

Maurine Church Coburn School of Nursing

Student Handbook

2023-2024



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STATEMENT OF UNDERSTANDING

I certify that I have reviewed and understand the Nursing Student Handbook, including all of the policies and statements in it. I have the responsibility to seek clarification and to ask questions about any portion of the handbook that I do not understand.

Student Signature

Date

Print Name

MCCSN UNIFYING THEME

The unifying theme of the MCCSN curriculum is the nursing paradigm which integrates the concepts of person, health and environment as they relate to human needs across the lifespan. The nursing process is used throughout the curriculum to teach students how to provide safe and effective care as professionals within healthcare teams. Curricular content is organized according to threads (nursing practice-related concepts) derived from the curriculum requirements for pre-licensure registered nursing education programs in California, as well as the NCSBN universal structure for client needs (02/11/19). These threads integrate nationally recognized QSEN KSAs and are leveled from simple to complex.



STATEMENT OF PHILOSOPHY

Introduction

The goals and philosophy of the faculty of the Maurine Church Coburn School of Nursing (MCCSN) are congruent with the mission and values of Monterey Peninsula College. The faculty embraces the college's mission and philosophy as an open-access institution that fosters student learning and achievement within a diverse community, and supports individual student differences, learning styles, goals, and support systems. Consistent with this philosophy, MCCSN provides high quality instruction to students pursuing transfer level course work, career education and lifelong learning. However, in light of the complexity of healthcare, the faculty believes that high academic standards and validated program prerequisites and admission criteria are necessary for optimal professional role formation.

The philosophy of the School of Nursing reflects the faculty's beliefs concerning nursing practice, the practice of the Associate Degree graduate, and nursing education.

Nursing Practice

Nursing is a dynamic profession, which utilizes the nursing process to deliver health care in response to the changing needs of the community, family, and patient. Nurses collaborate in a partnership with patients to promote health, prevent disease, and maintain and restore an optimal level of wellness throughout the lifespan, to facilitate comfort and to support the client's right to dignity in dying.

Nursing practice utilizes a broad and integrated knowledge base including the liberal arts, physical sciences, life sciences, and social sciences. Nursing practice requires both creative and critical thinking skills as a foundation for sound clinical judgment. Nursing practice incorporates knowledge of current healthcare issues, an empathic and caring approach, and respect for diversity. Nursing practice integrates the concepts of health, person and environment to provide safe and effective patient-centered care as professionals within healthcare teams.

The Practice of the Associate Degree Graduate

The associate degree nurse (ADN) bases practice on the nursing process and knowledge of liberal arts and sciences, and human needs from basic to multiple and complex. The ADN is a competent and accountable nursing professional. The ADN collaborates in meeting the health care needs of patients in acute, long term and community-based settings. The ADN employs knowledge of diversity, growth and development, and interpersonal relationships to meet the needs of a diverse and dynamic patient population. An understanding of current technology and competence in performance of requisite skills is essential for safe practice.

The ADN advocates on behalf of patients, teaches patients and families, and directs nursing care. The ADN coordinates the activities of the healthcare team, with the patient as the central figure. ADN practice requires knowledge of ethical/legal principles, evidence-based practices, time and resource management, informatics, quality improvement, communication, documentation and leadership skills.

The ADN is a responsible member within the discipline of nursing who contributes to the profession through a commitment to lifelong and self-directed learning. The ADN stays abreast of current professional and political issues, social trends, and technological advances. The ADN is committed to the advancement of professional nursing practice and health care.

Nursing Education

The MCCSN faculty defines learning as the acquisition of knowledge, skills and attitudes which result in the student's internalization of a professional nursing identity, measured by the attainment of program learning outcomes. The faculty believes that learning theories provide structure to select instructional strategies that provide student-centered learning activities. While no one learning theory can address every individual need, the MCCSN philosophy is most consistent with premises derived from behavioral, constructivist, adult learning, novice-to-expert and humanistic theories, as summarized below:

Nursing education is designed to meet the needs of diverse learners as they assimilate and apply a unique body of knowledge, which is continually expanding and increasing in complexity. Nursing education takes place in institutions of higher learning and in a variety of health care settings. Nursing education is framed within the nursing process, develops the learners' decision-making and clinical reasoning skills, and reflects the fundamental professional values of accountability, commitment, caring, and personal and professional growth. Learning is a dynamic, collaborative, and continual process, which progresses from simple to complex. Learning enables the student to integrate new knowledge in response to changes in nursing and the health care delivery system.

Nursing students are adult learners who actively participate in their education, assess their own learning needs, and seek out experiences to meet those needs. They bring diverse life experiences, skills, characteristics and backgrounds, which impact the learning process. All students enter the program with a basic competency in natural sciences, behavioral sciences, and communication skills. Because of this foundation, MCCSN students are prepared to participate fully in all aspects of their nursing education. They contribute to the shared decision-making and collaboration necessary for learning. Students are responsible and accountable for their own learning.

Nursing faculty facilitates the learning process with students through planned educational experiences. Faculty builds on students' prior experiences and education. Faculty responds to the changing health care delivery system of the community when structuring learning experiences. The strong partnership between the college and the local community hospital promotes collaboration between education and practice. Faculty strives to incorporate evidence-based best practice throughout the curriculum. Faculty implements a variety of teaching strategies, which provide the opportunity for students to practice problem solving and utilize creativity in providing patient care.

The nursing curriculum is organized by threads reflecting core nursing practice-related concepts, derived from the NCSBN universal structure for defining nursing actions and competencies for client care in all settings, and is leveled from simple to complex.

The faculty maintains competency and serve as resources in their area of expertise. Nursing faculty serves as role models for students through their own professional development and commitment to lifelong learning.

Adopted: 06/27/94
Amended: 08/97
Reaffirmed: 08/98, 08/00, 08/01
Amended: 12/02
Reaffirmed: 08/03, 08/04, 08/05, 08/06, 08/07
Amended: 09/09
Reaffirmed: 08/10, 05/11, 05/12, 05/13, 06/14
Amended: 09/15
Revised: 06/16, 05/17, 05/18, 02/11/19
Reaffirmed: 05/19

End of Program Outcomes:

At the end of the program, the Maurine Church Coburn School of Nursing Associate Degree graduate will be able to:

1. provide safe and effective nursing care to patients in a variety of clinical settings
2. coordinate activities as a leader within the interdisciplinary healthcare team to advocate for patients and communities.
3. integrate concepts of growth and development to enhance patient-centered care for diverse and dynamic patient populations
4. formulate the plan of care to incorporate evidence-based practice
5. utilize technology to effectively communicate, manage knowledge, prevent errors and support decision making

Individual student learning outcomes for each course in the curriculum can be found in the course syllabi.

08/01 rev.

08/11 rev.

06/16 rev.

05/18 revised

05/19 revised beginning cohort entering fall 2019

MPC Associate of Science Degree in Nursing Program of Study **last updated Fall 2023**

NOTE: Some coursework listed in categories below may require placement testing or additional prerequisites. Students should see an academic counselor for details.

A. The following must be completed prior to admission with verification by official transcript. (Unofficial transcripts are accepted for coursework completed at MPC):

Course Number	Course Name	Units
∞ MATH 263	Intermediate Algebra or higher (See last course block below) <i>(Math 16 Elementary Statistics recommended for BSN transfer)</i>	4-5
ENGL 1A	Composition	3
ANAT 1	General Human Anatomy and Lab	4
PHSO 1	General Physiology (<i>ANAT 1&2, CHEM 30A prerequisite at MPC</i>)	3
PHSO 2	General Physiology Lab (<i>PHSO1 prerequisite or co-requisite</i>)	2
BIOL 25	Applied Microbiology (<i>CHEM 30A prerequisite</i>)	3
BIOL 26	Applied Microbiology Lab (<i>CHEM 30A prerequisite at MPC</i>)	1
PSYC 25	Lifespan Development (<i>not required for LVN advanced placement</i>)	3
NURS 100	Pharmacology for Nursing (<i>not required for LVN advanced placement</i>) may be in progress at the time of fall application.	2

B. The following must be completed before graduation from the nursing program to satisfy nursing program requirements:

Course Number	Course Name	Units
SOCI 1	Humanity and Society <i>(or any one course from MPC GE Area D in ANTH, ETNC, GWOS or SOCI)</i>	3
**SPCH 1 OR--	Introduction to Public Speaking (<i>recommended for BSN transfer</i>)	3
**SPCH 2 OR--	Small Group Communication	(3)
**SPCH 3	Interpersonal Communication	(3)

**Choose one speech course to satisfy requirement for communication skills. SPCH 1 is recommended for BSN transfer.

C. The following are NURSING CORE (MAJOR) COURSES to be completed during the four-semester nursing program:

Semester	Course Number	Course Name	Units
First semester (Fall)	NURS 52A OR NURS 54 AND NURS 55	Nursing I OR * Accelerated Nursing I AND ** Applied Foundations of Nursing	8.5 (5.5) (3.0)
	NURS 204	Supervised Nursing Skills Lab I	0.5
Second semester (Spring)	NURS 52B	Nursing II	8.5
	NURS 205	Supervised Nursing Skills Lab II	0.5
Third semester (Fall)	NURS 52C	Nursing III	9.5
	NURS 206	Supervised Nursing Skills Lab III	0.5
Fourth semester (Spring)	NURS 52D	Nursing IV	9.5
	NURS 207	Supervised Nursing Skills Lab IV	0.5

*Alternative first semester option by placement testing for students with previous education in the field of nursing, including military education and experience

** Alternative first semester option by placement testing for students with previous education in the field of nursing, including military education and experience; credit usually awarded by exam for qualified applicants

^ Advanced Placement students (qualified with previous education who enter in the second or third semester) (4 units are required to

complete NURS 65 and NURS 65L Nursing Role Transition

D. ∞ The following are MPC General Education requirements for the associate degree:

Course	Course Name	Units
∞ Humanities	Choose one course listed in MPC General Education Program, Area C Humanities	3

Note: Information Competency graduation requirement (LIBR 50 equivalent) will be satisfied upon completing NURS 52A+B or NURS 54+52B.

∞ Students who hold a baccalaureate degree from a regionally accredited college are not required to complete additional general education units or coursework (i.e. Math, Humanities) other than prerequisite and NURS courses specifically required for the nursing program. See Academic Counselor or Director, School of Nursing.

^ LVNs and others seeking advanced placement options should contact the Director, School of Nursing for qualification details.

* Applicant must make an appointment to verify transcript evidence of previous education and experience in the field of nursing

TOTAL PROGRAM UNITS (depending on math chosen):

72-73

Maurine Church Coburn School of Nursing
 Monterey Peninsula College
2023-2024 Approximate Total Costs
 for 4 semesters of the Associate Degree Nursing Program
 (not including prerequisite coursework)

ITEM	Approximate Cost	Comment
Tuition	\$1748	
Health and other student fees (per catalog)	\$144	
Parking	\$190	
Print + e-Books and materials; Nursing Central app	\$1200	
HESI testing package with case studies and remediation	\$400	Paid directly to vendor in installments over the 4 semesters
Scrub Uniforms	\$122	
Lab Coat	\$60	
Shoes	\$85	
Health Screen and Immunizations	\$200	Varies widely depending on need
Supplies (bandage scissors, watch, stethoscope, clipboard)	\$160	
BLS Certification	\$110	
NCLEX Review Course/Materials	\$350	
NCLEX Application Fees	\$600	
Drug Screen/Background check/Documentation Tracking Service	\$135	
2x2 passport-size photo	\$12	
Pinning Ceremony costs	\$97	
Cell Phone with texting capability	Up to \$700	Cost varies widely, plus monthly data plan
Personal Laptop or MacBook with wi-fi	\$300-800	Cost varies widely. NOTE: Chromebook is not sufficient to run some of the software required in the Nursing Program
TOTAL APPROXIMATE:	\$7,208	

Travel: 26.2 miles from MPC to Natividad Medical Center , 3.5 miles from MPC to Community Hospital of the Monterey Peninsula

STUDENT POLICIES

Grading/Retention/Promotion:

1. Each nursing course includes both theory and clinical components. The student must earn an average of 75% or better in theory AND evaluations of “satisfactory” in each clinical rotation in order to progress to the next nursing course. The student must demonstrate minimum competency in each specialty area in order to pass the course. If any clinical evaluation is unsatisfactory a grade of “F” will be assigned for the nursing course.
2. Theory grade will be based on: MCCSN required exams (dosage calculation, theory exams, and standardized testing) which must be 75% to pass the course. Additional assignments may be graded with no more than 5% of total points earned and will be added to a students’ grade only if passing. The following grading rubric will be used to determine letter grades:

Percent Score	Letter Grade
100-90	A
89-80	B
79-75	C
74-67	D
<67	F

3. Students are expected to purchase the required HESI product(s) prior to beginning the nursing program. HESI is currently used as a standardized/predictive assessment tool. Students must complete the assigned HESI exams and complete an individualized remediation plan if the proficiency level of 850 is not met. (05/15)
4. Nursing IV (N52D) students who achieve a HESI score of 850 or greater on the comprehensive exam (03/15) may choose the option of using only the first three exams to calculate their N52D course grade. Students selecting this option would not be required to take the N52D final exam. The final course grade would be calculated using only the three theory exams. The theory grade must be 75% or greater to choose this option.

Students who achieve a HESI score of 849 or less on the comprehensive exam (03/15) and/or whose theory grade is below 75% on the first three exams must take the final exam for the N52D course. The final grade will be calculated using all four exams. The score on the standardized assessment test is not used to calculate any portion of the N52D grade for any students, regardless of the level of their performance on the exam(s). Students will sign a Student Waiver for N52D Final exam form immediately after successful passing HESI score of 850 or greater.

6/4/04

Rev. 0/01, 01/10, 06/10, 06/13, 03/15, 05/19

Students have the option of taking the final exam as long as their theory grade is 75% or greater and they have achieved a HESI score of 850 or greater on the comprehensive exam (03/15) to improve their overall theory grade. If the score on the final exam is equal to or higher than the total of the three theory exams, the final exam score will be applied to their final course grade. If the score is lower than the total of the three theory exams and does not improve the student’s overall grade, the

final exam grade will be eliminated from the overall final course grade. Students who have documented testing accommodations are responsible for notifying the course coordinator in advance of assessment testing so that necessary accommodations can be arranged.

5/08

rev. 6/09, 06/10, 06/13, 03/15

5. The clinical experience is evaluated on a satisfactory/unsatisfactory basis. An unsatisfactory clinical evaluation results in a grade of “F” for the course. Refer to the “Skills Inventory Policy” and subsequent list and the Medication Administration Policy for specific criteria necessary to obtain a satisfactory clinical evaluation in each of these areas as well as additional evaluation criteria found in each course syllabus.

06/13

6. Students are responsible for meeting all course objectives. These objectives will be covered by classroom lecture, clinical experience and/or independent study.

7. All assignments must be completed by the due date in order to achieve an evaluation of “satisfactory” for the clinical component of each nursing course. Timeliness is a professional responsibility inherent in the role of the nurse and critical to patient safety, therefore students are expected to submit all scheduled lab and clinical assignments on time. The first late assignment submission during the semester will result in an “NI” (needs improvement); second late assignment submission will result in an “NSI” (needs significant improvement); a third late assignment submission within the same semester may lead to a grade of U on the clinical evaluation tool, and a failing grade for the course.

8. An instructor may assign an “incomplete” if all assigned work is not completed by the end of the semester. Students receiving an “incomplete” must remove the “I” prior to the first day of the subsequent nursing course.

9. All class materials, including electronic materials posted to Canvas are for the exclusive use of students currently enrolled in the nursing course, and may not be distributed. To do so is a violation of copyright policy and may be subject to disciplinary action. (06/10)

10. Students may not enroll in nursing courses until each prerequisite course has been completed with a “C” or better.

Academic Honesty Pledge

At the beginning of each exam, students will be asked to reaffirm their pledge of academic honesty and integrity.

Maurine Church Coburn School of Nursing Academic Honesty Pledge

Honesty and integrity are essential principles of the nursing profession. All MCCSN students are expected to behave as honest and responsible members of an academic community. Nursing students have tremendous responsibility to maintain the highest level of academic honesty and integrity as they prepare to enter a profession with those principles as a cornerstone.

Cheating on exams or projects, plagiarizing or any other form of academic dishonesty are clear violations of these principles.

As a student of MCCSN, I solemnly pledge to follow the policies, principles, rules, and guidelines of the nursing program with respect to academic honesty.

By agreeing to this pledge, I promise to adhere to exam policies and maintain the highest level of ethical principles during the exam period.

(06/2020) (adapted from University of British Columbia, College of Engineering)

Exam Policy Violations

Violations of the expected standards of conduct include, but are not limited to, the following:

- **Cheating:** Cheating is the attempt to gain improper advantage in an academic evaluation. Examples of this kind of dishonesty include: obtaining a copy of an examination before it is officially available, learning an examination question from another student before taking the examination, or consulting an unauthorized source during an examination. These sources could include electronic sources, paper sources, or human sources. Submitting part or all of work done by another student as one's own work is also cheating. This also includes sharing your own work with other students in any form (via email, posting on the internet, etc).
- **Unprofessional Conduct:** Including lying, misrepresenting the truth, intentional omission of fact, and falsifying records.

Consequences of exam misconduct may include, but are not limited to: a grade penalty, a "Needs Significant Improvement" grade on the student performance evaluation, a failed grade for the exam, or depending on the severity of the examination violation, the student may be referred for possible dismissal from the School of Nursing, as outlined in the MCCSN Student Handbook. This is consistent with MPC catalog rules and regulations for "Discipline" and "Students' Rights & Responsibilities."

Face-to-Face Exams

To minimize disruption and to maximize test security, the following exam procedures will be implemented:

1. For 30 minutes prior to the exam start time, there will be no conversation permitted in the classroom.
2. Examinations will begin promptly at the beginning of the scheduled class period. Students who arrive later than the scheduled start time will not be allowed to enter the testing room. Latecomers may take the exam during the "Examination Make-Up Session"; the date for the make-up will be scheduled at the discretion of the course coordinator following the procedure outlined in the Student Handbook. (rev. 01/19, 05/19)
3. Students should not congregate outside the classrooms or in the atrium before, during or after the exams. (rev. 5/17)
4. All students are required to remain in the classroom for a minimum of one hour from the time the test begins. Students who complete their exam in less than one hour are expected to remain seated quietly at their desk.
5. The expectation is that students will not leave the room during the test and will turn their cell phones off. (rev 06/09)
6. 90 seconds per test item are allocated for completing the exam. (rev 06/09, rev. 05/18)
7. Students are expected to report to the proctor any incidents of academic dishonesty that they observe while testing. For example, a student using notes, looking at someone else's exam, or using a cell phone or other technology during the test.

8. Students are expected to maintain confidentiality regarding exam content. It is considered academic dishonesty to share test information with any student who has not yet taken the exam including those from subsequent classes.
9. Proctors are available during the exam period to ensure test environment integrity. They will not answer questions related to content or vocabulary. (rev 8/22)
10. Students are required to use testing software, ExamSoft, on their own laptop for all course examinations. (rev. 8/22)

Testing Accommodations

A student experiencing learning difficulties may benefit from a learning skills assessment offered at the Access Resource Center on campus. It is highly recommended to arrange for this assessment prior to entering the nursing program or prior to the first exam.

A student receiving authorized accommodations for learning or testing through the Access Resource Center will contact the Student Success Coordinator at the School of Nursing to initiate the accommodation process as early in the semester as possible. A special accommodation contract will be initiated and must be completed at least one week prior to the first exam. Please allow at least two weeks for this process to be completed. (rev 06/09)

Students will notify the proctor immediately in the event they have not received their accommodation as written. If the situation is not resolved, the student must immediately notify the instructor of record. (rev. 06/14)

Students should note that special testing accommodations may be made by the National Council of State Boards of Nursing during the RN licensure exam (NCLEX-RN). This is allowed only for students who submit a request for accommodations, accompanied by a documented professional evaluation along with the application to take the licensure exam. Therefore, any student who believes they need extra time for exams throughout the program is encouraged to seek an evaluation from the college's Access Resource Center early in the nursing program, in order that they might request this accommodation for the licensure exam. (rev. 05/05 reviewed 05/15)

Examination Make Up

Instructors recognize that due to illness or unavoidable conflict, students may miss a scheduled examination. To accommodate these students, an "Examination Make-Up Session" will be scheduled at the discretion of the course coordinator or level faculty. Exams taken at the examination makeup session will have the equivalent of six (6) percentage points deducted from the percentage score earned on the examination.

If a student is unable to be physically present for an exam due to circumstances beyond their control (i.e. isolating for infectious disease protocols) but are able to be remotely proctored the faculty may consider live online proctoring for the student. The student must make arrangements with the course faculty before the day of the exam.

If the student is unable to take the final exam as scheduled, the student must arrange a make-up test date with the course coordinator. The equivalent of six percentage points will be deducted from the percentage score earned on the final exam.

Students must notify the course coordinator in writing prior to the examination make-up to ensure that the examination will be available. Students who do not follow the examination make-up procedure will be assigned a grade of "O" for the missed examination. (05/19)

Post-Examination Review Procedure for Face to Face Exams

Nursing faculty recognize the importance of post-examination review for student learning. Following completion of item analysis, the course coordinator will schedule a test review which will begin promptly at the beginning of the scheduled date. Students who arrive later than the scheduled start time will not be allowed to enter the classroom. The first 10 minutes of test review will be quiet for students to review their exam, followed by a period of question and answer as needed. No photography or recording devices are allowed in the classroom during test review. No notes may leave the classroom. (5/17, 5/19).

Graduation/Eligibility for NCLEX-RN

Students who complete all courses indicated on the Curriculum guide are eligible to receive an Associate of Science Degree from Monterey Peninsula College and are eligible to take the National Council Licensure Exam for Registered Nurses (NCLEX-RN). Students may also be eligible to take the NCLEX-RN as non-graduates if they complete the 30-unit option for Licensed Vocational Nurses, or complete all California Board of Registered Nursing requirements for licensure. Please refer to the Policy for Advanced Placement for LVNs.

Credit by Examination/Military Education Credit

The “Credit by Examination” and “Military Credit” policies of Monterey Peninsula College, outlined in the MPC college catalog, are available for nursing courses. Applicants interested in this option should seek assistance from the Director, School of Nursing to clarify the policy and procedure for awarding credit by examination.

Attendance

The attendance policy for clinical experiences is subject to change in response to public health policies in place for the County and for clinical agencies as disease transmission rates dictate. Students should be mindful of the expectation that sufficient clinical experiences are required to meet both course objectives and existing regulations for nursing programs and plan to attend all scheduled clinical shifts. Clinical absences in excess of 13.5 hours are considered excessive. Faculty *may be able to* alter specific dates of attendance based on the situation imposed by the pandemic, but there is no guarantee. If students need to be absent beyond the allowed 13.5 hours, faculty will make a reasonable effort to accommodate. If, for any reason, students who are unable to make up the required hours and/or cannot meet the course objectives by the end of the semester the student will not progress (07/2020; 08/2021). Students need to plan their personal schedules to ensure that they are available to complete their entire clinical day. Students may not be excused early from clinical to meet the demands of their work schedule. Clinical hours provide an essential, experiential part of the educational process. Absence from the clinical experience affects the student’s ability to apply nursing concepts in the clinical setting. In addition, clinical instructors are unable to evaluate students who are absent from clinical. Therefore, for clinical absences of 13.5 hours or less each semester, clinical instructors will structure alternate methods for students to assist them to meet clinical objectives. (08-2021)

1. If the student must be absent, it is the student’s responsibility to notify the clinical instructor before the beginning of the clinical day. Failure to do so will be reflected on the performance evaluation tool.
2. The clinical instructor will meet with the student to determine the best method by which the student can meet the missed clinical objectives and to make up the time. Students should be prepared to modify their personal schedule to complete the assigned make-up.

3. A clinical absence report form will be completed documenting discussion of the absence and student progress for meeting clinical objectives.
4. The clinical instructor may require a statement from the student's physician following illness or injury. The purpose of the statement is to inform the school of any limitations in physical activity and to ensure that the student is capable of providing safe care to patients without injuring self or others. (rev. 04/02)

Because timeliness is a professional responsibility inherent in the role of the nurse and critical to patient safety, students are expected to arrive on time for all scheduled lab and clinical assignments. The first tardy episode during the semester will result in an "NI" (needs improvement); 2nd occurrence will result in an "NSI" (needs significant improvement); a third tardy episode within the same semester may lead to a grade of U on the clinical evaluation tool, and a failing grade for the course. The instructor has discretion to send a student home after arriving late, and this will result in a clinical absence.

California Nursing Students' Association (CNSA) Conference Participation

Students involved in CNSA may have the opportunity to attend state and national conferences. As such, the student must be in good academic standing (75% or better in theory and successfully completing all clinical/lab experiences to date). In the event that there is a conflict with clinical schedules, the following will apply:

1. At the discretion of the clinical instructor, clinical absences may be excused for non-specialty areas if the student attends a CNSA/NSNA sponsored conference during scheduled clinical time. In some instances it may be necessary to make up clinical absences.
2. Students assigned to specialty areas (obstetrics, pediatrics, mental health, geriatrics) will not be able to attend if conflicts exist. (06/09)

Non-Student Presence in Classroom/Lab

Only registered students are allowed to come to class/lab sessions. Space is limited, patient confidentiality must be safeguarded, and content may not be suitable for non-health professionals.

Professional Classroom Conduct for Nursing Students

To ensure that the educational environment will be respected and to provide the best learning opportunity for all students, it is expected that:

- Students will be on time to class.
- Students will remain in class until break. (06/09)
- Students will return following class break on time and without prompting from the instructor.
- Students will not eat or drink in the classroom, with the exception of water.
- Students will not allow cell phones to ring during class.
- Students will not make cellular phone calls in the classroom.
- Behaviors such as talking, reading and sleeping during class are distracting to the instructor and fellow students and therefore will not take place.
- Students will be responsible for their own classroom preparation such as delivering papers and copying notes, and will not ask the MCCSN secretary to be responsible for these activities.

Students who do not meet the expectations for professional behavior should not expect faculty to write them references for employment or scholarships. (06/98)

Virtual Classroom Expectations

MCCSN Zoom Meeting Best Practices

Scheduled meetings may be conducted using Zoom. Synchronous meetings will be posted on either the corresponding Canvas course or via specified MCCSN Google Calendar. The guidance below provides useful *Best Practice* information to participate in synchronous course meetings and lectures. To meet student learning outcomes and course objectives, faculty may require cameras to be turned on during portions of nursing courses as stated in the syllabus. When not explicitly needed cameras can be turned off. 05/2021

Well in advance of the meeting:

- Download the Zoom [application](#) for your device and familiarize yourself with it.
- Use a device (computer, tablet or mobile phone) that has both video and audio capabilities.
 - Locate the *Mute* button, the video *On* and *Off* button, the microphone, the “*Raise your Hand*” feature and the “*Chat*” function ahead of time.
- Choose a location so that your face will be clearly visible to other participants; avoid lighting behind you, if possible. In small group meetings, students are expected to have their video “On” to create an engaged online learning environment.
- Make sure that your background (visible to others in the meeting) is professional looking; avoid a messy room. Alternatively, explore the use of “[Virtual Backgrounds](#)” to protect your privacy and not have visual distractions present.
- Choose a room where you can minimize distraction and interruption from children and pets if possible; it is best if you can close the door.

Breakout Rooms

- Some meetings may be conducted using *Breakout Rooms* which allow participants to conduct small group discussion for a period and then rejoin the large group later. Review this website for [Participating in Breakout rooms](#) (<https://support.zoom.us/hc/en-us/articles/115005769646-Participating-in-Breakout-Rooms>)

On the day of the meeting:

- Dress appropriately.
- Assemble texts, printed materials and notes specific to the meeting.
- Inform other occupants in the household that you are going into a professional meeting that requires privacy and quiet.
- Log in at least 10 minutes prior to the designated start time to allow time to troubleshoot any issues.
- Be prepared to engage in active learning. Avoid cell phone use, browsing on the internet, or conversing with others not in the course.
- *Mute* your microphone when not speaking during the meeting. If you need to step away from the meeting for a moment, press the *Stop Video* feature so that your name is still visible but there is minimal distraction to others.
- The host of the meeting may *Mute* all participants to avoid any distractions; use the *Chat* function to ask a question or make a comment.

At the end of the meeting, press the *Leave Meeting* red button to exit (06/2020)

Classroom Recording Policy

Except for recordings of lectures created and posted by the instructor (06-2020; 08-2021), recording by students in the classroom is strictly prohibited except as an accommodation for a verified disability as required by law. Students who need this accommodation are required to submit the *Student/Instructor Classroom Recording Agreement* to the level coordinator after consultation with the Access Resource Center Counselor.

The purpose of scheduled classroom learning time is to assimilate concepts that the student brings to the classroom from the completed learning activities. This involves exploration of concepts that are new or unclear, sharing of ideas, learning from each other, applying theory to clinical situations, laying the foundation for future learning, and practicing critical thinking skills. Learning activities in class are interactive in nature, designed to promote critical and independent thinking. Nursing students need to feel comfortable sharing personal observations, thoughts, and questions in the classroom. The content discussed is often sensitive. Therefore, recording some types of classroom discussion may be inappropriate, and at times must be excluded from the recording. At the direction of the faculty member, students may be asked to turn off the recording device during any of the following:

- Classroom discussions of a sensitive or personal nature
- Portions of the lecture which are irrelevant to the course content
- Discussion of clinical experiences

To confirm that content is not being inappropriately recorded, classroom recordings may be examined by faculty upon request. In the event the student leaves the classroom, the recording device must be turned off. No recording is allowed during scheduled study group sessions and during clinical orientation. (11/17) It is the student's responsibility to take every reasonable precaution to prevent accidental sharing of recorded information with bystanders who may overhear it. Students are expected to erase all recordings at the end of the course, or ask the Access Resource Center to erase them, and will date and initial the *Student/Instructor Classroom Recording Agreement* on file with the nursing level coordinator to document the date that the erasure was completed

Failure to turn off recording devices when requested to do so, or violation of any portion of the *Student/Instructor Classroom Recording Agreement*, may result in discontinuation of the recording agreement and may be considered grounds for dismissal from the nursing program (03/17)

Printing Policy

Printing services are available at the MPC library at the individual's cost. There is no printing capability at the school of nursing.

Cell Phone Use in Classroom or Clinical Setting

Cell phones are to be used per agency policy only. Students are required to make personal telephone calls outside of classroom/clinical time.

Cell phones and other smart devices are to be used in the classroom and/or clinical setting in the context of a learning tool to access appropriate apps and not for personal purposes.(06/04; rev. 02/07, 05/19) Students should refrain from cell phone distractions during online class meetings and must adhere to exam rules of the assigned proctoring service which prohibits cell phones in the testing area.

(06/2020)

Confidentiality

All identifiable patient information is confidential. This includes all information related to the patient's medical concerns as well as personal or business concerns. This information may not be discussed with anyone except in the following circumstance(s):

- when necessary for providing proper care
- for educational purposes with other students and educators, but only as approved by a nursing school faculty member
- for purposes related to the operation of the nursing school or the clinical environment in which the patient resides, but only as approved by a nursing school faculty member or an employee of the clinical facility

When engaging in necessary conversations related to patients, it is the responsibility of the student to ensure the conversation is not overheard. Any communication with a patient or family member must occur during the student's clinical time.

Students may hand copy information from the patient's chart for educational purposes, such as completion of paperwork required for school, or for research outside of the hospital. In these instances, no identifiable patient information may be used. This includes but is not limited to the patient's name and address, license numbers, relative's names and addresses, e-mail addresses, etc. In no instance may any patient identifying information leave the clinical setting, any portion of the chart be photocopied, or any patient data printed from the computer for the purpose of student use outside of the hospital.

Students may use the computer to retrieve data pertinent to their care of the patient, and may hand copy appropriate information for their educational use. Any information with patient identifying information must be discarded in the appropriate receptacle at the clinical agency or turned into the clinical instructor prior to leaving the clinical setting. This is the responsibility of the student.

Violation of these confidentiality policies will result in an NI, NSI, or U being assigned on the clinical evaluation tool and may result in an "F" for the course, depending on the severity as determined by faculty discretion. Students may also be held civilly and criminally liable for any breach of confidentiality regarding a patient.

(rev. 09/05(reviewed 05/15) (10-21-19)

Social Networking

It is required that students keep all patient information or discussion off any social media sites. This includes the use of social networks, blogs, wikis, forum boards, texting or any other form of user-generated media.

Information prohibited includes any references to patients, their families, and clinical settings. Even if information excludes identifiers such as name, date, place or circumstance, a breach of confidentiality may be possible and sharing of such information electronically or in any other manner is unacceptable. Students must be aware of their association with the Maurine Church Coburn School of Nursing (MCCSN) and the profession of nursing in general, while participating in any form of electronic media.

Students who identify themselves as MCCSN students or as a nursing student in general, should ensure that their content and profile is appropriate on any social networking platform. The public holds you to a higher standard. Therefore, students should be cognizant of all interactions on social networking sites to prevent compromising the sacred public trust. (reviewed 05/15)

The use of social media to communicate with patients and/or their family members particularly about healthcare issues is prohibited due to the risk of potential violations and inadequate security associated with this technology. (08/17/11)

Simulated Clinical Experience

All students enrolled at MCCSN will participate in simulated clinical experiences. This will require each student to sign a confidentiality agreement and consent to video. Students who do not sign or who violate the confidentiality agreement will not meet the clinical objectives and therefore, will not pass the nursing course in which they are enrolled. (05/08)

Unsafe Practice Policy

The school of nursing follows the provisions established by the [American Nurses Association 2015 Code of Ethics](http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of-Ethics-For-Nurses.html) (<http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of-Ethics-For-Nurses.html>)

The safety of the patient is of the utmost concern. The instructor, as an expert practitioner, is in the best position to evaluate the safety of the student's nursing practice. Safe nursing practice may be compromised by physical or mental impairment, unethical behavior, including but not limited to dishonesty, acting outside of professional boundaries as documented [in A Nurse's Guide to Professional Boundaries](https://www.ncsbn.org/ProfessionalBoundaries_Complete.pdf) (https://www.ncsbn.org/ProfessionalBoundaries_Complete.pdf) or from the student's lack of knowledge or preparation to care for the patient. If, in the instructor's judgment, there is any question of the student's ability to safely care for patients, the instructor has the authority to remove the student from a patient care assignment or from the clinical area. The clinical instructor will immediately notify the course coordinator and the Director, School of Nursing.

If an instructor notes any signs or symptoms indicating impairment, such as odor, or physical or behavioral changes, the student will be removed from patient care and steps outlined by the policy for [Pre-Admission Screening and Reasonable Suspicion of Impairment](#) (p. 50-51) will be followed.

The student, the instructor, the course coordinator and the Director, School of Nursing will meet as soon as possible to evaluate the situation and determine if and when the student may be allowed to return to the clinical setting. The evaluation will take into account the student's ability to comply with the technical standards established by the school of nursing, which are deemed necessary for carrying out safe patient care. If the evaluation establishes that the student is safe to return to clinical, a written contract will document the incident and conditions for continuing in the course.

Students will be provided with referral information regarding counseling and treatment options.
(05/98) (rev 05/16)

Students Rights and Responsibilities

The nursing faculty adheres to the college's policy regarding student rights and responsibilities, and the student complaint and grievance procedures. A detailed explanation, including the grievance procedure, is outlined in the Monterey Peninsula College catalog.

Students have many opportunities to provide verbal and written feedback regarding all aspects of the nursing program, including course, clinical, and instructor evaluations, and participation in nursing program committees. Students with individual concerns are encouraged to discuss the concern with their instructor. If resolution is not achieved, the student should meet with the Director, School of Nursing. If resolution is not achieved at this level, the student should follow the Student Complaint and Grievance Procedures applicable to their situation, as outlined in the MPC college catalog. (rev. 06/02)

Students are advised that information contained within educational records and/or concerning academic performance is shared among faculty or staff who have a legitimate educational purpose in accessing

such information, consistent with provisions of the Federal Family Educational Rights and Privacy Act (FERPA). All student information is accessed by faculty or staff in the least intrusive manner possible, and is not released outside of the school of nursing unless required by law or authorized by the student. (08/14)

The MPC college catalog delineates Standards of Conduct for all MPC students. In accordance with the statements in the college catalog, nursing students shall be subject to the following discipline for incidents of academic dishonesty:

- 1) A grade of "O" will be awarded for violation of examination rules with no opportunity for re-examination.
- 2) A grade of "unsatisfactory" will be awarded for academic dishonesty associated with written assignments, with no opportunity for re-submission.

Any other breach in the standards of conduct identified in the MPC catalog will be dealt with on an individual basis.

Standards of Conduct - Civility/Incivility

In addition to the [Monterey Peninsula College Standards of Conduct](#), MCCSN students are held to the highest ethical and legal standards in the classroom, lab and clinical settings. It is expected that all students maintain civil, respectful and professional conduct in all academic and clinical interactions. Physical, verbal and digital harassment in any form will not be tolerated. Any form of incivility is unacceptable, including disruptive behavior, disregard for others, or actions that create an atmosphere of disrespect, conflict or hostility. Student misconduct related to incivility may result in an NI, NSI, or U being assigned on the performance evaluation tool and may result in an "F" for the course depending on the severity of the behavior (adapted from Rutgers School of Nursing, 2023). (8/23)

MPC Email Electronic Communication

Students are required to check their assigned MPC email (Canvas). The mpc.edu (Canvas) platform will be used to communicate electronically with students. It is the student's responsibility to maintain communication with the faculty and the college via these methods. Computers are available for student use at the Learning Resource Center computer lab and in the MPC library. (08/11) (reviewed 05/15, 05/17)

Withdrawal/Re-entry

Students wishing to return after withdrawing from the first semester (i.e. NURS 52A, NURS 54 or NURS 55) within the first 6 weeks (06/2020) must re-apply and will be accepted based on a new date of application only if in good standing at the time of withdrawal. Good standing is defined as a passing grade in theory and a satisfactory evaluation with no unresolved contracts. (08/11, 05/13)

Students who withdraw at any time in the semester (05/13) from NURS 52B, NURS 52C, or NURS 52D while in good standing in both theory and clinical, may return one time for the following year **if space is available in the respective course.** (05/13, 07/2020)

Students who re-enter the School of Nursing are subject to the graduation requirements in effect at the time of re-entry. (08/11)

Students who fail a course in the nursing program, or are not in good standing at the time of withdrawal, are not permitted to return.(05/17) Students requesting to transfer from another nursing program must submit a letter from the program director or designee verifying good standing at the time of separation. Any student who fails or withdraws from the School of Nursing is encouraged to meet with the Director, School of Nursing to complete an Exit Interview form at the time of withdrawal or failure.

Reapplication after early withdrawal

Applicants are expected to accept a seat in the nursing program in good faith, prepared to be a full time student for the entire duration of the nursing program. Re-applications of students who withdraw from their first semester within the first six weeks will not be considered for two years. At the time of reapplication, the applicant must submit a letter of petition explaining how circumstances have changed to support the student's full time enrollment in the nursing program, and this explanation will be evaluated before a Phase 1 decision is made. (5/17)

Student Background Checks

Clinical agencies have a right to establish criteria that would exclude a student from placement at their facility. The use of background checks on individuals working in clinical settings is one of the means agencies use to help protect their patients (BRN Guidelines, 11/10) Students are required to comply with all background check authorizations and releases as required by clinical agencies. The cost of these background checks will be made known to students in advance by way of estimated program costs published in the *Information and Application Packet* and on the MCCSN webpage. The clinical agencies to which the students assigned will be given electronic access to the background screening results that have been purchased from *Castlebranch®* as listed below. A Human Resources designee at the clinical facility will access the following results with a secure password through an account set up by *Castlebranch®*:

- 7-year County Criminal Search, including current maiden and alias names
- Nationwide Record Indicator with Sex Offender Index
- Nationwide Healthcare Fraud Abuse Scan
- Social Security Alert
- Residence History

(rev. 05/15)

Selected applicants are given conditional acceptance to the nursing program and must pass a background check for each required facility according to agency procedures prior to final admission to the program. In the event that a required clinical agency notifies the school that a selected applicant has failed a background check, (06/13) admission will be denied due to inability to meet clinical objectives. If the clearance by the clinical agency is revoked during the nursing program, the student may not be permitted to progress in the nursing program (05/18).

Drug Screening Prior to Clinical Placement

Students are required to comply with drug testing as required by clinical agencies. The cost of the drug test and any associated provider is the responsibility of the student. Depending on the student policies of the clinical agency for data management, results may be sent directly to the agency, or delivered to the agency by the school of nursing. In the event that a clinical agency notifies the school that a student has failed a drug screen, a reasonable attempt is made to find an alternate clinical placement that meets the course objectives. Because students must participate in clinical experiences in order to meet the outcomes of the nursing program, a student may be dismissed from the program due to the inability to progress if a clinical placement is not available to meet the course objectives for that given semester.

(08/15)

Occupational Risks

The occupation of nursing exposes its members to risks to their personal health and safety, including but not limited to the following hazards:

- exposure to communicable diseases through contact with blood and body fluids, airborne or droplet-based pathogens
- physical injury as a result of lifting and moving patients and objects.
- psychological trauma due to involvement with emotionally charged situations.

The faculty of the School of Nursing prepares nursing students to deal with these risks through education and evaluation of proper use of personal protective equipment, safe patient handling and management of escalating behavior. However, these risks are inseparable from the practice of nursing. Students should seek further clarification about these risks from their health care provider and/or, the Director, School of Nursing as appropriate. By enrolling in the nursing program, students accept these risks willingly and agree to adhere to all college, class-specific, and clinical facility protocols for safety and for reducing disease transmission. Students are accountable for immediately reporting to the supervising staff and to the instructor or Director (designee) any injury sustained during class, lab or clinical activities, including MCCSN-related volunteer activities. Students are expected to seek appropriate medical evaluation and follow up as directed. (Note that medical treatment under campus workers compensation is limited to accident or injury, and does *not* cover any illness, including illnesses incurred during the course of study).

Labor Disputes/Strikes

If a strike occurs at an institution where nursing students are scheduled for clinical experiences or other activities, the experiences will continue as scheduled, as long as in the judgment of the instructor there is no threat of danger to nursing students or faculty. If students are in an agency affected by strike or other related labor dispute, such as "sick-out" their role will remain as nursing student, and they will not replace staff. The nursing instructor will determine whether students will continue the clinical experience at the agency, or whether the experience should be relocated to the School of Nursing or canceled. The Director, School of Nursing, should be consulted as a part of the decision making process and kept informed regarding the situation.

Emergency Situations

In the event of a campus emergency, students should follow all MPC directives as communicated via e-mail and phone, as well as website and media announcements. Campus Security can be reached at (831) 646-4099. For an emergency situation requiring immediate attention, call 911. Should a campus incident result in canceling of classes, please check MPC e-mail for updates from the instructor or administration.

In the event that there is an emergency or natural disaster (such as flood, earthquake, major accident, etc.) while students are at a clinical agency, the instructor will determine whether clinical experiences can continue, or should be canceled. Clinical must be canceled if the instructor finds it necessary to leave. If students choose to leave even though clinical is not canceled, the hours missed will be counted as a clinical absence. The Director, School of Nursing should be consulted as a part of the decision making process and kept informed regarding the situation. If students remain as volunteers, they must serve in the role of "volunteer" and not as that of "nursing student". The School of Nursing will assume no liability for actions of students serving as volunteers.

Faculty Coordinated Scholarships

Donors may designate monies donated to the School of Nursing to be used for student scholarships.

During the fall semester every year, a faculty representative of the Student Services and Financial aid

Committee will distribute “Student Profile” sheets to each level. The form is used to collect demographic, financial, and service data from each student who wishes to be considered for a faculty-coordinated scholarship when eligible. Participation is voluntary, but any student who wishes to be considered must complete one. The information is used to match student characteristics with donor criteria. The forms are confidential and are kept in a locked faculty cabinet and shredded after separation from the nursing program.

In instances of faculty-coordinated scholarships, students selected must show evidence of satisfactory academic performance as verified by references and grade point average (GPA) from application through disbursement of funds. Satisfactory academic performance is also defined as not having any unresolved “NSI” evaluations in the clinical setting. Upon receipt of donor funds, students are expected to write an acknowledgement promptly to the donor. (08/11)

Student Success Program

The Student Success Program offers support, counseling and referrals for all students who have been identified as academically at risk due to low TEAS scores, low theory grades, and/or unsuccessful return demonstrations or skills validations. The emphasis of this program is to address student success through test taking strategies, referrals for testing accommodations, additional resources, and/or developing a plan for skills remediation. (06/2015)

Faculty and staff are committed to equity, transparency, and collaboration with our students for optimal success. If a student is identified as needing additional support for success, either in theory or clinical application, the student will be asked to meet with the level Student Success Coordinator. The Student Success Coordinator and/or nursing instructor will initiate the following forms to assist and guide you through the specific remediation process.

1. **Dosage Calculations remediation form:** the medication administration policy requires that all students demonstrate competency in calculating dosages by passing a dosage calculations exam at the beginning of each semester. Two opportunities are provided to take the exam, and competency must be demonstrated with a score of 95% or greater. If your score is less than 95% after the first attempt you will be provided an opportunity to review your exam and make a plan for success. Meet with your level student success coordinator for assistance throughout the remediation process. Refer to MCCSN student handbook for policy details (pg, 32).
2. **Low Theory Grade form:** will be generated if you score below 75% cumulative course grade. Meet with your level student success coordinator to help facilitate strategies for testing success.
3. **Clinical Absence form:** will identify date and number of hours missed and a plan on how to make up the clinical hours.
4. **Skill Remediation contract:** Students must maintain proficiency of all skills that have been taught throughout the nursing program. This form identifies a skill that has not been successfully demonstrated. Students are responsible for contacting an LRC instructor to discuss the contract, plan for practice and return demonstration by the due date. Meet with your student success coordinator for assistance as needed. This remediation form will have a due date so make sure you contact the available instructor via email of your need to meet with them.
5. **Continued Area of Improvement (CAC):** If at the end of the semester, the instructor identifies areas of concern that may interfere with the student’s future success in the clinical setting, the instructor will provide the student with a “Continued Areas of Concern” (CAC) contract. The student will meet with the level faculty before the first scheduled clinical day to discuss the continued areas of concern.

6. **Needs Significant Improvement (NSI):** form is implemented when the instructor has serious concerns about student performance. It can be assigned anytime during the semester, and is always accompanied by a Clinical Evaluation Addendum: Needs Significant Improvement form. This form outlines a specific plan for improvement, including time frame for prescribed actions in order for the student to continue in the clinical setting.
7. **Unsafe Practice Notice:** will be generated when safe nursing practice is compromised if the student is impaired by injury, physical and/or mental illness, or a profound lack of knowledge in preparation to care for the patient.

Requesting Letters of Reference

Students who wish faculty to provide a letter of reference must make this request in writing, and must sign a form authorizing release of this information. A separate written request and authorization must be made for each reference sent. The student must designate on the request form whether the MCCSN or the student will send the reference.

A reference release form for this purpose is posted to the Meta 204-207 course sites ("Student Services/Financial Aid). Please allow two weeks for faculty to complete reference requests.

A written request form is required for release of any information. Students may also request transcripts from the MPC Admissions and Records office for documentation of attendance and/or graduation.
(reviewed 05/15)

Faculty will write letters of reference for students who are in good standing in both theory and clinical components of the course and who exhibit professionalism. This includes, but is not limited to, arriving to class/clinical on time and submitting all written work according to the established due date(s).

Basic Life Support

All students must maintain current BLS certification as a Health Care Provider issued by the **American Heart Association**. No other basic life support certification is acceptable. (01/10)

Grooming and Dress

The Maurine Church Coburn School of Nursing (MCCSN) uniform as described below must be worn by students in the clinical area. Any student not conforming to standard dress code may be asked to leave the clinical area and will be considered absent for that day.

The clinical instructor will determine if attire is suitable. Individual clinical facilities and out-rotations may require modification of the dress code. Students will be informed of such modification at the time of orientation to each area.

1. The Maurine Church Coburn School of Nursing attire consists of:
 - * burgundy scrub top and matching burgundy pants from the approved vendor. (rev. 05/12)
 - * burgundy scrub jacket from the approved vendor is optional. (rev. 05/15)
 - * MCCSN logo will be embroidered and placed on the upper left chest area of the scrub top (rev. 05/12) and scrub jacket (if worn). (rev. 05/15)

- * solid-colored white, black, or burgundy top may be worn under scrub shirt excluding thermal styles. (rev. 05/12, 10/21/19)
 - * white (blazer length) lab coat which may be removed while providing care.
 - * school patch must be sewn on the left jacket sleeve, two fingers below the shoulder seam.
 - * socks or stockings must be worn. They must be undecorated, and flesh tone, black or white.
 - * shoes must be white or black and clean with a closed toe and heel. Cloth shoes are not acceptable. (rev. 5/17)
 - * all attire must be clean and free from unpleasant odor. Strong odors of perfume and/or tobacco are not acceptable.
 - * students will be issued agency specific identification (ID) badges and these must be worn at all times while in clinical facilities. (rev. 05/12)
2. Professional dress and the white lab coat with name badge may be required for students in select out-rotations and/or when collecting data while in the clinical area. In the case when professional dress is required, the professional dress code of the clinical facility must be followed. (rev. 06/07, 5/17)
 3. A white or burgundy color fanny pack is acceptable.
 4. Students are responsible for wearing a clean, neat, and professional hairstyle. The clinical instructors may request that a student modify this style.
 5. Beards and mustaches must be neatly trimmed to 1 inch or as required by the individual facilities.
 6. Fingernails must be short and well groomed. Clear nail polish is acceptable. Acrylic/artificial nails or adornments are not acceptable. (5/17)
 7. One ring and small pierced earrings (stud, one per ear) are acceptable. A nose stud (not greater than $\frac{1}{8}$ inch diameter) may be worn. No other pieces of jewelry are allowed. (5/17)
 8. Tattoos must be covered at all times.
 9. Locker space is not provided for students in the clinical areas. It is recommended that students bring minimal personal belongings into the clinical setting. (5/17)
 10. Accessories required include:
 - * bandage scissors (excluding mental health settings).
 - * ball-point pen with black ink.
 - * wrist watch with second hand.
 - * stethoscope with bell and diaphragm. (rev 06/09/03)

Are you pregnant? _____ Due date: _____ Allergies (list): _____

Lifting restrictions: None Yes If yes, please explain: _____

Student Signature: _____ Date: _____

Part II: To be completed by licensed health care provider (Physician, Physician Assistant or Nurse Practitioner)

Height: _____ Weight: _____ BP: _____ TPR: _____

Evaluate the systems below as applicable:

WNL	Document abnormalities		WNL	Document abnormalities		
	Neurologic			Heart		
	Head			Abdomen		
	Eyes			Back		
	Nose			Skin		
	Ears			Extremities		
	Mouth			Vision: Uncorrected	R	L
	Neck			Vision: Corrected	R	L
	Thyroid			Hearing:	R	L
	Chest					
Restrictions:						
		LIFTING <input type="checkbox"/>				
SPINE	<input type="checkbox"/> Yes <input type="checkbox"/> No	Yes <input type="checkbox"/> No		BENDING <input type="checkbox"/> Yes <input type="checkbox"/> No		

COMMUNICABLE DISEASE(s) Yes No

LIMITATIONS OF ANY TYPE Yes No

If yes to any of the above, please describe: _____

Does your examination reveal any physical limitations that would impact the student's performance in the nursing program? Yes No

Comments:

Based on this exam, I believe this student does not have any health condition (physical or mental) that would create a hazard to himself/herself, fellow nursing students, employees, patients, or visitors in health care settings.

Completed by: _____ Signature: _____
(Please print or use stamp)

Title: _____ Date: _____

Part III: Immunizations

In accordance with agency policies, CDC and California Department of Public Health recommendations for hospital and medical outpatient facility personnel, written documentation of the following **must be** submitted to the school of nursing before a nursing student may enter the clinical area. Immunity to infections may be documented by either vaccine administration or a positive titer. Vaccines and titers offer the most objective documentation and protections for the student and institution. **All titers must be IgG.**

NOTE: Immunization requirements are subject to change throughout the nursing program based on public health guidance and requirements imposed by clinical sites. 08/2021

1. Tuberculin Skin Test (TST): 2-step for first TST, then annual screening. 2-step can be done by submitting a negative TST, then a second negative TST **at least 7 days** but not more than 12 months later. A single QuantiFERON Gold-TB blood test may be substituted for 2-step TST initial screening or for the annual screening.

If a TST is positive, a baseline chest X-Ray must be obtained within six months prior to class start date AND TST Renewal Questionnaire must be completed.

***Do not obtain a TST screen within four weeks of an MMR or varicella or COVID mRNA vaccine.**

There are no sequencing restrictions for immunizations when a QuantiFERON Gold test is used.

2. Hepatitis B: At least the first 2 doses of the 3-dose Hepatitis B series. The second and third dose given one and six months after the first dose.

OR positive Hepatitis B titer (Anti-HBs)

3. Measles: Two doses of vaccine, at least 28 days apart. Usually given as MMR **OR** positive Rubeola titer.

***Do not obtain a TST screen within four weeks of an MMR or varicella vaccine**

4. Rubella: (One) Vaccine usually given as MMR **OR** positive Rubella titer

***Do not obtain a TST screen within four weeks of an MMR or varicella vaccine.**

5. Mumps: Two doses of vaccine, at least 28 days apart. Usually given as MMR **OR** positive Mumps titer.

***Do not obtain a TST screen within four weeks of an MMR or varicella vaccine.**

6. Varicella: Two doses of vaccine four to six weeks apart. **OR** positive varicella titer

7. Tetanus-Diphtheria- Acellular Pertussis (Tdap): Students must have a current Tdap immunization every 10 years that was given since the age of 19 years old. (rev. 08/22)

8. Flu Vaccination: Required annually in the fall or a declination form must be signed if a student refuses the flu immunization and a face mask must be worn throughout flu season per county mandate. (rev. 06/14)

9. COVID 19 Vaccination: Both doses of a 2-part series, or one dose of a single-injection vaccine **AND** Booster dose 5 months after previous full vaccination completed (1 or 2 dose series). (There is no titer option currently available. Requests for medical or religious exemptions will be submitted to clinical agencies for consideration but they may be denied). (07/2021, rev. 08/22)

All immunizations must be uploaded to third party vendor website by the first day of classes. The fee for this vendor is the responsibility of the student. (rev. 06/14)

Note: Monterey Peninsula College Health Services provides nursing students services which include injection visits and doctor visits for physicals, ONLY if the student is enrolled in classes and has paid the health fee at the time the student receives health services. (08/17/11; rev. 05-12)

Medication Administration Policy

After successful demonstration of medication administration skills in the Learning Resource Center (LRC) and passing a dosage/calculation proficiency exam, the student may perform medication administration in the clinical setting.

A dosage calculation exam will be administered at the beginning of each semester. The student will be given two opportunities to pass the exam with a score of 95% or greater. The student who does not pass within two attempts may not progress in the clinical component of the course. This will result in a clinical evaluation of “unsatisfactory” and a grade of “F” for the course. The dosage calculation exams will begin promptly at the beginning of the scheduled class period. The student who arrives later than the scheduled start time will not be allowed to enter the testing room. The course coordinator will schedule a make-up session. Late arrival is considered clinical time and will result in a grade of “Needs Improvement”(NI) on the clinical evaluation tool (rev. 05-19)

NURS 52A (NURS 54/55):

The first semester will include lab demonstrations on the following:

- a) medication administration via oral, subcutaneous, sublingual, intramuscular, topical, eye drops, enteral, and per rectum routes.
- b) spiking, priming, and hanging standard IV solutions through peripheral IV’s or INT’s.
- c) saline flush through an INT.
- d) general principles of safe medication administration.

Note: After successful return demonstration, the student may administer:

- medications with direct instructor supervision ONLY, including the entire process (steps 1-6 as noted below).
- IM RhoGam* during OB rotation.
- standard IV solutions with no additives.

52A: The following is the overall process of medication administration in the clinical setting with **direct instructor supervision ONLY**. *Direct supervision includes observing the student’s medication preparation as well as administration of the medication.*

1. Utilize six rights and three checks procedure
2. Quiz student on medications knowledge and safety parameters
3. Check dosage calculations as needed
4. Check prepared medication against medication administration record (eMAR)
5. Accompany student to bedside/patient and observe administration
6. Check students’ documentation of medication.

Medication Administration Policy

NURS 52B: Students will continue to administer medications via routes previously taught in 52A (54/55).

The second semester will include lab demonstrations on the following:

- a) administration of IVPB through peripheral IV's/INT's and through central lines with IV fluids infusing continuously.
- b) administration of fluids through a volutrol and medications via syringe pump in pediatrics only. (rev. 05/2018)
- c) medication administration through nasogastric/gastric/jejunal tube

Note: After successful return demonstration, the students may administer:

- IVPB medications with direct supervision by instructor or RN **at all times**.
- Students may hang IV fluids with added vitamins and electrolytes to each liter of IV fluids with instructor/RN supervision.

Students may observe and assist with blood products administration after theory is presented in class (i.e. spike and prime blood y-tubing, VS assessment).

52B: The following is the overall process of medication administration in the clinical setting. The direction supervision may be delegated to a staff RN if mutually agreeable with the instructor and RN. *Direct supervision includes observing the student's medication preparation as well as administration of the medication.*

1. Utilize six rights and three checks procedure
2. Quiz student on medications knowledge and safety parameters
3. Check dosage calculations as needed
4. Check prepared medication against medication administration record (eMAR)
5. Accompany student to bedside/patient and observe administration
6. Check students' documentation of medication.

In the medical/surgical setting, the instructor may waive step 5 for all PO, SQ and IM medications routes **ONLY** if the instructor has already observed the student administering medications to the assigned patient successfully and **gives verbal approval**.

Pediatrics: During inpatient pediatrics, the student **MUST** have direct instructor supervision during medication administration for steps 1-6 **at all times**. The student may administer medications via syringe pump. (rev. 05/2018)

Medication Administration Policy

NURS 52C: Students will continue to administer medications via routes previously taught in 52A (54/55) & 52B.

The third semester will include lab demonstrations on the following on:

- a) central line flushes
- b) IVPB medication administration through clamped central lines
- c) IV medication administration through peripheral lines
- d) IV medication administration through central lines with continuous IV fluids
- e) IV medication administration through clamped central lines
- f) reconstitution of IV medication.

Note: After successful return demonstration, the students may:

- flush central lines.
- administer IVPB medication through clamped central lines.
- administer IV medication through peripheral lines. setting. The direct supervision may be delegated to a staff RN if mutually agreeable
- administer IV medication through central lines with continuous IV fluids.
- administer IV medication through clamped central lines.

52C: The following is the overall process of medication administration in the clinical setting with the instructor and RN. The direct supervision may be delegated to a staff RN if mutually agreeable with the instructor and RN. *Direct supervision includes observing the student's medication preparation as well as administration of the medication.*

1. Utilize six rights and three checks procedure
2. Quiz student on medications knowledge and safety parameters
3. Check dosage calculations as needed
4. Check prepared medication against medication administration record (eMAR)
5. Accompany student to bedside/patient and observe administration
6. Check students' documentation of medication.

In the medical/surgical setting, the instructor may waive step 5 for all PO, SQ and IM medications routes ONLY if the instructor has already observed the student administering medications to the assigned patient successfully and **gives verbal approval.**

IVPB & IV push medications MUST be directly supervised by the instructor or RN at all times.

IV push medications will be limited to a published list given to all students.

Students may administer TPN & lipids with direct instructor or RN supervision after theory is presented in class.

Medication Administration Policy

NURS 52D: Students may administer medications via all routes previously taught in 52A (54/55), 52B and 52C.

52D: The following is the overall process of medication administration in the clinical setting with the instructor and RN. The direct supervision may be delegated to a staff RN if mutually agreeable with the instructor and RN. *Direct supervision includes observing the student's medication preparation as well as administration of the medication.*

1. Utilize six rights and three checks procedure
2. Quiz student on medications knowledge and safety parameters
3. Check dosage calculations as needed
4. Check prepared medication against medication administration record (eMAR)
5. Accompany student to bedside/patient and observe administration
6. Check students' documentation of medication.

In the medical/surgical setting, the instructor may waive step 5 for all PO, SQ and IM medications routes ONLY if the instructor has already observed the student administering medications to the assigned patient successfully and **gives verbal approval.**

IVPB & IV push medications MUST be directly supervised by the instructor or RN at all times.

IV push medications will be limited to a published list given to all students.

rev 5/18

Medication Administration Policy

52D Preceptorship Students may administer medications via all routes.

52D: The following is the overall process of direct RN preceptor supervision in the clinical setting. *Direct supervision includes observing the student's medication preparation as well as administration of the medication.*

1. Utilize six rights and three checks procedure
2. Quiz student on medications knowledge and safety parameters
3. Check dosage calculations as needed
4. Check prepared medication against medication administration record (eMAR)
5. Accompany student to bedside/patient and observe administration
6. Check students' documentation of medication.

In the medical/surgical setting, the RN preceptor may waive step 5 for all PO, SQ and IM medications routes ONLY if the RN preceptor has already observed the student administering medications to the assigned patient successfully and **gives verbal approval.**

IVPB & IV push medications MUST be directly supervised by the RN preceptor at all times.

IV push medications will be limited to a published list given to all students.

Dosage Calculation Proficiency

A dosage calculation exam will be administered each semester. Each nursing student will be given two scheduled opportunities to pass the exam with a score of 95% or greater before proceeding in the course. Students who do not pass the exam after two attempts may not progress in the clinical component of the course. This will result in a performance evaluation of “unsatisfactory” and a grade of “F” for the course.

Student Accountability and Practice Limitations

Students are expected to maintain proficiency of all skills they have been taught or have successfully demonstrated in the nursing skills lab. This will require the student to return to the lab as often as necessary to independently practice these skills. Students will be expected to perform these skills proficiently in the clinical setting throughout the curriculum.

Students may only perform skills that have been demonstrated in the lab, classroom, or clinical setting by the instructor or instructor-designated licensed staff member. This will enable the instructor to ensure patient safety and competent practice by the student. Invasive procedures may be practiced ONLY in the lab setting (i.e. in the LRC or simulation center, as appropriate). Under no circumstances may students perform invasive procedures on live persons without a healthcare provider’s order for a patient within a supervised clinical setting (10/17)

Instructor supervision is necessary for skills requiring aseptic or invasive techniques. Supervision may be delegated to a licensed staff member if mutually agreeable to the instructor and staff member. The student may not perform these skills independently unless the instructor has given the student verbal permission.

All students are issued a supply kit at the beginning of NURS 52A (54/55), NURS 52B, NURS 52C and are expected to maintain their supply kit throughout the program. The pharmacology supply kit contains sharps and will be kept in an assigned locker. Students will not be allowed to take any sharps home. Students will be able to practice with sharps in the LRC independently after passing their standard precautions test in N52A (54/55). As with all newly learned skills, students are highly encouraged to seek LRC instructor guidance.

Learning Resource Center Sharps Policy

In order to avoid a needle stick, students must place all exposed needles into the sharps container. If a needle stick injury occurs in the LRC, the student will:

- immediately wash the affected area thoroughly with soap and water and report to an LRC instructor for evaluation.
- if an LRC instructor is not available, report to Student Health Services for further evaluation.
- complete a Sharps Injury Log and MPC Incident Report form and submit it to LRC faculty who will forward a copy to Student Health Services. (10/10)

Invasive procedures may be practiced ONLY in the lab setting (i.e. in the LRC or simulation center, as appropriate). Under no circumstances may students perform invasive procedures on live persons without a health care provider’s order within a supervised clinical setting. (10/17)

Locker Acknowledgment Policy

MCCSN lockers are located on the first floor of the IC building. The sole purpose of these lockers is to store and maintain all LRC distributed practice kits. These lockers are not intended for personal storage which includes but is not limited to food, drinks, and/or valuables. The student will have access to the lockers during LRC hours and for the duration of the program. The LRC will issue the student a numbered locker. The student will be responsible for purchasing a combination or key lock. In the event the student is unable to access their assigned locker to obtain their practice kits, the student will be excused from the activity. This will be considered as a clinical absence. MCCSN is not liable for any lost or stolen items. (09/14)

Skills Inventory Policy

The skills inventory list (see next page) identifies critical skills for each semester. These skills will be demonstrated and practice opportunities will be facilitated. Students must complete satisfactory return demonstrations on selected skills. The student will be allowed two attempts at successful completion, and the “return demonstration” must be completed by the due date indicated by the instructor on the Skill Remediation Contract ^(6/15). Students who do not successfully complete the return demonstration may not progress in the clinical component of the course. This will result in a clinical evaluation of “unsatisfactory” and a grade of “F” for the course. (06/97)

Skills Validation Policy

A skills validation is defined as an opportunity to successfully demonstrate previously acquired skills mastery. Students who do not pass the following skills successfully must remediate by the due date. Students may not perform the skill in the clinical setting until the remediation process is complete ^(6/15). Students who do not successfully complete the skills validation after the second attempt may not progress in the clinical component of the course. This will result in a clinical evaluation of “unsatisfactory” and a grade “F” for the course. (05/13)

Skills Inventory by Semester

52A Fundamentals & OB	52B Med/Surg & Pediatrics
Return Demonstration Required:	Return Demonstration Required:
<p>Medication Administration:</p> <p>Preparation, administration and documentation of: Oral Medications SubQ Injections Intramuscular Injections Rectal Medications</p> <p>Safe Disposal of Sharps</p> <p>Spike and Prime IVs</p>	<p>IV Piggyback (IVPB)</p> <p>Preparation, Administration and Documentation of IV Piggyback: Via Peripheral INT Via Peripheral Line With continuous IV Fluids Via Central Line With Continuous IV Fluids</p> <p>Program IV pump</p>
Blood Glucose Testing	Skills Validation Required:
<p>Vital Signs: TPR, BP, Pain, Oxygen Saturation</p>	Foley Catheter Insertion and Discontinuation
<p>Head to Toe Assessment: LOC, heart, lungs, GI, GU, Skin, Activity</p>	Head to Toe Assessment
<p>Urinary Catheterization: Indwelling catheter insertion Indwelling catheter discontinuation</p>	SubQ Insulin Injection
<p>No Return Demonstration Required: <i>(Student is responsible for learning and practicing each skill)</i></p>	<p>No Return Demonstration Required: <i>(Student is responsible for learning and practicing each skill)</i></p>
<p>Heat and Cold: K-pad, Ice Pack</p>	Reconstitute Pediatric Medications
Sterile Dressing Change	Administer Pediatric IVPB Medications via syringe pump
Standard Precautions	NG/G/J tube Medication Administration
Sputum Specimen Collection	<p>Nasogastric Tube: Insertion Discontinuation Maintenance Irrigation Continuous/Intermittent feeding</p>
Cough and Deep Breathing Exercises	Blood Transfusion Administration
Incentive Spirometry	<p>O₂ Administration: Nasal Cannula</p>

	Masks
IV Drip Regulation	Suctioning: Oral/Nasal/ Pharyngeal
Site Maintenance	52C Advanced Med/Surg & Geriatrics
Discontinue IVs	
Z-track Injection	
Intradermal Injection	Return Demonstration Required
Ostomy Care	IV Insertion
Other methods of medication administration: Rectal medications Vaginal medications Eye medications Ear drops Transdermal medications Topical medications	IV Medication Administration Prepare, administer and document IV Medication: IV Medication Reconstitution Via Peripheral INT Via Central INT Via Peripheral/Central line with Compatible and/or Incompatible IV Fluids IVPB via Central Line INT
Crutch Walking	PICC Line Dressing Change
Use of Walker	
Transfers: Bed to Chair Bed to Gurney	Flush PICC & Central Line Ports: Single, Double or Triple Lumen Non-Tunneled Catheter
Urinary Catheter Care	Skills Validation Required:
Enemas	Head To Toe Assessment
Straight Catheter Insertion: Male and Female	No Return Demonstration Required: <i>(Student is responsible for learning and practicing each skill)</i>
Intake/Output measurement and documentation	Management of TPN & Lipids
Restraints: Soft Limb	PortaCath Access
Safety Belt	Blood Draw Through Central Lines
Feeding a Patient	Discontinue a PICC Line
Bed Bath: Adult	Trach Care and Suctioning
Positioning: Prone, Supine, Lateral Sims, Semi-fowler, fowler,	Post-Mortem Care

