GLENDALE COMMUNITY COLLEGE

Annual Program Review 2011-2012 – INSTRUCTIONAL

Division - Program

HEALTH SCIENCES/NURSING

Authorization

After the document is complete, it must be reviewed and submitted to the Program Review Committee by the Division Chair.

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Overview of the Program

All degrees and certificates are considered programs. In addition, divisions may further delineate and define programs based on their assessment needs (developmental sequences, career track, etc.).

Statement of Purpose – briefly describe in 1-3 sentences.

The primary purpose of the Department of Nursing faculty is to prepare entry-level registered nurses (RNs). The curriculum is designed to equip the graduate with the knowledge, skills, and attitudes to function safely within the legal framework of nursing set forth by the State of California (Department of Consumer Affairs; Board of Registered Nursing). Successful completion of the Program establishes eligibility to apply for California RN licensure achieved by passing the National Council for Licensure Examination for Registered Nurses (NCLEX-RN).

Please list the **most significant achievement** accomplished since your last program review.

The NCLEX-RN rates remain strong at a 91.84% for 2010-2011 with a 97.3% pass rate in the last quarter. The Department of Nursing successfully completed and passed the 8-year continuing approval process from the California State Board of Registered Nursing (BRN) on September 19 and 20, 2011.

List the current major strengths of your program

1. A strong team effort and diversity of faculty, staff, and students who are able to meet the needs of the culturally diverse population of Los Angeles County. Maintaining close professional relationships with the community and practice partners (clinical facilities) has resulted in an about 70% employment of our students within 6-9 months after graduation. This is high compared to the state average of 40-50% in the last year.

2. Per BRN commendations: Strong team effort by faculty and staff in obtaining grants enabling additions to the nursing program including staff, computers, simulation, and mannequins that strengthen student learning and success. The program was also commended for “strong faculty teamwork and high quality student education in face of

program leadership changes and gaps, and cohesive team approach in preparation for the Self-Study."

3. Commended by the BRN for the program's strong curriculum in preparation of students for transfer into BSN and MSN programs (e.g., incorporating research across the curriculum, strengthening APA format, Journal Article Analysis, writing assignments, etc.) and evidenced by the high licensure pass rate: 91.84% in 2010-2011 (since June 2011), with a 97.3% pass rate in the last quarter.

4. The program encourages open communication and mentoring between faculty and staff including bi-monthly faculty meetings with opportunities for feedback from full-time, adjunct and staff members. The minutes from these meetings are circulated to all members via email for feedback and revision prior to the next meeting. These activities have resulted in open dialogue, sharing of ideas, and willingness of faculty involvement and expressed enthusiasm in progressing toward the program's goals.

5. The students have a conducive environment for learning. There is a tutoring and mentoring program and a Nurse Advisor funded by the Department of Health Services (DHS) grant. The Nurse Advisor arranges for tutoring (peer or faculty) to promote student success. The Nurse Advisor also provides guidance for students who score <76% on a given assignment or exam. The Nursing Resource Lab (NRL) and its staff are responsible for assisting students in practicing skills, remediating, and simulation.

6. The students are very involved in the community, on and off campus. They are part of the California chapter of the Student Nurses Association in the college. They have class officers who meet and share ideas to promote success, fundraise for their pinning ceremony, and do activities to enhance their learning. The students are also known in the community for their involvement in flu clinics, health fairs, shelters, and helping the homeless and needy.

7. The Glendale Community College Nursing Program is one of few nursing programs to have both a standard (day classes and clinical rotations) and a weekend/evening schedule to meet student and community needs.

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List the current weaknesses of your program

1. There is a high adjunct faculty (28) to full-time faculty (9) ratio. