# 2004-2005

# NURSING STUDENT HANDBOOK



# **Grossmont College**

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 SIGNATURE
 PRINT NAME
 DATE

If you have any questions regarding the policies in the handbook before signing this form, please make an appointment with the Associate Dean of Health Professions.

# Table of Contents

SECTION I: VISION AND EDUCATIONAL PHILOSOPHY OF GROSSMONT COLLEGE	1
SECTION II: NURSING DEPT. MISSION STATEMENT	2
Conceptual Framework Faculty Beliefs	3-5 6
SECTION IIII TERMINAL OBJECTS	7
SECTION IV LEGAL ACCOUNTABILITY	8
California BRN Substance Abuse Guidelines Application for Licensure BRN Policy for Licensure Denial	10
SECTION V: ETHICAL STANDARDS AND PROFESSIONALISM	11
ANA Code of Ethics	11
SECTION VI: ACADEMIC POLICIES	11
Academic Fraud	11-12
SECTION VII: CLASSROOM AND CLINICAL POLICIES	12
Registration Liability Insurance, CPR, Email Address Requirements	
Classroom Attendance	
Clinical/Campus Laboratory Attendance	
Grading	
Examination Review	
Examination Make-Up	
Standards of Written Work	
Policy on Incomplete Grades	
Standards of Clinical Performance	
Drug Calculation Exam	
Child Care Requirements	
Transportation	
Clinical Flexibility	
Pre-lab Preparation	
Level of Preparedness	
Student Assignments	
Clinical Assignments	
Patient Confidentiality	
Medication error Protocol	
Use of the Clinical Evaluation Form	
SECTION VIII: DEPARTMENT STRUCTURE AND STUDENT INPUT	
Opportunities for Student Feedback	
Program and Course Evaluation Policy	23

SECTION IX: DISCIPLINARY POLICIES	23
Suspension Policy/Procedure	
Course Failure	
SECTION X: HEALTH AND SAFETY POLICIES	25
Pregnancy Policy	
Post-Surgery	
Report of Injury/Exposure to Infection	
Immunizations	
Standard Precautions	
SECTION XI: STUDENT SERVICES	
SECTION XII: GENERAL ADMINISTRATIVE POLICIES	
Student records/Files	
Emergency Contact Number	
Student Work Experience	
Gift Policy	
Transfer Policy/Advanced Placement	
Nursing Re-entry Policy	
Procedure for Problem Solving	
Progression in the Program.	
SECTION XIII: GRADUATION	
Commencement	
Pinning Ceremony	
SECTION XIV: NURSING PROGRAM COMMITTEE STRUCTURE	
SECTION XV: UPWARD MOBILITY EDUCATIONAL MOBILITY	

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# SECTION I: VISION AND EDUCATIONAL PHILOSOPHY OF GROSSMONT COLLEGE

The founders of the Grossmont-Cuyamaca Community College District believed that a Community College should provide experiences which will greatly broaden the students' educational opportunities and strengthen society's democratic institutions. This continues to be a significant mission of the community college system in California.

The Grossmont–Cuyamaca District together with Grossmont College and the Grossmont College Nursing Program are committed to the vision of "Student Success through Educational Excellence."

The philosophy of the nursing department is consistent with the mission of Grossmont Community College. The mission of the College, found on page 9 in the 2004-2005 college catalogue, states that Grossmont College is committed to "providing educational leadership through learning opportunities that anticipate, prepare for, and meet the future challenges of a complex democracy and global society." Grossmont College offers the following programs: instructional programs composed of transfer courses, vocational and career education courses, general education and developmental courses. Student services programs include: academic and vocational support services and personal support services, co-curricular activities, and community education programs for continuing education. To fulfill its mission, Grossmont College pursues the following values:

- Promotes student success through educational excellence: excellence in teaching and learning is at the heart of what Grossmont College believes.
- Seeks and sustains high quality staff: the faculty is viewed as the cornerstone of the institution and is essential for the learner's success.
- Provides access: the highest quality education is available for all students seeking a postsecondary experience.
- Promotes and Value Diversity: the educational institution has a responsibility to prepare students to become responsible contributing members of society. Learners of all ages and different backgrounds and experiences are welcomed.
- **Promotes an environment conducive to building harmonious relationships:** people perform at their highest potential when they feel valued, are part of the institution, and know their contributions are acknowledged and appreciated.
- Maintains and engages in community relationships: the college engages in a close relationship with the community and assumes a strategic role in helping build a better community within our sphere of influence.
- **Promotes standards of accountability:** accepting responsibility for actions and engaging in effective planning to achieve the college mission is central to efficiency in college operations.

# <u>Nursing Programs History/Overview</u>

The first two-year RN students entered the Grossmont College Nursing Program in the fall of 1967. This class of 16 graduated in June of 1969. An LVN-RN Transition Program was initiated in summer of 1981 and graduated a class of 33 in 1982. Currently, the Two Year RN Program admits 63 students each fall while the LVN-RN Transition Program admits 31 students each summer. The Weekend-Evening RN Program admits 20-30 students each January and the Welcome-Back Program admits 30-40 students each January. The Nursing Programs are approved by the California Board of Registered Nursing (BRN) and accredited by the National League for Nursing (NLN). The most recent approval visit by the BRN was in May 2000. The Program received continued approval for another five years. The next BRN approval visit will

take place in spring 2005. The last approval visit by the NLN was in April 1997 and the Programs were accredited for eight years. The next NLN visit is schedule for April 2005.

Students, while in the Programs, affiliate with major health care facilities throughout the San Diego area. This broad exposure in multicultural settings provides the student with opportunities to observe and participate in the practice of nursing with a variety of health care providers and develop a multidisciplinary approach to the care of persons across the lifespan.

# SECTION II: NURSING DEPARTMENT MISSION STATEMENT, PHILOSOPHY AND CONCEPTUAL FRAMEWORK

The College's mission and principles are reflected in the philosophy and mission statement of the nursing program.

## • The Nursing Program Mission Statement:

Grossmont College nursing program is committed to student success through educational excellence in nursing education for all students in an environment which fosters the development of intellectual growth while enhancing competent professional nursing knowledge and human potential.

To accomplish the mission and philosophy of the college, the nursing program:

- 1. Believes that nursing education can best be accomplished in an institution whose primary focus is education and therefore provides excellence through quality instruction and learning experiences in the skills laboratory and clinical facilities.
- 2. Promotes student success through a variety of support services, learning resources, testing, and remediation through an environment which encourages learning.
- 3. Maintains a curriculum which is outcome driven and is responsive to changes in health care technology and affords students the opportunity for transfer to a university.
- 4. Provides a learning environment in which optimal learning becomes possible. This environment encourages self-directed learning, stimulates, supports, and challenges the student. In addition the faculty draws on student's life experiences and incorporates the principles of adult learning. The learning environment also fosters critical thinking aimed at developing an attitude of inquiry and responsibility, encouraging the student to keep pace with the evolution of nursing.
- 5. Provides state of the art laboratory and computer technology with simulation experiences which fosters multimedia student learning.
- 6. Recruits, hires, and maintains culturally diverse, competent and qualified nursing faculty.
- 7. Provides equal access for all students who meet the minimal qualifications for entry into the nursing program.
- 8. Is sensitive to cultural differences and focuses on meeting individuals in the prevention of disease and the pursuit of the highest level of wellness to improve the quality of life for each person.
- 9. Plans for continuous improvement by assessing student outcomes, course evaluations, and program plan of instruction, curriculum, clinical facility experiences, and student satisfaction.

- 10. Prepares our graduates to work at the technical level and possesses the knowledge and skills to provide comprehensive nursing care in the nursing profession in a variety of health care settings.
- 11. Promotes the nursing profession and believes that students must be professionally accountable for their actions.
- 12. Provides the local community health care facilities with a nursing force to meet their needs.
- 13. Strengthens partnerships in the community through student, faculty and administrative involvement in community events.
- 14. Manages and plans for fiscal resources in a prudent manner and leverages additional external funding support in the forms of grants.

## NURSING CONCEPTUAL FRAMEWORKAND SUB CONCEPTS

The conceptual framework of the Grossmont College Associate Degree Nursing Program is based on the nursing metaparadigm of the person, environment, health, and nursing (Fawcett, 1984). It also includes the sub-concepts of inquiry, caring, and practice. The concepts and sub-concepts are defined as follows.

#### • Person:

Person incorporates the concepts of learner, self, individual, families, groups, and communities. Persons are unique beings with complex biological, psychological, social, cultural, and spiritual needs. The person's culture is an integral component of health and wellness. Each individual possesses inherent dignity, worth, and the right to self-determination. While human responses are individualized, many can be generalized and predicted. Throughout the life span, people exist within a social multi-cultural milieu and encounter forces that have an impact on optimal health and well being (Kelley & Fitzsimmons, 1999). Individuals seeking health care have unique characteristics, needs, and abilities. Patients have a right to knowledge about health care concerns and issues that may affect their lives and to take an active role in health care decision making.

#### • Environment:

The environment is the sum total of all those conditions and circumstances that have an effect on the existence of the individual. Environment includes physical, psychological, social, spiritual, and cultural elements as well as the historical, political, and economic conditions. A person dynamically interacts with the environment, and each is affected by the other. The environment constantly changes and influences a person's health. Nurses use knowledge and skill about the environment in working with people to promote, maintain, and restore balance between person and environment, and when necessary, to support a dignified death.

#### • <u>Health:</u>

Health is a relative estate of being including wellness, illness, disease characteristics, or dysfunction. Health is the actualization of inherent and acquired human potential through satisfying relationships with others, goal directed behavior, and competent self-care.

Individuals make adjustments in response to a health state to maintain stability and structural integrity. A person uses both internal and external resources to achieve the desired level of health and well being.

#### • Nursing:

Nursing is both an art and science. The science of nursing is the knowledge base for the care that is given and the art of nursing is the skill application of that knowledge to helps others reach maximum function and quality of life. Nursing is a profession that utilizes special skills and knowledge to give care to the whole person in health and illness and in a variety of practice settings. Nurses operate holistically from a scientific base. Nursing's body of knowledge incorporates biological, behavioral, and humanistic principles. Nursing has both a theoretical and a practice component. Nurses incorporate a variety of therapeutic modalities to promote the optimal functioning and adaptation of individuals. Nurses function independently and collaboratively with patients, families, and other members of the health are team. Nursing care is determined by man's human responses resulting from changes in the structure and/or function of all body systems.

Additionally, the Grossmont College Nursing Program's curriculum is based on the process sub concepts nurses use to maintain and improve the health of persons in their environment. These processes include inquiry, caring, and practice and are conceptualized as follows:

#### Inquiry:

Inquiry is the process of seeking information, knowledge, or truth through asking, studying, exploring, or scrutinizing. It includes the nursing process, the scientific process, and the research process. Inquiry also includes critical thinking: a deliberate and systematic process, which involves analysis and interpretation, inductive and deductive reasoning, drawing logical inferences, and evaluating and justifying inferences (Ferguson, 1997).

#### • Caring:

Nurses are involved in caring relationships with patients and families that facilitate health and healing. Caring is a process, a way of relating to someone that involves development and time. Nurses demonstrate caring when they are aware that each individual has dignity and worth with potentialities and needs. Caring is the antithesis of possessing, manipulating, or dominating. Caring cannot occur in the abstract, nor can it occur by sheer habit (Benner, Tanner & Chesla, 1996). Another essential ingredient of caring is communication: a dynamic, developmental process of transmitting perceptions, thoughts, and ideas in verbal, non-verbal, and written interactions. Essential ingredients of the caring process are: knowledge, self-awareness, patience, honesty, trust, humility, hope, and courage. Additionally, nurses act in a caring manner when they practice nursing in a professional manner.

#### Practice:

The ability to provide theory-based therapeutic nursing interventions is the core of nursing practice. Therapeutic nursing interventions are those direct or indirect interactions that occur between a nurse and patient to diagnose and treat the full range of human experiences and

responses to health and illness, not restricted to a problem-focus. Furthermore, therapeutic nursing interventions have cultural and ethnic relevance for patients and families that are carried out within the ethical and legal domains of practice. In clinical practice, nurses use the nursing process to interact with patients in achieving mutual goals. The nursing process is informed through nursing research and consists of activities related to assessment, diagnosis, planning, implementation, and evaluation.

Practice involves providing care, managing care, and being a member within the discipline of nursing. As *providers of care*, entry-level nurses are expected to develop a knowledge base pertinent to practice. Nurses use the nursing process to apply this knowledge for clinical decision-making and care giving. Nurses are expected to use therapeutic communication skills when providing care and are expected to communicate clearly verbally and in writing to all members of the multidisciplinary team.

As <u>managers of care</u>, entry-level nurses are required to coordinate services received by a group of patients during a specific time. Nurses use delegation, conflict management and critical thinking skills when managing care.

As <u>members within the discipline</u>, entry-level nurses are expected to act professionally by adhering to the ethical code of conduct and practicing within the parameters of state licensure and the Nurse Practice Act. Nurses should demonstrate self-respect and respect for others. These attitudes enable nurses to provide quality care while respecting each person's dignity.

#### References:

Benner, P., Tanner, C.A., & Chesla, C.A. (1996). Expertise in Nursing Practice: Caring, clinical judgment, and ethics. NY: Springer.

Ferguson, V.D. (1997). Educating the 21<sup>st</sup> Century Nurse. NY: NLN Press.

Fawcett, J. (1984). The metaparadigm of nursing: Present status and future refinements. Image. 16 84-87.

Fitzpatrick, J. J. and Whall, A. L. (1996). Conceptual models of nursing: Analysis and application. Norwalk, CT: Appleton-Lange.

Kelley, M. L. & Fitzsimmons, V. M. (1999). Understanding cultural diversity: culture curriculum and community in nursing. Sudberry, MA: Jones & Bartlett.

Based upon the conceptual framework the following beliefs summarize the faculty's beliefs of the person, health, the environment; nursing, and nursing education:

#### Beliefs about the Person, Health, the Environment and Illness

- The person is a unique holistic, complex bio-psycho-social-spiritual and cultural being. Each individual possess inherent dignity, worth, and the right to self-determination.
- Persons seeking health care have unique characteristics, needs, and abilities and have the right to knowledge about health care concerns and issues that may affect their lives. The individual is encouraged to take an active role in health care decision making.
- Health is a relative state of being and includes wellness, illness, disease characteristics, or dysfunction.
- Health is on a continuum of maximum wellness to maximum illness.
- The environment is the sum total of all conditions and circumstances that have an affect on the existence of the individual. Nurses use knowledge and skill about the environment in working with people to promote, maintain, and restore balance between the person and the environment, and when necessary, support a dignified death.

#### Beliefs about Nursing

- Nursing is a profession which utilizes special skills and knowledge to provide care for the whole person's health and illness in a variety of practice settings.
- Nursing is both a science and an art. The science is the knowledge based on the biological, behavioral, and humanistic principles. The science of nursing also has both a theoretical and practical component. The art of nursing involves the caring that nurses develop with patients and families that facilitate health and healing.
- Nursing requires critical thinking skills which require intellectual inquiry, a deliberate and systematic process of analysis and interpretation, and inductive and deductive reasoning.

#### Beliefs about the Practice of Nursing

- The practice of nursing involves theory-based therapeutic nursing interventions which include direct and/or indirect interactions that occur between the nurse and the patient to diagnose, treat a full range of human experiences and responses to health and illness, and is not restricted to a problem-focus.
- Practice involves providing care, managing care, and being a member within a discipline of nursing.
- As providers of care, entry-level nurses use the nursing process to develop a knowledge base for clinical decision making and care giving.

- As managers of care, entry-level nurses are required to coordinate services received by a group of patients.
- As members within a discipline, entry-level nurses are expected to act professionally by adhering to the ethical code of conduct and the Nurse Practice Act.

#### Beliefs about Student, Faculty, and Education

- Students are individuals with unique combinations of ethnic and cultural backgrounds, learning abilities and support systems.
- Optimal student learning takes place in an environment that is supportive and provides frequent feedback.
- Nursing faculty believe that learning is a lifelong process involving external changes in behavior and internal changes in thought processes and attitudes.
- Nursing faculty believe that the role of the faculty is to facilitate student learning by providing instruction, clinical experiences, resources, counseling, and guidance.
- Nursing education incorporates knowledge from the humanities, behavior, physical, and natural sciences.

# SECTION III: EXPECTATIONS OF THE GRADUATE (TERMINAL STUDENT OUTCOMES)

The graduate of the Grossmont College Nursing Programs is prepared to practice nursing as an entry-level nurse. The new graduate possesses the knowledge and skills to provide comprehensive nursing care to individuals with common and complex health problems. The Programs' terminal objectives (student outcomes) reflect those expectations.

- 1. Formulate accurate nursing diagnoses based on the collection and analysis of data relative to patients' illness.
- 2. Plan, implement and evaluate nursing care for patients across the life span in relation to identified nursing diagnoses.
- 3. Individualize nursing care, considering patients' culture, spiritual, intellectual and developmental characteristics.
- 4. Diagnose the learning needs of patients and families, implementing teaching strategies that achieve mutually acceptable behavioral changes.
- 5. Manage nursing care for multiple patients, establishing priorities that reflect the needs of the patients and resources available to the registered nurse.
- 6. Establish a therapeutic environment which facilitates communication and caring for patients and significant others.
- 7. Effectively communicate with other members of the health care team through delegation, documentation, referrals and conferences.
- 8. Maintain professional standards through continued learning.
- 9. Assume responsibility for the knowledge of and adherence to the profession's ethical and legal codes.

# SECTION IV: HIGHLIGHTS OF THE LEGAL ACCOUNTABILITY OF NURSING HIGHLIGHTS

### <u>California Nurse Practice Acts</u>

The California Nursing Practice Act with Rules and Regulations in Article 2, states:

#### Legislative Declaration; Practice of Nursing; Functions

"In amending this section at the 1973-74 session, the Legislature recognizes that nursing is a dynamic field, the practice of which is continually evolving to include more sophisticated patient care activities. It is the intent of the Legislature in amending this section at the 1973-74 sessions to provide clear legal authority for function sand procedures that have common acceptance and usage. It is the legislative intent also to recognize the existence of overlapping functions between physicians and registered nurses and to permit additional sharing of functions within organized health care systems that provide for collaboration between physicians and registered nurses. These licensed health care systems include, but are not limited to, health facilities licensed pursuant to Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code, clinics, home health agencies, physicians offices, and public or community health services.

The practice of nursing within the meaning of this chapter includes those functions, including basic health care, that help people cope with difficulties in daily living that are associated with their actual or potential health or illness problems or the treatment thereof, and that require a substantial amount of scientific knowledge or technical skill, including all of the following:

- (1) Direct and indirect patient care services that ensure the safety, comfort, personal hygiene, and protection of patients; and the performance of disease prevention and restorative measures.
- (2) Direct and indirect patient are services, including, but not limited to, the administration of medications and therapeutic agents, necessary to implement a treatment, disease prevention, or rehabilitative regimen ordered by and within the scope of licensure of a physician, dentist, podiatrist, or clinical psychologist, as defined by Section 1316.5 of the Health and Safety Code.
- (3) The performance of skin tests, immunization techniques, and the withdrawal of human blood from veins and arteries.
- (4) Observation of signs and symptoms of illness, reactions to treatment, general behavior, or general physical condition, and (A) determination of whether the signs, symptoms, reactions, behavior, or general appearance exhibit abnormal characteristics; and (B) implementation, based on observed abnormalities, of appropriate reporting, or referral, or standardized procedures, or changes in treatment regimen in accordance with standardized procedures, or the initiation of emergency procedures. See *Nursing Practice* Act page 5 for specific information regarding standardized procedures" (Nursing Practice Acts, p. 4)

# <u>California Board of Registered Nursing Standards of Competent</u> <u>Performance</u>

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

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

# <u>CALIFORNIA BOARD OF REGISTERED NURSING GUIDELINES ON</u> <u>SUBSTANCE ABUSE</u>

#### **REVISED POLICY**

- TO: NURSING SCHOOL ADMINISTRATORS, FACILITY AND STUDENTS
- FROM: BOARD OF REGISTERED NURSING
- SUBJECT: GUIDELINES FOR SCHOOLS OF NURSING IN DEALING WITH THE MATTER OF NURSING STUDENTS IMPAIRED BY ALCOHOLISM, DRUG ABUSE AND EMOTIONAL ILLNESS

In the matter of nursing students impaired by alcoholism, drug abuse and emotional illness, the California Board of Registered Nursing recognizes:

- a) That these are diseases and should be treated as such;
- b) That personal and health problems involving these diseases can affect one's academic and clinical performance and that the impaired nursing student is a danger to self and a grave danger to the patients

in her or his care;

- c) That nursing students who develop these diseases can be helped to recover;
- d) That it is the responsibility of the nursing student to voluntarily seek diagnosis and treatment for any suspected illness;
- e) That confidential handling of the diagnosis and treatment of these diseases is essential.

Therefore, the Board of Registered Nursing expects schools of nursing with students impaired by these diseases to offer appropriate assistance, either directly or by referral. Furthermore, the Board expects that schools of nursing will ensure that instructors have the responsibility and authority to take immediate corrective action with regard to the student's conduct and performance in the clinical setting.

It is outside of the Board's scope of function to endorse or recommend a particular course of therapy; however, it does wish to inform nursing students of the importance of seeking voluntary aid for conditions that could, if left unattended, lead to disciplinary action and may prevent them from being licensed to practice nursing in the State of California.

As a preventive measure, schools of nursing are asked to provide factual material to incoming students regarding school policy on drug or alcohol abuse and mental illness among nursing students.

## <u>Application for Licensure Examination:National Council</u> <u>Licensure Examination for Registered Nurses</u>

In order to qualify for the state board licensure exam, students must have completed the Associate Degree, LVN-RN 30-unit option is an exception. It is the responsibility of the student to meet the degree requirements. Admissions and Records make evaluation of all nursing students during the first semester of the program. Students with advanced placement standing must be sure they have met the requirements and that transfer credits are adequate. The California Board of Registered Nursing provides applications for the National Council Licensure Examination is obtained online at <u>www.rn.ca.gov</u>. The Associate Dean of Nursing will meet in the spring semester with the eligible students to discuss the application process and guide the students in completing the forms.

# • California Board of Registered Nursing (BRN) Policy on Denial of Licensure

The California Board of Registered Nursing protects the public by screening applicants for licensure in order to identify potentially unsafe practitioners. The law provides for denial of licensure for crimes or acts, which are substantially related to registered nurse qualifications, functions, or duties. A crime or act meets the criterion if, to a substantial degree, it evidences present or potential unfitness to perform nursing functions in a manner consistent with the public health, safety or welfare.

If a student in this Program has been convicted of a misdemeanor or felony crime, or had a nursing license disciplined, he/she is urged to meet with the Associate Dean of Nursing for confidential advisement and planning for licensure application.

# ♦ SECTION V: ETHICAL STANDARDS AND PROFESSIONALISM

The Grossmont College Nursing Program is governed by standards of conduct set forth by the profession through the Nursing Practice Act: Rules and Regulations issued by the California Board of Registered Nursing and the American Nurses' Association (ANA) Code of Ethics. Information from these and other sources follows.

As a faculty, we believe that nurses, as well as student nurses, must not only maintain competency and professional commitment, but also assume responsibility and accountability for nursing judgments and actions.

## • American Nurses' Association Code of Ethics, July 2001

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

- 1. The nurse's primary commitment is to the patient, whether an individual, family, group, or community.
- 2. The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.
- 3. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.
- 4. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
- 5. The nurse participates in establishing, maintaining, and improving healthcare environments and conditions of employment conductive to the provision of health care and consistent with the values of the profession through individual and collective action.
- 6. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.
- 7. The nurse collaborates with other health professionals and the public in community, national, and international efforts to meet health needs.
- 8. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

# ♦ <u>SECTION VI: ACADEMIC POLICIES OF GROSSMONT COLLEGE</u> <u>AND THE NURSING DEPARTMENT</u>

# Academic Fraud:

The nursing profession demands the highest moral and ethnical standards. All students at Grossmont College are expected to comply with the institution's high standards of academic integrity and avoid instances of dishonesty at all times. Such acts of dishonesty include

cheating, plagiarism, fraud, false citations or data, and the fraudulent use of Internet resources.

Academic fraud is a serious violation of the Student Code of Conduct, as published in the catalog. Academic fraud includes, but is not limited to the following situations:

<u>Plagiarism</u> is using someone else's ideas or work without proper or complete acknowledgement. Plagiarism encompasses many things and is by far the most common manifestation of Academic fraud. For example, copying a passage straight from a book into a paper without quoting or explicitly citing the source is plagiarism. In addition, completely rewording someone else's work or ideas and using it as one's own is also plagiarism. It is very important that students properly acknowledge all ideas, work, and even distinctive wording that are not their own. Students unsure of how or when to properly acknowledge sources are encouraged to consult their instructor.

**Cheating** is copying of any test or quiz question or problem, or work done in a class that is not the student's own work. It also includes giving or receiving unauthorized assistance during an examination whether it was intentional or not. Obtaining or distributing unauthorized information about an exam before it is given is also cheating, as is using inappropriate or unallowable sources of information during an exam.

**<u>False Data</u>** is a fabrication or alternation or data to deliberately mislead. Examples include but are not limited to: falsifying vital signs, altering the medical record.

<u>**Plagiarism on the Internet.</u>** Purchasing research papers on the internet and submitting them as your own constitutes a gross case of plagiarism. Cutting and pasting from a website without putting the text being used in quotation marks and/or without properly citing the sources also constitutes plagiarism.</u>

**Intentional Deception** is the submission of false documentation (absence excuse, proof of attendance, etc.) or falsifying any official college record. A student who misrepresents facts in order to obtain exemptions from course requirements has committed an act of intentional deception and may be subject to disciplinary action.

Students who engage in academic fraud will be subject to authorized penalties at the discretion of the instructor of record in the class. Such penalties may range from an adjusted grade on the particular exam, paper, project, or assignment to a failing grade in the course. The instructor may also summarily suspend the student for the class meeting when the infraction occurred as well as the following class meeting. In addition, academic fraud can result in a suspension or expulsion as stipulated by the District's Student Disciplinary Procedures administered by the Vice President of Student Services and Assistant Dean of Student Affairs.

# SECTION VII: CLASSROOM AND CLINICAL POLICIES

#### Registration

Students must be officially registered for the nursing course prior to the first day of class. Students will not be allowed in the clinical area if they are not officially registered and do not have current immunizations, CPR certification, malpractice insurance verification of the required Standard Precautions passing score. Since these requirements are contractual with the facilities, there will be no exceptions granted.

# Liability, CPR Requirements, Emergency Contact Information and E-Mail Addresses

Students are required to have a current American Heart Association for Health Care Providers card. No on-line CPR classes are acceptable. A copy of the CPR card must be submitted to the Nursing Office. Students are also required to have current malpractice insurance and a copy must be submitted to the Nursing Office.

- <u>Emergency Contact Number</u>: It is the responsibility of the student to maintain an up-to-date phone number and emergency contact number to the nursing office.
- <u>E-mail</u>: All students are required to have an email address. The College can provide a student with an email account if necessary. Students are required to submit their email addresses to the nursing office.

# <u>Classroom Attendance</u>

- 1. Theory absences per semester may not be greater than the number of hours the class meets per week.
- 2. Should theory absences exceed the number of hours the class meets per week, the teaching team will meet to consider dropping the student from the class.
- 3. Repeated tardiness is disruptive to the class and interferes with learning. A student who has been tardy three times will receive a classroom absence.

# <u>Clinical/Campus Laboratory Attendance</u>

Clinical/campus lab provides opportunities for students to demonstrate progress and be evaluated. Absences limit these opportunities. Therefore, the following policies are in effect.

- 1. The student must attend <u>all</u> clinical/campus lab sessions. If absence is excused and unavoidable, and appropriate make up experiences are available, the student may arrange with the instructor for a make-up experience.
- 2. Any absence beyond one will be evaluated by the instructor and/or the teaching team. The decision to grant make-up will be based on the student's ability/opportunity to meet the objectives of the course. If during the fourth semester, a student has an excused absence and is meeting the clinical objectives of the course, the student may be allowed to make up the additional hours missed in NU 235. Absences in excess of one will be evaluated by the teaching team and determined if make up will be allowed in NU 235. Make-up in excess of one in any other semester other than fourth is unlikely to be granted.
- 3. Excessive absences may result in a student not meeting the clinical objectives, which in turn constitutes failure of the nursing course. The student is then subject to the re-entry policy.

- 4. Should makeup of equivalent clinical experience be approved and available, it must be completed by the date stipulated by the faculty.
- 5. A student who is late for the clinical laboratory may be sent home and this will constitute a clinical absence.
- 6. A student who is evaluated as being unprepared for that day's clinical assignment may be sent home by the instructor and this will be considered a clinical absence. This may also cause the entry of an unsatisfactory grade on the student's *Clinical Evaluation Performance Form*.
- 7. Students who are ill on a clinical day and are unable to report to the laboratory facility where assigned are responsible for notifying the clinical instructor and agency in accordance with the policies established during hospital orientation.

# Grading

#### ✓ General Information:

#### California Education Code Section 76224 (a) states:

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

The teaching team at the beginning of the course/semester will identify methods of evaluating student performance. These methods may include:

- 1. Computer simulations.
- 2. Objective quizzes and tests.
- 3. Critical skills performance as identified on the *Clinical Performance Evaluation Form.* Evaluation may be scheduled at the college laboratory and/or clinical facility utilized for laboratory experience.
- 4. Planned and incidental observations of nursing assessment, problem identification, care plan development, implementation and evaluation of nursing care.
- 5. Written assignments as stated in the course syllabus or discussed at the beginning of the course.
- 6. Self evaluations of clinical performance based on competencies for the course.
- 7. Written and verbal feedback in student/instructor conferences.
- 8. Student presentations/collaborative learning assignments.

# Course Grades

Course grades are determined on the following:

- 1. Satisfactory clinical performance.
- 2. Satisfactory completion of all assignments.
- 3. An average of 70% on exams as designated in each course syllabi.
- 4. Individual course grades of 70%.

<u>Please note</u>: Both clinical and classroom aspects of each course must be passed. Failure in the clinical or the classroom part of any course results in re-taking the entire course as the Board of Registered Nursing requires that classroom and clinical courses are concurrent.

## Mandatory Tutoring

The faculty will post course grades within one week after an examination. When a student's score on any single exam (70-72%), it is the student's responsibility to attend tutoring as scheduled per each individual course.

## <u>Examination Review</u>

Each course will conduct examination review. Courses which have a comprehensive final exam will have test review done before the final examination. Courses which do not have a comprehensive final exam may have exam review done either during the semester or at the end of the semester. Students will be presented their test scantron for the examination review while the instructor will review any question that was marked wrong on a student's individual scantron.

## • Examination Makeup

Students are required to attend all course examinations. If a student does not attend and notifies the instructor of the absence, the opportunity for examination make-up will be evaluated by the teaching team. If an examination is allowed to be made up, the examination will be scheduled in the Testing Center. If a student misses an examination and does not notify the instructor, examination make up may not be provided.

# <u>Credit By Examination</u>

All nursing courses may be challenged by examination. Applicants considering this option should review, in addition to this document, the college Credit By Examination Policy in the <u>Class Schedule</u>. The Advanced Placement application form may be obtained from the Nursing Department office. For eligible candidates, course Syllabus/Syllabi will be designated for purchase. In addition, the applicant will:

- 1. Meet with the Associate Dean of Nursing to discuss advanced placement options, eligibility, and procedures.
- 2. Pass a written evaluation of content areas for each semester prior to that in which the applicant is seeking entrance. The content areas will be the same as those expected of the student enrolled in the Registered Nursing Program and will be passed with the same level of competency ("C," 70% or higher). Students are reminded that whatever grade is earned on the challenge exam (including failing grades) is entered on the permanent college transcript.
- 3. Demonstrate competency in the skills required in the syllabus/syllabi for each semester for which the applicant is requesting credit. A nursing faculty member who teaches in the semester prior to that in which the applicant is requesting admission will evaluate these skills. The clinical evaluation may be given in the practice laboratory or in the clinical setting.

4. Upon acceptance, present evidence of satisfactory physical and dental health, required immunizations/titers, negative tuberculosis test or negative chest x-ray, current CPR certification and current medical malpractice insurance.

<u>**Note:**</u> Before initiating the challenge policy for any Nursing course the student must first meet with the Associate Dean of Nursing and cannot be enrolled in the course that they are planning to challenge.

# <u>Standards for Written Work</u>

#### Style and Format

Based on the standard at major institutions offering upper division work in nursing, the Grossmont College Nursing Program requires American Psychological Association (APA) format for all written work.

#### Late Work

Assigned written work will be due on dates specified by the instructor. This work must be submitted before class or clinical begins. Partially completed work will not be accepted. If written work is not handed in on time, 10% of the total points possible will be deducted for each day late. (e.g., 3 days late means 30 percent will be deducted). The two weekend days will incur at 10% deduction. If events occur which prevent the student from handing work in on time, special permission for submitting an assignment late may be requested. This request must be submitted in a letter to the instructor before the due date stating the reason for the extension and the amount of additional time requested to complete the assignment.

If a student is unable to come to class the day work is due, it is the student's responsibility to contact the instructor according to that instructor's designated manner of communication and make arrangements for submission of the work. Individual instructors may notify students of other means for handling late papers. The policy for handling pass-fail paperwork will be discussed by each course's teaching team. Late pass-fail papers may not be accepted.

## • Policy On Incomplete Grades

Any student who, based on unusual circumstances, is granted an "incomplete" for a course must submit a plan for completion of course requirements to the clinical instructor for review of by the teaching team. An approved plan must be in the student's file within the first week of the subsequent course for the student to progress in the Program. Please refer to the *Grossmont College Catalog* for further information on incomplete grades.

## • Standards for Clinical Performance

# Drug Calculations Exam

<u>Rationale for testing</u>: Because the faculty at Grossmont College considers patient safety to be of the utmost priority, each student will be required to pass a math exam each semester.

- All students will take a math exam each semester. Single Subject students must pass the math exam for the semester in which they are enrolled. Students will be allowed three (3) attempts. If failure on the 3<sup>rd</sup> attempt occurs, the student will need to withdraw from the program. Readmission depends on space available and successful completion of a drug calculation challenge exam.
- 2. The first exam should occur within the first two weeks of the semester. The second and third exams will occur at weeks 4 and 6 to allow for tutoring. Individual teaching teams may adjust the schedule according to need. The first exam will be taken in the campus classroom. Second and third exams may be taken in the testing center or campus classroom.
- 3. All students must pass with a grade of 90% or better except those students in the final semester who must pass with a grade of 100%.
- 4. Fourth semester students must successfully complete all math testing before entering NURS 235.
- 5. Students who do not pass the exam must seek tutoring from faculty and/or the math department and/or the computerized software available in the health sciences lab.
- 6. Exam format:

a. Each will be 10 questions and not multiple choice. Students will be required to show their work.

b. Each exam will be allotted 30 minutes. Simple 4 function calculators may be used Cell phones, Palm Pilots, or advanced calculators may not be used.

c. The questions will reflect medication calculations that students in that semester will be required to perform. E.g., psych and OB meds in the second semester; IV drips in the third semester and pediatric drugs in the fourth semester.

d. The teaching teams will develop the questions for each semester.

e. If a student fails to place the answer with the correct units (example: ml/hr, units/hr, etc.), this question will be counted as incorrect.

7. Students will pass medications only with <u>direct</u> instructor supervision if they have not yet successfully completed the math exam. Direct supervision includes review of the 5 rights, review of drug action and nursing considerations, drug dose calculations when necessary, rate of administration when necessary, relevant labs when necessary and administration of the medication to the patient with the instructor present. This policy is consistent with those of other schools of nursing and with policies of local agencies, which employ RN's.

#### Sample Drug Calculation:

Ordered: Administer 1250 units of heparin per hour Drug label: Heparin 25,000 units in 500ccs of D5W The nurse would set the pump at how many mls/hr?

# Child Care:

The Nursing Program requires a great commitment of time and energy on the part of the student. If it is absolutely necessary for the student to work during the Program, the student is expected to arrange the working schedule so that no interference with his/her responsibility to any facet of the Nursing Program occurs. It is recommended that work hours not be scheduled immediately prior to attendance in the clinical laboratory. Since most childcare centers refuse

ill children, we advise you to arrange alternatives for your child's periods of illness before the semester begins.

### Transportation:

Reliable transportation is required. It is virtually impossible to attend the Nursing Program without the use of an automobile due to the many hospitals and ambulatory agencies used for clinical experiences. Carpools may be used however, all experiences cannot be arranged to accommodate several students riding together.

## Clinical Flexibility

Students in the Nursing Program are expected to assume responsibility for and have some degree of flexibility in their schedules. If clinical facilities are not available during the assigned laboratory hours, the clinical schedule may be altered. Selected experiences may require student availability at other than regularly scheduled clinical times. These experiences will be discussed as early as possible.

## Pre-Lab Preparation:

Beginning in the first semester of the Two Year Nursing Program, Weekend-Evening Program and Welcome Back Program and the fall semester of the Transition Program, students are expected to complete pre-clinical research at the assigned clinical facility. No nursing care may be provided at this time.

Direct patient care can only be provided during a scheduled clinical laboratory when an instructor or preceptor is present. The school picture identification badge, uniform and/or street clothes with a lab coat are required. Students attending the clinical laboratory who are judged by the instructor or preceptor as unable to provide safe patient care because of illness or lack of clinical preparation will not be permitted to give patient care and may be asked to leave the clinical setting. Such action will constitute a clinical absence.

# Level of Preparedness:

Students will only be expected to perform care and skills for which they have been prepared in the classroom. If assigned to an unfamiliar activity, it is the responsibility of the student to bring to the attention of the instructor or preceptor areas of care and skill for which they have not been formally prepared or previously supervised. Additionally, if a student is required to perform a skill they are not familiar with, they are required to review the facility's policy and procedure manuals before performing any procedure.

## Student Assignments:

Students may be assigned to care for patients with communicable diseases such as AIDS, and hepatitis. Student immunizations must be current. Every student is taught Standard Precautions, which include safety measures to avoid contact with/spread of infectious organisms.

# <u>Student Responsibility</u>

#### Each student is responsible for:

- 1. Reviewing the clinical objectives and clinical criteria in the course syllabus.
- 2. Following the instructions on the front of the Clinical Evaluation Form.
- 3. Providing self-evaluations of their performance in a timely, thoughtful, complete and succinct manner.
- 4. Collaborating with the instructor when they are having difficulty meeting clinical objectives or when improvement is needed.

## <u>Clinical Assignments</u>:

Students are placed in clinical groups based upon their educational needs. Students are not placed in clinical groups based upon geographic proximity to home. Every effort is made to circulate each student through each San Diego health care system during his or her clinical experiences. The faculty formulates the make-up of clinical groups. Students with extenuating circumstances that should be considered when clinical groups are made up should write a letter to the teaching team, prior to posting of the clinical assignment, describing the circumstance and the consideration the student is requesting. Those students who have problems with clinical placements should notify their clinical instructor and describe the problem.

Every effort will be made to avoid placement of students for clinical experience in the same facility/clinical area in which they are employed. In addition, efforts will be made to avoid placing students in clinical areas in which family members are employed. Students who are related family members also will not be placed in the same clinical group. If a student is inadvertently scheduled in the same facility/clinical area in which they are employed or where a family member is employed, the student should immediately report this situation to the teaching team. At the discretion of the teaching team, the student may be transferred to another facility/clinical area.

# DRESS CODE FOR CLINICAL LABORATORY

<u>Uniform</u> :	A specific dye-lot uniform (Hunter Green) embroidered with "Grossmont College School of Nursing" shall be ordered from Smart Scrub. Uniform style is limited to selected school choice. White tee shirts may be worn under the green scrub top. Prices range from \$30-36 for top and bottom with embroidery. A good idea would be to have at least two tops for clinical shifts. Orders for fall semester should be placed by July 1.
<u>Hair</u> :	Neat in appearance. Long hair is to be worn up off the shoulders or tied back with an inconspicuous holder. Must not come in contract with the front of the uniform or with patients.
<u>Jewelry</u> :	One set of simple, inconspicuous stud or post earrings are acceptable. No dangling earrings or hoops. No ornate rings, multiple chain necklaces or bracelets. Watches with a second hand or digital second indicator are mandatory. Piercing of any other visible body part except ears is not acceptable and <u>must be removed for clinical.</u>
Shoes:	Clean, all white, low-op, closed toe and heel and preferably rubber-soled.

- <u>Sweaters</u>: White only. Cardigan or lab coat acceptable. Hunter green warm-up jackets are allowed.
- Nails: Nail extenders are not allowed while providing patient care.
- Hosiery: White or tan nylons for women; all-white socks are permissible for pants.
- <u>Name Badge</u>: The official Grossmont College student picture identification card must be worn on the uniform at all times.
- <u>Pre-lab</u>: Students must be identified while on the hospital premises including pre-labs. During pre-lab (patient assignment research) students must be dressed neatly with a lab coat, Grossmont College picture identification badge, and a Grossmont College Patch attached to the left arm of the lab coat. (Available at campus bookstore.)

**NOTE**: Professional appearance is mandatory.

The Dress Code must be consistent with the dress code of the hospital to which the student is assigned. Modifications of the Dress Code may be made for certain clinical rotations based on the dress policy of the facility utilized. The clinical instructor will discuss such changes. Students questioning the appropriateness of clinical attire should consult with their clinical instructor prior to purchase/wearing. Students will be sent home if infractions of the dress code occur. This will result in a clinical absence.

## <u>Patient Confidentiality</u>

Students are expected to act as professionals with the utmost respect for patient confidentiality. This means that discussion of patients' problems in public places such as cafeterias and elevators, and any discussion of a patient's problems with fellow students are inappropriate. Discussion of such problems with the student's own family members must be done with discretion. Students may be required to sign a confidentiality form.

#### <u>Medication Error Protocol</u>

<u>Definition</u>: Medication error occurs in clinical or would have occurred if the instructor had not intervened.

#### Procedure:

- 1. Patient physiologic stability is assessed and assured.
- 2. Primary nurse is notified.
- 3. Appropriate documentation and agency medication error policy implemented.
- 4. Instructor completes the Medication Error form for tracking purposes and submits to the nursing office.

## • Paperwork for a medication error:

- 1. The medication error must be recorded by the student on weekly student evaluations. Any student making a medication error will receive an unsatisfactory on their weekly evaluation as the error violated patient safety.
- 2. The instructor and the student will together analyze why the error occurred. The instructor will make recommendations for remediation. The student will receive an Unsatisfactory on the weekly *Clinical Evaluation Form*. The student must address in the weekly *Clinical Evaluation Form*. The student must address to prevent reoccurrence.
- If the error is severe resulting in patient harm, the student may be suspended for two days with an immediate referral to the Associate Dean of Nursing and the Dean of Student Services.

# Use of Clinical Evaluation Form

Students and faculty document can evaluate clinical performance on the *Clinical Evaluation Form. Clinical Evaluation Forms* for all courses with a clinical component have a common format, which follows the nursing process and addresses the National League for Nursing Competencies for Associate Degree Nursing. Each form, specific to the course content, identifies the competencies to be accomplished.

- 1. Each course has a *Clinical Evaluation Form* based upon required competencies and course objectives. These are located in each course syllabus. The clinical evaluation code is the same for all courses.
- 2. Clinical instructors evaluate student performance of each competency through use of a performance code printed on each form. The performance code is:
  - S = (Satisfactory) Clinical Performance is safe; adequately demonstrates expected behaviors; applies nursing process at course level consistent with clinical criteria; demonstrates critical thinking; functions within a defined timeframe; requires only occasional supportive cues.
  - NI = (Needs Improvement) Clinical performance is not consistent in meeting clinical criteria; essential information and background knowledge is deficient; reluctant to initiate learning experiences; does not demonstrate critical thinking; requires prolonged time and/or frequent continuous verbal and/or physical cues.
  - U = (Unsatisfactory) Clinical performance is unsafe or inadequate. Unable to demonstrate expected behaviors; does not apply nursing process and/or theory at expected course level; requires continuous verbal and physical cues.
- 3. Each week the instructor and the student write anecdotal remarks addressing clinical performance. The student is to address <u>how</u> they performed relative to the competencies, <u>not</u> what they did for the day. The student rates him/herself, using the performance code. The instructor makes comments and suggests areas of improvement and correspondingly rates the student using the performance code. If the student and instructor ratings are not the same, the instructor will address areas of concern in the comments section. Students are required to hand in their weekly evaluation as designated in each course. Students are

provided with the yellow copy for their records. The white copy is kept by the faculty and referred to when the final clinical grade sheet is completed. All weekly evaluations and final clinical grade sheets are handed into the nursing office once the course is completed. These evaluations are kept in the students' file. See individual course evaluation forms for more specific details.

- 4. If a student is not meeting the clinical objectives of the course, it is the instructor's decision if the student will participate in observational experiences or specialty areas during the clinical rotation.
- 5. If a student receives a NI or U for the week, the instructor will address areas for remediation. Remediation may be suggested or required depending on the instructor's view of the seriousness of the infraction. Remediation plans may include referral to the practice lab, referral to the computer lab etc. If remediation is required, the student must provide proof to the instructor that remediation has occurred. Subsequent weeks after remediation has taken place, the instructor will reevaluate the area of concern. The instructor will then address in the *Clinical Evaluation Form* whether the student has mastered the area of concern.

# <u>Remediation Policy:</u>

If a student has received a grade of U (unsatisfactory) or NI (Needs Improvement) on any weekly evaluation, a remediation plan shall be developed, suggesting/requiring resources and activities designed to assist the student to overcome identified deficiencies. The following is a list of possible campus referrals that the instructor may make for remediation:

- a. English Dept
- b. Math Dept
- c. Counseling
- d. Disabled Student Services
- e. EOPS
- f. Financial Aid
- g. Learning Resource Center
- h. Health Science Computer Lab
- 4. Campus Lab

# ◆ <u>SECTION VIII: DEPARTMENT STRUCTURE AND STUDENT</u> <u>INPUT</u>

A value deeply rooted in the Grossmont College Nursing Programs is the right and responsibility of the individual student to evaluate his/her learning needs and provide feedback to the faculty attempting to meet those needs. Student feedback is solicited throughout the nursing courses. The faculty welcomes student input and utilizes it as they strive to provide excellence in nursing education.

# Opportunities for Student Feedback

Opportunities for student feedback are available to students throughout the nursing program. Students are invited to serve on each of the Nursing Program Committees, to give their opinions and suggestions. During fall semester of the first year, and on as needed basis, student representatives are selected from each laboratory group and meet as needed with faculty to discuss issues and concerns of both students and faculty. There also is opportunity for sharing in small group settings. The students prior to meetings may select topics for discussion.