High-fowler	
Patient Movement: Up in Bed, Dangle, Move to Side of Bed, Turning	PCA Management
Skin Care and Back Rub	52D Leadership & Mental Health
Oral Care	
Use of Bedside Commode	
Perineal Care	Skills Validation Required:
Care of: Bedpans, Urinal	IV Insertion
Specimen Testing: Occult Blood	IV Medication Administration Peripheral or Central Line
Pediatric Urine	PICC Line Dressing Change
Specimen Collection: Stool Routine Urine Clean Catch Urine Aspirate Urine from Foley	No Return Demonstration Required: <i>(Student is responsible for learning and practicing each skill)</i>
Newborn Bathing	Care of AV Fistula
Circumcision Care	
Umbilical Cord Care	
Infant Feeding: Assisting with Breastfeeding Gavage & Bottle Feeding	
OB Assessment: Gestational Age Fetal Heart Sounds Contractions Fundus Lochia Sitz Bath/Perineal Care	

The faculty of the Maurine Church Coburn School of Nursing at Monterey Peninsula College accepts the following guidelines from the Board of Registered Nursing (BRN)

1. Standards of competent performance (BRN) **AVAILABLE ON CANVAS COURSE SITE**
2. Nursing students impaired by chemical dependency and mental illness (BRN)
3. Policy for Pre-Admission Screening and Reasonable Suspicion of Impairment Screening Checklist and Fitness for Duty Examination Form
4. Advanced Placement Policy for LVNs
5. Policy for Credit for Previous Education in the Field of Nursing, including Military Education and Experience
6. MCCSN Associate Degree Nursing Technical Skills/Essential Functions **AVAILABLE ON CANVAS COURSE SITE**

California Board of Registered Nursing IMPAIRED NURSING STUDENTS

GUIDELINES FOR SCHOOLS OF NURSING IN HANDLING NURSING STUDENTS IMPAIRED BY CHEMICAL DEPENDENCY OR MENTAL ILLNESS

BOARD STATEMENT:

The Board of Registered Nursing considers the student use of controlled substances, dangerous drugs or devices or alcoholic beverages to an extent or in a manner injurious to self or others to constitute unprofessional conduct. The conviction of a criminal offense involving the prescription, consumption or self-administration of the above substances is conclusive evidence thereof. (B&P 2762).

Nursing students showing signs of mental illness or chemical dependency should be directed to a health care provider for diagnosis and treatment of the illness. Chemical dependency and mental illness are diseases and should be treated as such. The Board has established a diversion program for impaired registered nurses as a voluntary alternative to traditional Board disciplinary actions. (B&P 2770)

NURSING PROGRAMS ARE EXPECTED TO:

- Have a policy for students who are impaired by or demonstrate characteristics of chemical dependency or mental illness which directs the student to seek appropriate assistance through a health care provider and provide the nursing program with proof of treatment.

- Provide instructors with the authority and responsibility to take immediate corrective action with regard to the impaired student's conduct and performance in the clinical setting. This includes removing the impaired student from the patient care area until the student is deemed medically safe to return to patient care activities.

- Provide this information to incoming students in their nursing program handbooks along with factual material related to chemical dependency and mental illness among nursing students.

- Handle the matter confidentially.

STUDENTS ARE EXPECTED TO:

- Voluntarily seek diagnosis and treatment for chemical dependency or mental illness and provide evidence of treatment and fitness for practice to the nursing program.

- Show evidence of rehabilitation when submitting their application for licensure.

Pre-Admission Screening Reasonable Suspicion of Student Impairment

General statement:

Nursing faculty of the Maurine Church Coburn School of Nursing concurs with the California Board of Registered Nursing (BRN) that the delivery of safe patient care is the foremost priority of students in the clinical setting. Therefore it is expected that nursing students demonstrate competent and safe performance at all times.

Health care professionals and students may be vulnerable to chemical dependency and mental illness. These are conditions which require intervention on the part of faculty to ensure that safety is maintained. Use of controlled substances, dangerous drugs or devices or alcoholic beverages to an extent or in a manner injurious to self or others constitutes unprofessional conduct, and also violates campus standards of conduct.

Students are hereby advised of the risks associated with the use of prohibited substances. Every attempt will be made to refer students to appropriate resources for treatment and counseling when impairment is evident. Instructors have the authority and responsibility to take immediate corrective action with regard to the student's conduct and performance, including removing the student from the classroom and/or clinical setting.

Signs of impairment include but are not limited to those listed on the attached *MCCSN Checklist for Reasonable Suspicion of Student Impairment*.

Drug Testing:

All applicants who have received a conditional offer of admission to nursing programs must submit a 10-panel pre-admission drug test collected and processed by a designated vendor lab with Medical Review Officer oversight. The cost of this testing is the responsibility of the student. Any applicant who refuses to test will have their conditional offer of admission rescinded. The offer of admission will be withdrawn for students with positive results. A dilute urine specimen will yield inconclusive results, and will require re-testing at the student's expense. Any applicant who does not comply with the preadmission drug test will not be admitted to the program.

Reasonable Cause Testing:

Students progressing through the nursing program will be required to submit to testing if there is reasonable suspicion that the student is impaired. Reasonable cause exists when a student exhibits patterns of behavior such as those mentioned on *MCCSN Checklist for Reasonable Suspicion of Student Impairment*. Failure to comply with such testing, when requested, will result in dismissal from the program. Positive test results will also result in dismissal from the program.

Procedure for a student exhibiting signs of impairment:

If signs of impairment as described above are evident **in the classroom**, the instructor will follow the MPC disciplinary policy, and will suspend the student from class for that day and notify the Director, School of Nursing or designee, who will notify the Vice President of Student Services. Upon consultation with the Vice President of Student Services, the following policy for the **clinical setting** may be implemented.

If signs of impairment as described above are evident **in the clinical setting**, the instructor will immediately remove the student from patient care and escort to a safe place. The instructor will assess the circumstances according to the *MCCSN Checklist for Reasonable Suspicion of Student Impairment*, and notify the Director, School of Nursing or designee. The Director or designee will go to the clinical site to verify the signs/symptoms reported by the instructor. Upon confirmation of symptoms, the student will be asked to sign a consent and release for portable breath alcohol test screen, and a 10-panel drug screen, The Director/designee will administer the portable breath alcohol test and document the result. The student will be given a paper chain of custody form and directed to complete a 10-panel drug test at the designate vendor lab within 24 hours. If the student refuses testing or examination, the student will be considered positive and will be immediately dismissed from the program. **Any clinical time that is missed for drug testing will be included in the number of hours of clinical absence, and the current attendance policy will be followed.** The clinical instructor will initiate an *Unsafe Practice Notice*, and the student will be suspended from clinical experiences pending the results of the drug testing and The Director, School of Nursing or designee will assist with arrangements for transportation by a responsible individual.

The cost for testing based on reasonable suspicion described above will be paid by the college.

At a follow-up meeting, the student's *results will be reviewed*, and *if positive* for drugs or alcohol, the student will be dismissed from the nursing program. The Medical Review officer will determine whether a valid prescription exists for any legal substance for which a positive result has been found. In this situation, the student may be required to undergo further health evaluation, at the student's expense, in order to return to the clinical setting.

Similarly, *if the drug screen is negative* and/or deemed unnecessary, the student who demonstrates behaviors such as those described may be required to undergo further evaluation by an independent health care provider, at the student's expense. If appropriate, the student may return to the clinical setting upon submission of the Fitness for Duty form signed by the independent health provider indicating that the student has been evaluated and is able to safely provide patient care. This examination for Fitness of Duty will be performed by a college designated independent practitioner and paid by the college

As with all student health information, results of all testing and examinations will be kept confidential in a secured location in the student's clinical file.

(BRN Guidelines for Impaired Students, 08/10; MPC College Catalog 2017-2018, pp. 9, 53-54).

Approved by faculty; November 2014; reviewed June 2016; revised November 2016.
Reviewed by VP Student Services: August 2016

MCCSN Checklist for REASONABLE SUSPICION OF STUDENT IMPAIRMENT 11/16

(See Reverse for Fitness for Duty Evaluation Form)

This checklist is to be completed by the instructor observing behaviors/situations that prompted reasonable suspicion in the clinical setting. The Director, School of Nursing or Designee must validate and determine whether or not the student will be tested for current impairment from drugs/substances. This checklist must be completed before requesting that the student submit to a drug/substance test. Substance/drug use must be reasonably suspected in order to test. **Check all that apply:**

Observed (initials)	Confirmed (initials)		Observed (initials)	Confirmed (initials)	
Behavior			Odor		
		Alternate periods of high and low productivity			Distinctive odor of intoxicant on breath
		Disappearance from work area			Distinctive odor on clothing or about person
		Difficulty performing ordinary tasks			Mints, gum, mouthwash or breath spray
		More time needed to perform ordinary tasks	Speech		
		Boisterous			Slurred
		Difficulty recognizing individuals			Unusually loud
		Easily agitated			Hesitant
		Erratic and disjointed actions			Unusually fast
		Sleeping on duty			Unusually slow
		Hostile, crying, talkative			Incoherent
		Increased errors			
		Excessive absenteeism			
Physical Appearance/Clothing			Eyes		
		Flushed, red face			Watery
		Lethargic, sleepy			Heavy eyelids
		Hyperactive			Pupils constricted
		Tense, unduly nervous			Pupils dilated
		Poor coordination			Red
		Drooling			
		Dramatic change in physical appearance	Difficulty in recalling instructions, details, etc.		
					Difficulty in recalling mistakes
					Difficulty remembering recent events
					Confusion
Gait			Medication Administration/Handling Discrepancy		
		Unsteady			Incorrect narcotics count
		Deliberate or over-careful			Failure to follow substance policies
		Swaying			Patient complaint
		Leaning			
		Stooped			

Other observations and details: _____

Portable Breath Alcohol Tests result: _____ Date/Time: _____

Reviewer initials/signatures/date/time: _____

MCCSN FITNESS FOR DUTY EVALUATION FORM



TO: Independent Practitioner (MD, NP, PA)

RE: Reasonable Suspicion of Student Impairment

The nursing student identified on the reverse of this form has demonstrated the symptoms initiated by the instructor and confirmed by a witness. Please review the checklist on the reverse side of this document and indicate your findings below following your evaluation of the student's fitness for duty in caring for patients in the clinical setting.

- Student is able to return to the clinical setting

- The following medical/psychological follow-up is indicated:

Additional comments:

Signature

Title/Organization



Maurine Church Coburn School of Nursing Advanced Placement Admission Policy for LVNs

MCCSN does not offer at this time a specific LVN-to-RN program. However, advanced placement into the second or third semester is offered to individual qualified candidates when space becomes available.

LVNs seeking advanced placement must make an appointment with the Director, School of Nursing for individual counseling regarding their educational preparation and options, including the CCR 1429 30 Unit Option, which meets course requirements for licensure but does not confer an associate degree. PSYC 25, NURS 100, NURS 52A and NURS 52B may be waived in completing degree requirements upon official transcript verification of corresponding coursework in the LVN program. Note that LVN courses completed at an institution that is not regionally accredited program are not transferrable and could also result in the need for additional coursework at a subsequent 4-year institution.

- The following are required for initial entry into the second or third semester of the nursing program:
- An active application to the nursing program on file at the nursing office.
- A copy of active California LVN license.
- Evidence of one year of work experience as an LVN.
- Completion of all program prerequisite coursework with a grade of C or better, with the exception of PSYC 25 (Child and Adult Development) and NURS 100 (Pharmacology for Nursing).

Applicants who meet the above qualifications and who are interested in advanced placement should apply to the nursing program during the regular application period, and note their interest on the application. In the event that there are more advanced placement applicants than anticipated seats, pre-requisite course grades and quality of work experience will be used to select candidates for standardized testing.

