During the probation period, the student will receive a weekly Probation Progress Report from the clinical instructor.*
- *If at any time during this period the student continues to practice in an unsafe manner or below 70%, the student will be administratively dropped.*
- *Faculty may extend the probation period if there have been insufficient opportunities to show progress.*
- *In order to end probation the student must successfully complete all actions and expectations.*

I have read the above and discussed the contents in a meeting with the instructor.

Student Signature: _____

Date: _____

Faculty Signature: _____

Date: _____

GROUNDINGS FOR DISCIPLINE or INVOLUNTARY DROP

The Cuesta ADN program will take disciplinary action, which may result in dismissal from the program for unprofessional conduct, for actions that include, but is not limited to the following:

1. Violations of the Student Code of Conduct policies established for all Cuesta College students, as outlined in Cuesta College catalog.
2. Violation of any policy, as outlined in the Consortium Background policy.
3. Failure to follow Nursing Division Student Handbook policies.
4. A student action that threatens the patient's physical or emotional well-being.
5. Conduct inconsistent with professional and ethical responsibilities of a student nurse as stated in the Student Nurse Code of Ethics.
6. Practicing outside the scope of a student nurse or performing skills that are not level specific.
7. Violations of patient confidentiality, including photocopying of the medical record or engaging in any activity that fails to protect the privacy of personal identifiable information.
8. Violations of Technology Agreement and inappropriate use of electronic handheld devices in class or clinical.
9. Impersonating any student, nurse, or health care worker in pursuit of employment, admission to the ADN program or other situation in connection with the program.
10. Falsifying or intentionally omitting information in any hospital, patient, or other record.
11. Dishonesty, forgery, alteration, or misuse of college documents, records or identification; or knowingly furnishing false information to the District.

INVOLUNTARY DROP PROCESS

1. The situation will be reviewed by the nursing faculty and program director.
2. The nursing faculty and program director will make a decision to drop the student from the nursing program or to have them continue in the program on probation.
3. Students wanting to appeal an involuntary drop should refer to the Cuesta College Student Grievance Procedure in the College Catalog.

SECTION IV
CLASS INFORMATION & TRADITIONS

CLASS INFORMATION & TRADITIONS

ELECTRONIC COMMUNICATION/GROUP EMAIL

Each class will be provided with the means to communicate through a learning management system (Canvas) that is restricted for the use of that particular class, faculty, and staff of the RN program. This is the preferred way to communicate with everyone in the program throughout the two-year program. Please note that the email option in each course is meant to communicate with the students and faculty in that particular course only.

Canvas e-mail is the official platform for program communication. Social media is not for communication of program and/or class information. Not all students participate in social media.

MOMENTS WITH MARCIA

Meetings with the Director of Nursing will be scheduled throughout each semester. This is your opportunity to share feedback regarding your nursing education and receive important information and updates from the Director. The information presented in these meetings is integral for on-going success in the program. Attendance is required.

CLASS GOVERNANCE

Each class will elect officers and class representatives during the first semester of the program. The Nursing Program Director will facilitate. Class officers are to update the Director regarding class projects, votes and activities. Class officers may stay the same throughout the entire two years, or upon discussion with the Director and class consensus, new officers may be elected in the second year.

Officer roles are:

- Co-Presidents
- Secretary
- Co-Treasurer (may be shared with secretary)
- Class Representatives (two per class)
- Historian
- RN Advisory Committee Delegates (two per semester selected by faculty)

Co-Presidents: Serve as class spokesperson and provide leadership for class activities. Organize class projects and decisions. Hold meetings as necessary. Support the smooth running of the class.

Secretary: Maintain record of class meetings for the class. Perform any class correspondence. Assist Nursing Program Director with correspondence to class.

Co-Treasurers: Manage and track class finances.

Class Representatives: Attend faculty meetings once a month to report on class issues. Meet with class to determine what the class would like reported at the meetings. The Nursing Program Director will provide a list of faculty meeting dates and times to the class representatives at the beginning of each semester. Attendance at each meeting is approximately 10 – 15 minutes.

Historian: Collects pictures throughout the program to provide class memories and create a slideshow at the end of the program. All students should be included.

RN Advisory Committee Delegates: Each semester, students from both years will be designated by faculty to attend the RN Advisory Committee meeting. This committee is chaired by the Nursing Program Director, and is comprised of nurse leaders from the community.

CLASS TRADITIONS

The following long-standing class traditions have been found to demonstrate consideration and support to students entering the program, throughout and graduating from the nursing program. Support of your peers should not be limited to these events.

1. **Incoming RN Student Orientation:** First year students welcome the incoming class by hosting lunch and giving a short 30 min presentation to advise incoming students on how to be successful in the nursing program. The agenda is developed each year by the program director. First year officers meet with the director to help plan this event, but the entire class is encouraged to participate with the following:
 - Presentation on survival tips and strategies
 - Potluck ,set-up, clean-up
 - Binder, calendar management and dress code information
 - Welcome/survival kit.
2. **Student Participation/Community Enrichment:** Students have the opportunity to participate in campus and community events throughout the four semesters. Examples of such events include blood pressures at career fairs, flu shots for the community, and community fundraising events.
3. **End of Fall Semester Party:** This is an enrichment event held annually for faculty, staff, and first- and second-year students to celebrate the successes of the fall semester when finals are over. The director, faculty, and staff plan the party. Students may be asked to pay a suggested donation to help cover food and facility costs.
4. **Class Photo:** Graduating classes have been gifting a class photo for the wall in the nursing faculty office building starting in the early 1990's. To make room for all of these photos we ask that it be an 8" x 10" with a mat, frame, and include student names and the year of graduation. Photo should be taken after the 4th semester preceptorship begins.
5. **Pinning Ceremony:**
 - **Ceremony:** This is a ceremony to celebrate the completion of nursing school with community, faculty, classmates, families and guests. A mandatory rehearsal will be held to foster a professional event that displays the program positively. Class officers will meet with the program director and graduating class early to plan this event and organize the following committees to divide the workload.
 - Ushers to hand out programs and help guests to seats; return unused programs to nursing office
 - Direction signs guiding guests to the gym
 - Remove direction signs after the ceremony
 - Set-up and decorations
 - Refreshments: Purchase or seek donations; pick-up, set-up, and serve
 - Clean-up Skills Lab and check-in with Nursing Office before leaving
 - **Program:** Students work with the director to prepare the Pinning Ceremony program with class sentiments and acknowledgments. Creating a professional program takes time and the proof needs to be submitted to the director for review by **May 1st**. Allow at least a month for collection of student sentiments and thanks. Samples of previous programs are available from the director for reference.
 - **Invitations:** The nursing division will mail pinning ceremony invitations to hospital administrators, directors of nursing, healthcare agency managers, and major donors. Invitations to the pinning ceremony will be provided for graduates to distribute to family and friends. Traditional commencement invitations may be purchased at the bookstore.

- **Music:** Students and faculty will enter to music selected by the students. The class will select two songs to ensure the music continues until everyone is seated. The traditional graduation march is reserved for the college commencement and is not to be used at the pinning ceremony. The committee in charge of music will communicate with the nursing program director and college marketing coordinator by **May 1st** of each year to avoid technical issues during the event.
 - **Full-time Faculty Roles:** The class selects full-time faculty to perform the following roles, and reviews selections with the program director. After reviewed, the class formally requests this honor of the faculty by **May 1st**.
 - faculty speaker -- The class selects 1-2 faculty speakers to address the class for 3- 5 min.
 - calling of student names
 - donning the nursing pin
 - donning the nursing stole
 - other roles as necessary
 - **Class Speaker:** 1 or 2 speakers address the class and community audience for 3 - 5 minutes each, in a professional and meaningful manner. Student speeches are to be to the program director for preview at least 1 week prior to the pinning ceremony.
 - **Student Slide Show Presentation:** The slideshow is created by students to represent your class throughout the two years of nursing school. The content is professional and reflects the academic excellence of the nursing program. The slideshow needs to be finished and to the director for preview by **May 1st**. The slideshow format is 10 - 14 minutes in length and includes a portrait of each student in alphabetical order followed by a picture of their choosing (i.e. family/pet/mentor), ending with slides that represent highlights and milestones throughout the four semesters. To the extent possible, represent all students equally, and all faculty equally.
 - **Presentation of Nursing Stoles and Pins:** Information on how to order your pin from the college bookstore will be given to the class by the director in 4th semester. Students are not required to purchase a Cuesta College nursing pin. The nursing stoles are provided for each student by the Ada Irving Nurse Caring Foundation Account and are dependent on funding. Stoles and pins will be presented to students by nursing faculty at the Pinning Ceremony.
 - **Pinning Ceremony Reception:** First year students will host this event for the graduating class. The nursing department will pay for light refreshments at the Pinning Ceremony reception, such as or including cookies, cake, coffee, punch, water, paper plates, silverware, and napkins. Students purchase these items and submit receipts to the director for reimbursement.
 - **Recessional/Exit:** Students and faculty march out to music selected by the students.
6. **Cuesta College Commencement:** Nursing students are strongly encouraged to attend commencement to represent the nursing department in this important college and community event. The college commencement is the official college ceremony in which associate degrees are awarded.

PINNING CEREMONY SAMPLE AGENDA

- Procession/Entrance
- Nursing Program Director: Conducts the ceremony
- Dean of Academic Affairs: Provides welcome and introductory remarks
- Faculty Speaker
- Class Speaker
- Student Slide Show Presentation
- Presentation of Nursing Stole and Pin
- Recessional/Exit

STUDENT NURSE CHECKLIST

First Semester:

- Adjust to the full-time nursing program.
- Elect officers and class representatives to monthly faculty meetings. The director will facilitate this election in October and November.
- Plan simple, fun activities from time to time to celebrate milestones and get to know each other.
 - Request a pizza party from the director at an opportune time for the class to relax and bond.
- Take photos to use in a slideshow at program completion. Include classroom, skills lab, clinical, study sessions and casual events.
- Attend the End of Fall Semester Party that will be held during finals week when both first- and second-year students have completed their last exam.

Second Semester:

- Hold regular class meetings and establish guidelines on how to determine appropriate spending of class money and how to manage class funds. Formal fundraising for your class is not allowed. Classes have raised money for desired expenditures by volunteering and having the donation deposited into a nursing foundation account. The director will give you guidance on class spending and use of the foundation account. It is suggested to have co-treasurer eyes and signatures for all financial transactions. Examples of how class funds were used in previous years:
 - Scholarships or giving back to the community
 - Incoming student lunch and welcome gift
 - Pinning ceremony refreshments and decorations
 - 4th semester preceptor thank you gift. This allows for consistent thanks to preceptors.
 - Class gift to the nursing program
 - Class photo for the nursing hallway
 - Purchasing nursing pins for the class
 - Class enrichment/bonding events such as pizza parties on campus following class
- Host the pinning ceremony reception in the skills lab for the graduating class (May). The reception immediately follows the pinning ceremony. *See page 45 for details and committee set-up.*
- Attend the 4th semester Nursing Pinning Ceremony to support graduates.
- Host the Incoming Student Orientation (traditionally held in June).
- Determine if officers will continue into the 2nd year, or if a new election will be held no later than week 2 of the 3rd semester.

Third semester:

- Review first year skills by taking NRAD 103H, an elective course offered the week before 3rd semester that offers hands-on review/practice with 1st year skills. It is 0.5 credits (9 hours) that is held over 2 days the week before 3rd semester begins. A materials fee for skill supplies.
- Act as positive role models and mentors for first year students.
- Schedule class meetings well in advance to include everyone in discussions and voting.
- Attend the End of Fall Semester Party after finals.

End of Third/Beginning of Fourth:

- Review pinning ceremony guidelines in this handbook to understand student expectations, necessary planning, and establish committees.
- Meet with the director to discuss and plan.

Fourth Semester:

- Submit application to BRN to take the NCLEX exam. The program director will explain the process and timeline for this in the optional NCLEX Preparation class, or students may research this information on the BRN website. Plan for \$650 to pay for NCLEX application and associated fees.
- There are many due dates in 4th semester. Have a personal calendar that you refer to daily.

- Complete the Associate Degree, Registered Nursing, application and submit to the Cuesta College Admissions & Records office by the college due date (early in the semester, eg.: February). The program director will facilitate.
- Plan/arrange for your preceptorship. The final clinical rotation of the nursing program is a preceptorship that is completed 1:1 with a primary and/or backup RN preceptor that is arranged by the preceptorship coordinators (4th semester RN faculty). Guidelines will be in the 204B syllabus, and mandatory Q&A sessions will be conducted by the preceptorship coordinators in the 4th semester. These dates will be given to you at the beginning of the 4th semester to place on your calendar.
- Schedule and arrange to take class photo, with class year and names, to be placed in the nursing hallway.
- Finalize plans for the Pinning Ceremony with the director. *See due dates on pages 45 & 46.*
- Invite as many family members and friends as desired to the Pinning Ceremony. We have an entire gym to fill! Mail, hand deliver, and email invitations provided by the nursing office. Formal Commencement invitations may be purchased from the college bookstore.

SECTION V

COPIES OF STUDENT SIGNATURE FORMS
(TO BE RETAINED IN HANDBOOK)



Nursing and Allied Health Department
SLO Campus Office: 2722 Phone: (805) 546-3100 ext. 2798
NC Campus Office: N2421 Phone: (805) 591-6200 ext. 4426
BACKGROUND POLICY: AGREEMENT TO SELF-REPORT
August 2019 Entry

In accordance with the contracts held by the college and its affiliate partners, all students enrolled in Cuesta College Nursing and Allied Health programs/courses are required to clear a background check, in order to participate in clinical rotations, internships, and externships.

As part of the background check policy, students are required to self-report arrests, citations, and violations (including traffic violations over \$1,000.00) incurred while enrolled, within one week of the occurrence. Reports are to be made to the Director of Nursing. **In addition, students who have been convicted of a felony since age 18 must make an appointment with the Director of Nursing prior to June 20, 2019.** Students who fail to follow Background Policy guidelines will become ineligible to attend clinical/field training and may be dismissed from the program/course.

Reporting of arrests, citations, and violations will not necessarily exclude students from continued program participation. Each circumstance will be evaluated on an individual basis in order to determine an appropriate action.

By signing below, I confirm that I have read and understand the Background Policy and I agree to self-report any arrests/citations/violations incurred while enrolled in the Nursing program, within *one week* of the occurrence.

Student's Signature

Date

Student's Printed Name

Program/Course Name



Nursing and Allied Health Department

SLO Campus Office: 2722 Phone: (805) 546-3100 ext. 2798

NC Campus Office: N2421 Phone: (805) 591-6200 ext. 4426

STUDENT CONFIDENTIALITY STATEMENT

I understand and agree that in the performance of my duties as a student in the Cuesta College Nursing and Allied Health Department, I must hold client and student information in confidence.

All medical information acquired during patient research and patient care is confidential and I will not disclose that information to any person or persons not involved in the care or treatment of the patients, in the instruction of students, or in the performance of administrative responsibilities regarding the patients.

I will protect the confidentiality of patient information as required by law at all times. Photocopying and/or removing medical records is not permissible.

Conversations between physicians, nurses and other healthcare professionals in the setting of a patient receiving care are protected and may not be discussed.

Other sources of medical information that are protected and confidential are medical records, emergency room department and ambulance records, base station reports, 5150 applications, child abuse reporting forms, elderly abuse reporting forms, laboratory requests and results, and x-ray results.

I understand that any violation of confidentiality with client or student information is cause for dismissal from the program.

Student's Signature

Date

Student's Printed Name



Nursing and Allied Health Department

SLO Campus Office: 2722 Phone: (805) 546-3100 ext. 2798

NC Campus Office: N2421 Phone: (805) 591-6200 ext. 4426

STUDENT ACCEPTANCE STATEMENT

Having received the RN student handbook and reviewed all of the Cuesta College Department policies with care, I understand and accept my responsibilities as a student at Cuesta College in the Nursing & Allied Health Department and agree to abide and be bound by these policies as a condition of enrollment in and graduation from my course/program. I further understand that policies may require revisions during my time in the course/program. If revision is necessary, I will be informed both verbally and in writing before the policy is in effect.

Student's Signature

Date

Student's Printed Name



Nursing and Allied Health Department

SLO Campus Office: 2722 Phone: (805) 546-3100 ext. 2798

NC Campus Office: N2421 Phone: (805) 591-6200 ext. 4426

**POLICY FOR AUDIO AND VIDEO RECORDING AND PHOTOGRAPHY IN
LECTURE, LAB OR CLINICAL SETTINGS**

As a student in the Nursing & Allied Health Department at Cuesta College, I understand and agree to the following technology policy for using audio or video recording, and photography in lecture, lab and clinical settings.

1. I understand that I must receive prior written permission from each faculty or person I intend to audio or video record and/or photograph.
2. I understand that confidential medical information is presented in lecture, lab, and clinical settings and that none of this information can be disclosed without the written consent of the individual it pertains to.
3. I understand and agree that if given permission to audio or video record in lecture, lab and/or clinical settings, all recordings are for my personal use while enrolled in Nursing and Allied Health programs/courses. I will not duplicate or reproduce them and/or permit any unauthorized use or exchange of the recordings.
4. I understand and agree that I will not take pictures in lecture, lab and/or clinical settings without written permission of the subject being photographed.
5. I understand and agree to not post audio or video recordings and/or pictures on any public site or permit any unauthorized access to the audio or video recordings and/or photographs without written permission from the photographed individual. I must comply with all healthcare agency policies on audio and video recording, and photography.
6. I understand and agree that if I violate any part of this policy:
 - a. I will lose the privilege to record and/or photograph in lecture, lab and clinical settings
 - b. I may be dropped from the Nursing and Allied Health program/course as noted in department policies and
 - c. I may be personally liable for damages to the person(s) whose right of privacy is violated by the unauthorized disclosure of confidential information.
7. I understand and agree that I will not use any technology device in the classroom for purposes other than instruction and violation of this will put me at risk of forfeiting the device. Examples of this include: texting, Facebook, viewing podcasts and/or movies.
8. I understand that any technology I use in association with Cuesta’s Nursing and Allied Health programs/courses will be completely legal and in compliance with the student code of ethics found in the college catalogue and/or student handbooks or I may be dismissed from the program/course.
9. I further agree to defend, indemnify and hold harmless from liability Cuesta College, its officers, agents and employees while acting as such from all suits, damages, costs or expenses arising out of my intentional or negligent disclosure of any confidential information contained in the audio recordings, transcripts and/or pictures without written consent of the person(s) to whom the confidential information pertains.

I will abide by the conditions listed above:

Student’s Printed Name

Student’s Signature

Date



RN PROGRAM STUDENT HONOR PLEDGE

I understand that in order to demonstrate my preparation for completion of the RN Program, and subsequent national testing for licensure, I must pass multiple quizzes and exams, write multiple papers, and research and present on certain topics throughout the year.

I also understand that to hold a license as a registered nurse in any state means that I can safely perform care and interventions in response to client changes. This will require me to have a certain base of knowledge and skills that I must be able to draw upon.

Finally, I understand that cheating on tests, presenting the work of others instead of my own, and/or not be able to successfully receive a passing grade in an RN course indicates that I am not prepared to meet the requirements of safe patient care.

Therefore, I accept and understand that such cheating is not acceptable and will result in a failing grade on any material for which I cheated. It also could result in my dismissal from the RN Program.

Student's Printed Name

Student's Signature

Date



TALENT RELEASE FORM

I do hereby give Cuesta College and their assigns, licenses and legal representatives the irrevocable right to use my name, picture, portrait, photograph, or live video and audio in all forms and media and in all manners, including composite or distorted representations. I am fully aware that my name, picture, portrait, photograph, or video footage will be used for the production of Cuesta College promotional works and commercials that I recognize may be broadcast or distributed nationwide. I waive any right to inspect or approve the finished version(s), including written copy that may be created in connection therewith. I have read this release fully and am completely familiar with its contents.

Participant Signature_____

Print Name_____

Date_____

Date of Birth_____

Phone_____