Students evaluate each course formally with a written evaluation. Areas to be evaluated include texts, instruction and instructional methods, course content, clinical facilities, and clinical experience. Semester evaluations are anonymous. These evaluations are sent to the evaluations office where they are analyzed and student comments are typed. During finals week of the spring semester of the graduating year, each senior student is requested to complete a questionnaire broadly evaluating the Program. Program evaluations are anonymous and submitted to the evaluations office. Results are tabulated and a typed report of comments is prepared. Following the submission of final grades, the results of the semester and final Program and individual course evaluations are circulated among the faculty for review. Recommendations for curricular changes based on student feedback are presented to the Curriculum Committee for consideration as needed.

# Program and Course Evaluation Policy

The following steps are used in the processing of all course and program evaluations:

- 1. Students will complete course and clinical evaluations on the last day of class. Evaluations are anonymous and are collected by a student in an envelope. The envelop is sealed and a student takes the evaluations to the nursing office secretary, who sends the evaluations to the Evaluation's Office on campus.
- 2. The Associate Dean of Nursing will review all evaluations once returned from the Evaluation's Office.
- 3. The Associate Dean of Nursing will identify trends from all data collected and discuss findings with the curriculum chair. Together they will prioritize suggestions and channel information to the appropriate committee or teaching them.
- 4. If the problem(s) identified relate to the program as a whole, the issue(s) will be referred to the curriculum committee. At this level a decision will be made if an ad hoc committee needs to be formed or if the problem(s) calls for all curriculum/faculty members.

# ♦ SECTION IX: DISCIPLINARY POLICIES

## • Suspension Policy/Procedure

- 1. A student is subject to a 2-day suspension, which is considered an unexcused absence, and will have an immediate referral to the Dean of Student Affairs and Associate Dean of Health Professions. Suspension may be based on but not limited to, the following:
  - a. Unsafe clinical practice: Example of unsafe practice may include (but are limited to) the following:

- 1) Failure to display stable mental, physical or emotional behavior(s) which may affect the well being of others.
- 2) Failure to follow through on a remediation plan.
- 3) Acts of omission/commission in the care of patients, such as (but are not limited to): physical, mental or emotional abuse, and multiple medication errors.
- 4) Lack of psychomotor skills necessary for carrying out safe nursing skills.
- 5) Attempting activities without adequate orientation or theoretical preparation or appropriate supervision/assistance.
- 6) Any pattern of behavior that endangers a patient's, staff member's, peers or instructor's safety.
- b. Serious violation of professional, legal, or ethical conduct:
  - Examples of violations may include (but are not limited to) the following:
    - 1) Dishonesty
    - 2) Falsification of patient records
    - 3) Interpersonal behaviors with agency staff, co-workers, peers, or faculty which result in miscommunications, disruption of patient care and/or unit functioning.
    - 4) Failure to maintain patient confidentiality according to HIPAA regulations.
    - 5) Academic Fraud.
- 2. The instructor will communicate the problem area(s) to the teaching team and the Associate Dean of Nursing. Documentation will include a description of the behavior and the status of the patient, if appropriate. The student also may provide written input for review.
- 3. The student will have an opportunity to meet with representatives of the teaching team and the Dean of Student Affairs to share his/her perception of the problem.
- 4. The teaching team and Associate Dean of Nursing will then confer and will present recommendations to the student both verbally and in writing.
- 5. If it is the consensus of the Associate Dean of Nursing and the teaching team that a course failure is appropriate, the student will be informed verbally and in writing.
- 6. If the student is not allowed to progress in the nursing program, the student will schedule an exit interview with the Associate Dean of Nursing to discuss options.
- 7. Following the exit interview, the student will receive a letter summarizing the options discussed at the exit interview.
- 8. Consideration for readmission will be based upon the degree to which remediation has been accomplished and on space available. It is the responsibility of the student to submit written evidence of how he/she has addressed the problem areas and recommendations for remediation. The appropriate teaching team will evaluate the data submitted and determine whether the applicant will be considered for readmission.
- 9. All applicants eligible for readmission will be ranked and placed in the reentry applicant pool.
- 10. Readmission will be on a space-available basis.

# <u>Course Failure</u>

A student is subject to a course failure in any of the following circumstances:

- a. Failure to obtain an average of 70% on all exams.
- b. A theory grade less than 70% for the course.
- c. Unsatisfactory clinical performance on the final clinical evaluation.
- d. A clinical failure results in a course failure despite the grade achieved in theory.

- 5. If the problem(s) identified relate to a specific course, issue(s) will be referred to the teaching team. They will analyze the data and discuss their findings with the Associate Dean of Nursing. At that point a decision will be made if data should be channeled to an already formalized committee or if an ad hoc committee needs to be formed.
- 6. The committee will review the data, develop strategies and propose a recommendation for change to the Associate Dean of Nursing and the appropriate teaching team. Discussion and a vote of those involved will lead to a recommendation for change.
- 7. Proposed change will be implemented and evaluated the next semester the course runs.

# SECTION X: HEALTH AND SAFETY POLICIES

Students must be able to function fully in the clinical area in order to participate in the Nursing Program. Students needing accommodations may share their needs with the Associate Dean or the Faculty Member in the course in which they are registered. Students who become ill during the Program need to submit a letter from their physician outlining their restrictions. Every effort will be made to accommodate restrictions. The Grossmont College Nursing Program will follow the physical requirements of the registered nurses policies at the local health care facilities in deciding upon unusual accommodations. Once a student's physical restrictions have been lifted, it is the student's responsibility to provide a written statement from their physician to the Nursing Office and clinical instructor.

## Pregnancy Policy

The student may remain active in the Nursing Program with <u>written physician's clearance</u> until she delivers and post delivery provided she is able to meet the weekly laboratory objectives and her attendance record remains satisfactory.

#### Antepartum

- 1. The student should notify the clinical instructor as soon as pregnancy is suspected, as some clinical experiences may need to be eliminated for her safety.
- 2. A written physician's clearance is to be submitted to the Associate Dean of Nursing and a copy to the clinical instructor within the first trimester of pregnancy. Thereafter, it is the student's responsibility to notify both the Associate Dean of Nursing and the clinical instructor if problems arise that could limit the student's ability to safety meet clinical objectives.

#### Postpartum

The student must present a written physician's clearance to the Associate Dean of Nursing and a copy to the clinical instructor prior to returning to the clinical laboratory.

## Post –Surgery/Extended Illness Policy

1. The student must submit a written physician's or primary care provider's clearance to the Associate Dean of Nursing and a copy to the clinical instructor for clinical lab attendance.

- 2. The student must be able to meet weekly objectives to remain in good standing in the Program. The teaching team, with student input, will determine whether imposed medical restrictions allow accomplishment of clinical objectives.
- 3. The Attendance Policy of the Program will apply unless judged inappropriate to the individual case by nursing faculty review.

# <u>Report of Injury/Exposure to Infection</u>

Students need to immediately report any clinical or classroom injuries or exposure to infections (e.g., scabies) to their nursing instructors. Clinical or classroom injuries or exposure to infections are covered under the Program's workman's compensation policy so the necessary forms and referrals must be made. The nursing instructor will advise the student how to proceed for prompt treatment and the completion of the necessary forms.

#### Immunizations

The Nursing Department requires documentation of immunity/seropositivity for polio, measles, mumps, rubella, diphtheria, tetanus, and Hepatitis B. Current tuberculin test results and a varicella titer must be on file. A low cost immunization program is available for most of these immunizations through the Grossmont College Student Health Services Department.

## <u>Standard Precautions</u>

Each fall semester prior to the first clinical day, students must complete the Standard Precautions computer simulation. Students must submit to the classroom or clinical instructor a computer generated readout verifying passing with a minimum score of 80%. See lab instructions in each syllabus for specific details of the Standard Precautions computer simulation.

#### • Other Safety Information

Affiliating agencies may require additional testing, i.e., drug screening. Students are responsible for notifying the clinical instructor of any change in their health status which may impact their own and/or patient safety.

#### Splash Goggles

Students are required to purchase a pair of splash goggles and have them available for use in all clinical areas

# ♦ SECTION XI: STUDENT SERVICES

• **NURSING DEPARTMENT OFFICE**: The Nursing Office is located in Room 340C (Health Professions). Phone: 644-7300. The Nursing classrooms and laboratories are located in the Science and Technology building (300 North). Faculty offices and phone numbers are as follows:

Pat Bradley Nancy Tendal	300B2 300B4	644-7892 644-7885	Roland Estrella Sandie Freeman	354 352B	644-7319 644-7895
Diane Helland	342D	644-7428	Linda London	342B	644-7450
Sharon Sullivan	342D	644-7452	Debbie Yaddow	354	644-7426
Tom Oertel	342C	644-7429			

• **<u>NURSING SKILLS LAB</u>**: The Nursing Skills Lab is located in Room 355A. A regular tutoring schedule is posted. Students with special requests for tutoring should notify the teaching team or the Associate Dean of Nursing.

• **<u>HEALTH PROFESSIONS LAB</u>**: 644-7316 located in 329A. The Health Professions Technicians are Diane Leong and Linda Goodwin.

• <u>HEALTH PROFESSIONS COMPUTER CENTER</u>: Is available to all allied health students. A variety of computer programs are available including the NCLEX-RN simulation. Call 644-7316.