First semester option: Applicants also have the option and are encouraged to apply as a “generic” first semester student for admission to MCCSN. However, as a first semester student, applicants must have a transcribed grade for Pharmacology (NURS 100) or appropriate substitute coursework; and a transcribed grade for Lifespan Development (PSYC 25) or appropriate substitute coursework. All first semester applicants (including LVNs) are selected using the multi-criterion selection process described on the MCCSN website. The Director, School of Nursing will review all available transcripts to determine whether coursework can be substitute for multi-criterion scoring. **NOTE:** *If coursework is substituted from institutions that are not regionally accredited, it is possible that subsequent colleges and universities may not accept the coursework for higher degrees.* (rev. 05/19)

In compliance with offering alternative options for students with previous education in the field of nursing, LVNs may be eligible to enter an *alternate* first semester (abbreviated) sequence (NURS 54 or 55). Alternate sequence placement is subject to the multi-criterion selection process used for the respective first semester cohort (06/2020).

Procedure for Advanced Placement into Second Semester:

If space is available for one or more advanced placement students, selection will be based on current licensure, recent work experience and grades in the prerequisite coursework. Once selected, applicants will be required to attend an information session and to complete the NURS 65 and NURS 65L Role Transition Courses with a grade of “C” or better prior to enrollment in NURS 52B (either simultaneously or separately as the courses are offered). Applicants will also be required to participate in NURS 204 *Supervised Nursing Skills Lab I* prior to the start of NURS 52B complete any assigned workshops or remedial activities identified in NURS 65L. (05-2021)

Procedure for Advanced Placement into Third Semester:

The process described below is designed to assess knowledge of the content addressed in the first and second semesters of the nursing program so that applicants are placed in the third semester are prepared for success. Third semester placement is contingent space available in the cohort and successful completion of the following: (05-2021)

Standardized Testing

The Nursing Acceleration Challenge Exams (NACE I) are one component of the total evaluation of selected individuals to establish credit for prior learning and experience, and to assign the best fit for placement in the nursing program.

Selected applicants are required to complete examinations of the content addressed in the first two semesters, including Fundamentals/Foundations, Maternal-Child (Obstetrics), and nursing care of children (Pediatrics).

Passing scores are listed below, and are based on the 2015 normed averages established by the National League for Nursing

NACE I Scoring thresholds to be invited for performance testing:

Component	To place into NURS 52C (third semester) must pass with:
Foundations	75%
Care during Childbearing	62%
Care of the Child	66%

***Based upon quality of previous work experience, faculty may proceed with performance evaluations even if a score(s) is less than the normed average** (rev. 05-19)*

Clinical Simulation Performance Evaluation(s)

Applicants are required to participate in an individual clinical simulation performance evaluation of the clinical skills involved in the courses for which competency is required.

Based on the results of this performance portion of the placement testing, the nursing faculty will recommend the appropriate semester for placement and develop an individualized preparation plan for each advanced placement applicant including but not limited to assigned lectures, labs or skills practice.

In some instances, the faculty may determine that the candidate is best suited for placement in the first semester. Should the candidate choose to enter at the first semester level, all admission criteria applicable to first semester students must be completed, and placement will be offered based on the multi-criterion selection process.

ATI TEAS Testing (used for referrals to campus services as needed)

The Maurine Church Coburn School of Nursing (MCCSN) provides pre-admission screening and intervention for all selected applicants using the ATI Test of Essential Academic Skills, (ATI TEAS). LVN advanced placement applicants will also take the exam once selected for a given semester. This computerized test assesses Reading, Mathematics, Science, and English and Language Usage. A remediation plan will be developed by the Director, School of Nursing for referral to needed support services on campus if the composite score is less than 62. If remediation is necessary, the candidate may enter the program in the respective advanced semester once the referral plan is completed.

New Student Orientation and NURS 65 Role Transition Courses

The applicant is required to attend new student orientation on the assigned date, and to complete the NURS 65 and NURS 65L Role Transition Courses with a grade of "C" or better prior to enrollment.

- NOTE:
- 1) *There is no cost to the student for the testing process, regardless of the outcome.*
 - 2) *LVNs may pursue the 30-unit option for admission to the nursing program IF SPACE IS AVAILABLE even if individual counseling and/or standardized assessment places them in the first or second semester.*
 - 3) *The 30-unit option includes PHSO 1&2, BIOL 25&26, NURS 52C and NURS 52D (NURS 65L, NURS 206 and NURS 207 strongly recommended but not required).*

For individual counseling regarding LVN advanced placement into the MCCSN program, contact the Director, School of Nursing at 831-646-4258.

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Reviewed by Office of Academic Affairs 12/12/16; 06/27/1; 06-20-2020; 05-27-2021

Maurine Church Coburn School of Nursing Policy for Previous Education in the Field of Nursing Including Military Education/Experience

In compliance with SB 466, MCCSN provides the following alternative options for placement/admission to the nursing program for those with previous education in the field of nursing, including military education and experience. Applicants must submit transcript evidence of education or experience in military health care occupations, and must make an appointment with the academic counselor and/or Director, School of Nursing. The Director makes a determination as whether any previous coursework in the field of nursing (not *limited to* military education) aligns with the alternate first semester course sequence (rev. 06/2020).

Required for all applicants seeking credit for military education/experience:

1. Joint Service Transcripts showing completion of basic course of instruction in nursing required by his or her particular branch of the Armed Forces.
2. DD214 or other military document showing that service in the Armed Forces has been under honorable conditions, or whose general discharge has been under honorable conditions.

All program of study course requirements and MPC general education requirements must be satisfied as published in the college catalog in order for the associate degree to be conferred as a *graduate*. However, applicants may choose to meet the California Board of Registered Nursing requirements for RN licensure *only* and to complete the nursing program as a *non-graduate* (degree not conferred).

Option A: Accelerated First Semester for Basic Medical Technician Corpsman (Navy Hospital Medic or Airforce Medical Technician Corpsman)

STEPS:

1. Provide transcript evidence of completion of all program prerequisites. Equivalent courses “passed” on the military transcript without a letter grade will be assigned a grade of “C”.
2. Follow the multi-criterion selection process for admission to the nursing program during the regular application cycle. Indicate on application desire for “accelerated first semester” option.
***NOTE:** Applicant must make appointment to verify transcript evidence of previous education and experience in the field of nursing (specifically, Fundamentals equivalent)*
3. If selected in the top 40% of applicants (Phase 1), complete or submit ATI TEAS as required for all applicants. A composite score of 62% or higher is required. Remediation is provided for any score less than 62% within the previous 2 years, and the applicant must re-apply once the remediation plan is completed.
4. If selected after ATI TEAS test (Phase 2):
 - a. Complete standardized written and performance challenge procedures for *NURS 55 Applied Foundations in Nursing*. (See procedure for NLN Acceleration Challenge Exams in Option B, STEP 3 below).
 - b. Complete application for “Credit By Examination” for *NURS 55 Applied Foundations in Nursing* in order to receive credit for those nursing units, following college policy.
***NOTE:** For those desiring to complete the program as a non-graduate, it is not necessary to receive the transcript credit for NURS 55, and step #4b can be omitted.*
5. If passing grade on written and performance challenge exams, accept seat with subsequent first semester fall cohort.
6. Attend new student orientation and comply with all program policies (including background check, 10-panel drug screening, proof of immunizations, etc.).
7. Summer Nursing Role Transition Course (NURS 65 and 65L) is encouraged but not required.

8. Enroll in NURS 54, *Accelerated Nursing I* in the fall (5.5 units; 10 weeks only). Course covers clinical agency-specific policies, documentation, skills demonstrations, and obstetrics.

Option B: Advanced Placement into the second or third semester (IF SPACE AVAILABLE) for Basic Medical Technician Corpsman (Navy Hospital Medic or Air Force Medical Technician Corpsman) **with active California LVN license** either through challenge (BVNPT Method 4) or successful completion of an LVN program of study; or Army Practical Nurse Program.

STEPS:

1. Provide transcript evidence of completion of all program prerequisites. Equivalent courses “passed” on the military transcript without a letter grade will be assigned a grade of “C”.

NOTE: For those desiring to complete the program as a non-graduate, NURS 100 and PSYC 25 may be waived if equivalent education/experience is evident.

2. Apply for admission to the nursing program during the regular application cycle. Indicate on application desire for “advanced placement” option.

NOTE: Applicant must make appointment to verify transcript evidence of previous education and experience in the field of nursing, specifically fundamentals; **and** obstetrics and/or pediatrics.

3. If selected, follow procedures described for LVN Advance Placement, described below:

Procedure for Advanced Placement into Second Semester:

If space is available for one or more advanced placement students, selection will be based on current licensure, recent work experience and grades in the prerequisite coursework. Once selected, applicants will be required to attend an information session and to complete the NURS 65 and NURS 65L Role Transition Courses with a grade of “C” or better prior to enrollment in NURS 52B (either simultaneously or separately as the courses are offered). Applicants will also be required to participate in NURS 204 *Supervised Nursing Skills Lab I* prior to the start of NURS 52B complete any assigned workshops or remedial activities identified in NURS 65L. (05-2021)

Procedure for Advanced Placement into Third Semester:

The process described below is designed to assess knowledge of the content addressed in the first and second semesters of the nursing program so that applicants are placed in the-third semester are prepared for success. Third semester placement is contingent space available in the cohort and successful completion of the following: (05-2021)

Standardized Testing

The Nursing Acceleration Challenge Exams (NACE I) are one component of the total evaluation of selected individuals to establish credit for prior learning and experience, and to assign the best fit for placement in the nursing program.

Selected applicants are required to complete examinations of the content addressed in the first two semesters, including Fundamentals/Foundations, Maternal-Child (Obstetrics), and nursing care of children (Pediatrics).

Passing scores are listed below, and are based on the 2015 normed averages established by the National League for Nursing

NACE I Scoring thresholds to be invited for performance testing:

Component	To place into NURS 52C (third semester) must pass with:
Foundations	75%
Care during Childbearing	62%
Care of the Child	66%

****Based upon quality of previous work experience, faculty may proceed with performance evaluations even if a score(s) is less than the normed average****(rev. 05-19)

Clinical Simulation Performance Evaluation(s)

Applicants are required to participate in an individual clinical simulation performance evaluation of the clinical skills involved in the courses for which competency is required.

Based on the results of this performance portion of the placement testing, the nursing faculty will recommend the appropriate semester for placement and develop an individualized preparation plan for each advanced placement applicant including but not limited to assigned lectures, labs or skills practice.

In some instances, the faculty may determine that the candidate is best suited for placement in the first semester. Should the candidate choose to enter at the first semester level, all admission criteria applicable to first semester students must be completed, and placement will be offered based on the multi-criterion selection process.

ATI TEAS Testing (used for referrals to campus services as needed)

The Maurine Church Coburn School of Nursing (MCCSN) provides pre-admission screening and intervention for all selected applicants using the ATI Test of Essential Academic Skills, (ATI TEAS). LVN advanced placement applicants will also take the exam once selected for a given semester. This computerized test assesses Reading, Mathematics, Science, and English and Language Usage. A remediation plan will be developed by the Director, School of Nursing for referral to needed support services on campus if the composite score is less than 62. If remediation is necessary, the candidate may enter the program in the respective advanced semester once the referral plan is completed.

New Student Orientation and NURS 65 Role Transition Courses

The applicant is required to attend new student orientation on the assigned date, and to complete the NURS 65 and NURS 65L Role Transition Courses with a grade of "C" or better prior to enrollment.

- NOTE: 1) *There is no cost to the student for the testing process, regardless of the outcome.*
2) *LVNs may pursue the 30-unit option for admission to the nursing program IF SPACE IS AVAILABLE even if individual counseling and/or standardized assessment places them in the first or second semester.*
3) *The 30-unit option includes PHSO 1&2, BIOL 25&26, NURS 52C and NURS 52D (NURS 65L, NURS 206 and NURS 207 strongly recommended but not required).*

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