• <u>CALIFORNIA NURSING STUDENTS' ASSOCIATION (CNSA</u>): The Nursing Program has an active chapter of CNSA, which is affiliated with the National Student Nurses' Association. The club sponsors many activities and services that contribute to the professional development of nursing students. Please see the advisor or one of the club officers for information about joining CNSA. Contact Sandie Freeman.

• **<u>COUNSELING CENTER</u>**: 644-7208. The Counseling Center is staffed with professional counselors trained to assist with education and career planning and personal concerns.

• <u>STUDENT HEALTH SERVICES</u>: 644-7192, Room 114. The Health Services Office coordinates matters concerning student insurance, illness assessments and treatment, health counseling, first aid, vision and hearing screening, substance abuse and eating disorder counseling, health screenings, immunizations, laboratory testing including HIV tests and blood pressure monitoring.

• <u>LEARNING AND TECHNOLOGY RESOURCE CENTER</u>: 644-7361. The Learning and Technology Resource Center (LTRC) is the large building in the center of the campus. It is organized into the Library, the Reserve Reading Room, the Computer Aided Learning Mode Lab (CALM), and the Instructional Media Center/

• <u>TUTORING CENTER</u>: 644-7387. The Tutoring Center is located on the second floor of the Learning and Technology Resource Center. Currently enrolled students may use the Tutoring Center. Academic tutoring is available at no cost.

• **DISABLED STUDENT SERVICES**: 644-7112. The Disabled Student Services department provides services for students who have mobility, visual or hearing impairments; who need speech assistance; or who need assessment, remediation and individualized tutoring due to a

diagnosed learning disability. Also available are special spelling and writing skills classes, test taking assistance, and registration assistance.

• **<u>FINANCIAL AID</u>**: 644-7129. Students may apply for financial aid in the form of grants, scholarships, loans and work. Applications for financial aid are available in the Financial Aid Office. Scholarship opportunities are posted in the Financial Aid Office, n Room 355.

• **VETERANS AFFAIRS OFFICE**: 644-7165. The Veteran's Affairs Office serves the needs of veterans who qualify for educational benefits.

• <u>ASSOCIATED STUDENTS OF GROSSMONT COLLEGE (ASGC)</u>: 644-7604. The ASGC Government Program offers students opportunities in self government as well as a general means for campus involvement and problem-solving on a intra- and inter-campus basis. Nursing students are encouraged to support their activities by purchasing an ASGC card. In turn they support the Health Professions departments through donations of equipment and services.

Many other services are available on campus. Please refer to the *Grossmont College Catalog*, the *Grossmont Student Handbook*, the Counseling Office, your instructor or the Associate Dean of Nursing for additional assistance. We are here to help you succeed in achieving your career goals.

# SECTION XII: GENERAL ADMINISTRATIVE POLICIES

## <u>Student Records/Files</u>

Nursing student records are kept in the Nursing department Office. Students may review their records by making an appointment with the associate dean. Students are responsible for providing the Nursing Office with updates of malpractice, immunizations, and CPR as they expire. LVN to RN students are responsible for providing and maintaining a current nursing license. This is a requirement for attending clinical and failure to do so will count as a clinical absence. A student may request a copy of his/her file. At least a one week notice must be provided to the nursing secretary prior to receiving a copy of the record. A photocopy of parts of the record may also be requested.

## • Emergency Contacts

Student must update the Nursing Office with any changes in name, address, phone number and email addresses as soon as possible. All students must provide an emergency contact number to the nursing office and must keep this number up to date.

## <u>Student Work Experience</u>

Work experiences provide opportunities for students who have completed the first year of the nursing program to gain additional clinical experience in medical-surgical settings, and post-partum areas, by working in a paid or unpaid status under direct supervision of a clinical preceptor. Placement in a facility for work experience is determined by the hiring facility. The

coordinator of the work experience programs will present a list of interested first year students to members of the first year nursing team. If a student requires more supervision than is designated in a work experience, students may not be able to participate in a work experience program. A faculty liaison provides guidance through review of objectives, consultation with the preceptor and periodic meetings with the student. Work experience opportunities may be limited due to facility constraints, lack of preceptors or faculty scheduling conflicts.

During spring semester, the faculty liaison will meet with incoming 2<sup>nd</sup> year students to discuss opportunities for work experience and/or externships. Any student interested in participating in a work experience/externship must attend this <u>required</u> meeting. Failure to do so will result in the student's inability to participate for the subsequent semester in an externship. Students should not make contacts with clinical facilities or preceptors without prior discussion and permission of the Associate Dean of Nursing.

Work experience/extern hours should be completed within the semester in which the student is registered. Student may be assigned more than one preceptor during the work experience/externship.

A work experience in a specialty area such as psychiatric-mental health, emergency department, intensive care units and other critical area areas will only be considered on an individual basis after successful completion of Nursing Management in Oxygenation Disorders and Psychiatric Mental Health Nursing. Students requesting placement in a specialty area must submit a written request with rationale and specific clinical objectives to the Associate Dean of Nursing who will direct it to the appropriate work experience faculty for consideration.

# <u>Gift Policy</u>

Gifts from students to faculty are discouraged.

## <u>Transfer Policy/Advanced Placement</u>

Opportunities exist for transfer from accredited baccalaureate, diploma, or associate degree schools of registered nursing into either the Registered Nursing or LVN to RN Transition Program at Grossmont College. The nursing faculty and the Associate Dean of Nursing or his or her designee will evaluate previous coursework and determine its equivalency to related coursework at Grossmont College. Students seeking transfer should review, in addition to this document, the college Transfer Policy in the <u>Grossmont College Catalog</u>.

Advanced placement in the nursing curriculum is on a space available basis. Application for advanced placement must be received in the Nursing Office by DECEMBER 1 or MAY 1 preceding the semester into which the applicant seeks admission.

The Advanced Placement application form may be obtained from the Nursing Department office. In addition, the applicant will:

2. Interview with the Associate Dean of Nursing to review transcripts and course outlines, determine eligibility, and identify an appropriate entry point into the nursing curriculum.

- 3. Demonstrate competent performance of selected skills representative of prior qualifying nursing courses.
- 4. Upon acceptance, present evidence of satisfactory physical and dental health, required immunizations/titers, negative tuberculosis test or negative chest x-ay, current CPR certification and current medical malpractice insurance.

# <u>Nursing Program Re-Entry Policy</u>

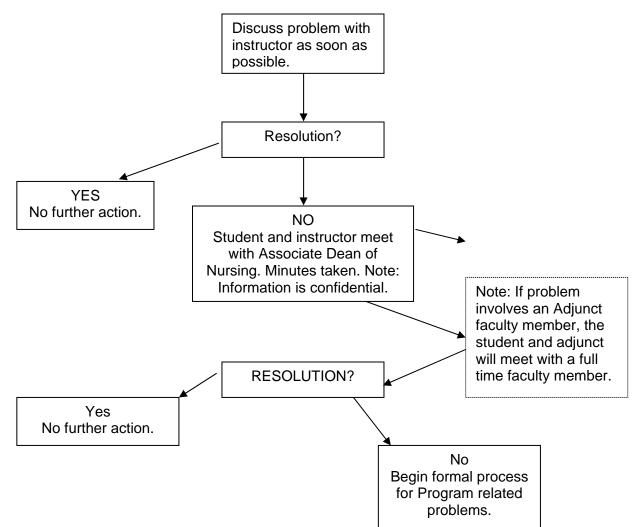
- 1. The teaching team will make recommendations to the Associate Dean of Nursing for reentry based upon the reasons leading to the student's withdrawal from the nursing program. These recommendations will be presented to the student in writing. The student may also need to present written documentation to the Associate Dean of Nursing depending on the recommendations set-forth before re-entry is considered. A student will only be considered for re-entry once, and re-entry is not guaranteed. Re-entry will be evaluated on an individual basis and will also be contingent on a space available basis.
- 2. Procedure for re-entry consideration for a student failing a nursing course: The teaching team will meet with the student as necessary to discuss strategies for future success in the course the student failed. The student meets with the Associate Dean of Nursing as soon as possible after not completing a course. The teaching team and Associate Dean of Nursing will evaluate re-entry on an individual basis and on space availability in the needed course. If a student is discharged from the program for unprofessional conduct or a violation in legal or ethical standards set forth by the program, then re-entry might not be possible. If a student is a candidate for re-entry the Nursing Department maintains a "Re-Entry List" on to which this student's name is entered along with the date on which the student made the request for re-entry and the courses the student needs. As seats become available in those courses, the Associate Dean of Nursing notifies students on the Re-entry List on a first come, first served basis. The re-entering student must provide documentation of satisfactory physical and dental health (evaluation must be within the past year), CPR certification, and Liability Insurance. Forms are available from the Nursing Secretary.
- 3. Limitations of re-entry:
  - a. Re-entry is neither automatic nor guaranteed and will be considered on a "spaceavailable" basis.
  - b. Student must be on the Re-Entry List so that there is no more than a <u>three-year</u> absence.
  - c. Re-entry consideration is given to an individual student only <u>one</u> time to complete the RN curriculum. Special consideration may be given in extraordinary circumstances.
  - d. A student who has been dismissed as a result of unsatisfactory clinical performance will require special consideration.

# • Procedures Governing Problem Solving In The Program

#### Informal Process

When a student is having a problem in the Nursing Program or a student who is notified that he/she is not meeting the standards of the Nursing Program in either the classroom, college lab, or clinical facility should meet first with the instructor of record for the course or (if the deficit is in clinical practice) with the Clinical Instructor. The student should seek clarification of the deficit and work with the faculty to construct a plan for improvement.

Below is a graphic representation of the Informal Process.

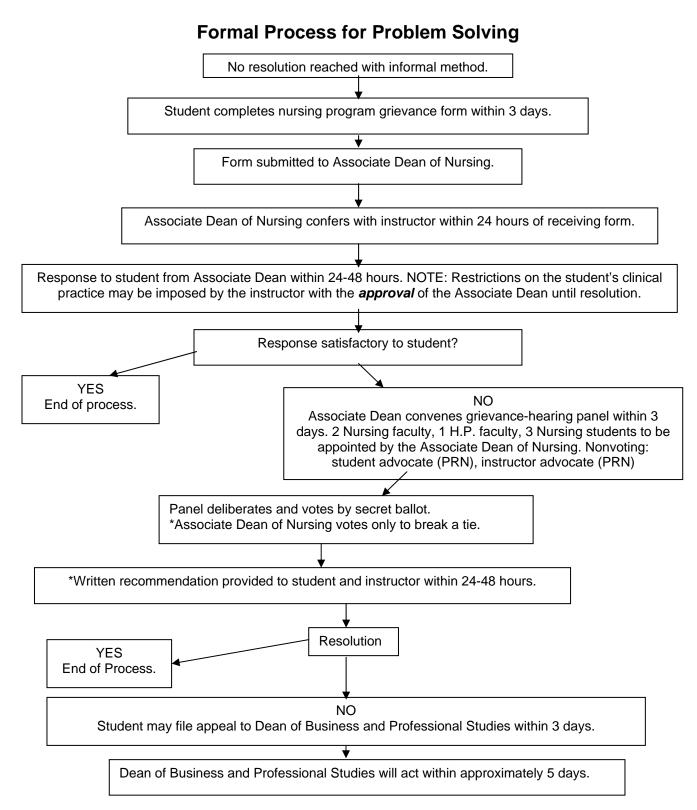


Informal Process for Problem Solving

If the Informal Process does not result in successful resolution of the problem, the student and faculty proceed to the Formal Process for Problem Solving. Below is a graphic representation

of the Formal Process followed by the *Nursing Program Grievance Form,* which the student must complete as part of the process.

Formal Process



#### NOTE:

- 1. At any time during the process, the student may elect to terminate the Informal Process and being the Formal Level Process.
- 2. Theory and clinical grades are the sole discretion of the instructor and is regulated by the Education Code and are not subject to grievance.
- 3. The decision of the panel is <u>only a recommendation</u> to the parties involved.
- 4. No member of the grievance-hearing panel may be a licensed attorney.
- 5. No attorney may be in attendance at the time.

#### **GROSSMONT COLLEGE**

#### NURSING PROGRAM GRIEVANCE FORM

Originator's perception of the problem:

Originators desired outcome:

Signature of originator: \_\_\_\_\_\_ Date:\_\_\_\_\_

#### • Progress In The Program

Below you find a map of the curriculum plan by semester for the General Program and the Transition Program. The map shows the order in which nursing courses are taken.

SEMESTER 1	SEMESTER 2	SEMESTER 3	SEMESTER 4
NURS 120: Introduction to Nursing: Theory & Practice	NURS 130: Perioperative Nursing	NURS 220: Nursing Management in Nutritional/Metabolic Disorders	NURS 230: Nursing Management in Cardio- Pulmonary and Circulatory Disorders
	NURS 132 Maternal/Newborn and Child Nursing	NURS 222: Neurologic & Psychiatric Nursing	NURS 235: Multiple Patient Care Management

#### 2-YEAR PROGRAM CURRICULUM

#### LVN-RN TRANSITION PROGRAM CURRICULUM

SUMMER, SEMESTER 1	FALL, SEMESTER 2	SPRING, SEMESTER 3
NURS 110: Transition to Registered Nursing	NURS 201: Nursing Care Planning for LVN-RN Transition Students	NURS 211: Advanced Medical- Surgical Nursing and Community Health
	NURS 203: Medical Surgical I	NURS 235: Multiple Patient Care Management
	NURS 205: Psychiatric-Mental Health Nursing	

#### • Course Prerequisites

Please refer to the Grossmont College catalog for this information.

# ♦ SECTION XIII: GRADUATION

# <u>Commencement</u>

The Nursing faculty encourages all eligible students to participate with them in the Grossmont College Commencement. Effort will be made to have Grossmont College Nursing students' line up for the processional so they will sit as a group and receive diplomas consecutively.

# • <u>Pinning</u>

The Grossmont College Nursing Program pin is awarded at a pinning ceremony to all students who successfully complete the program with the Associate Degree. Participation is optional, but highly recommended. During the fall semester second year students, Weekend/Evening, Welcome Back and LVN-RN Transition students will select representatives to serve on the Pinning Committee. A faculty representative and the department secretary in consultation with students will coordinate the pinning ceremony. It is held on campus in conjunction with the Grossmont College Commencement. Financing of the Pinning Ceremony is the responsibility of the graduating class. Students purchasing Grossmont College Nursing Pins will receive their pins at Pinning. Pins not claimed at that time will be available in the Nursing Office the following day.

# SECTION XIV: Nursing Program Committee Structure

Nursing students have input into the Programs through membership on and participation in department committees including the Instructional Resources, Curriculum, Policy, Recruitment, and Graduation and Advisory Committees. Students also participate on the Nursing Hearing Panel when student grievances are heard

The Committee consists of faculty members and students from each of the Program levels.

#### Instructional Resources Committee

The purpose of the Instructional Resource Committee is to review, recommend and maintain quality teaching materials for student and faculty use in the Nursing Program. The Committee evaluates library books, computer software, laboratory equipment, videos and other instructional aids. In order to achieve its goals, the Committee works closely with nursing students, faculty, the Learning & Technology Resource Center, the Computer Assisted Learning Lab (CALM), the Health Science Lab, and other department on campus.

#### Committee Structure

Membership includes nursing faculty and student representatives from each Program level.

#### <u>Curriculum Committee</u>

The purpose of the Curriculum Committee is to develop, review, revise a relevant curriculum, which accomplishes the objectives of the Nursing Program and meets the standards of both the California Board of Registered Nursing and the National League for Nursing.

#### Committee Structure

The Curriculum Committee consists of all nursing faculty and a student representative from each Program level. One alternate is also selected from each Program level. The Assistant Director of the Nursing Program is the chairperson.

#### Policy Committee

The purpose of the Policy Committee is to annually review and revise Nursing Program policies as well as develop new policies as needed. Revised and new policies are presented to the total faculty for approval. The Committee updates the *Nursing Student Handbook* utilizing written input solicited from the students.

#### Committee Structure

The Policy committee consists of faculty representatives from each Program. Student representatives are invited to attend and share their perspectives on specific issues as they arise.

#### Advisory Committee

The Advisory Committee serves as a forum for discussion of community, educational and institution concerns that impact the profession and specifically nursing education. Meetings are held at least annually.

#### Committee Structure

The Advisory Committee consists of interested community members, community educators, a student representative from each Program levels, nursing faculty, the Associate Dean of Nursing and the Dean of Business and Professional Studies. The Associate Dean of Nursing serves as chairperson.

#### Pinning Committee

The purpose of the Graduation/Pinning Committee is to plan and coordinate activities related to graduation from the Nursing Program and Grossmont College.

#### Committee Structure

The Committee will consist of a faculty advisor, Nursing Secretary and at least two representatives from the Generic Program and two from the Transition Program. The representatives will facilitate the development of the Pinning Ceremony.

#### Recruitment Committee

The Recruitment Committee is an interface between the Nursing Program and potential students. The Committee promotes the Nursing Program on campus and in the community by participating in career days, job fairs, community health awareness days and other related events.

# ♦ SECTION XV: UPWARD EDUCATIONAL MOBILITY

# <u>Articulation with Local Bachelor and Master of Science in Nursing</u> <u>Programs</u>

In order to assist the student at Grossmont College who wishes to progress to an upper division program, articulation agreements has been developed by the Counseling Center. This information can be of value in meeting the general education requirements at Grossmont College and simultaneously obtaining the needed courses for progression to upper division work without unnecessary repetition. While these articulation agreements are updated each year, it is recommended that the student contact the school directly for any specific information needed.

Included in the following list are San Diego County schools with B.S.N. and M.S.N. programs. All are N.L.N. accredited or seeking NLN accreditation. Some other programs currently available do not confer a B.S.N. or M.S.N. and are not N.L.N. accredited. *This may impede upward mobility*.

Both U.S.D. and S.D.S.U. offer advanced placement opportunities in the Master of Science in Nursing programs for Grossmont College nursing graduates holding a Bachelor's degree in an unrelated discipline. Additionally, U.S.D. offers an A.D.N. to M.S.N. track in three (3) years with an incidental B.S.N. awarded en route.

Local opportunities for upward educational mobility:

Point Loma Nazarene College	University of Phoenix
3900 Lomaland Drive	3870 Murphy Canyon Road, Suite 200
San Diego, CA 92106-2899	San Diego, CA 92123
School of Nursing	National University
San Diego State University	11255 North Torrey Pines Road
San Diego, CA 92192-0420	La Jolla, CA 92037
Philip Y. Han School of Nursing	Statewide Nursing Program
U.S.D., Alcala Park	1000 East Victoria Street
San Diego, CA 92110	Carson, CA 90747

If you have any questions regarding the articulation agreements, contact Bonnie Schmiege in the Grossmont College Transfer Center, 644-7094

OR Associate Dean of Nursing Grossmont College 8800 Grossmont College Drive El Cajon, CA 92020 (619) 644-7300

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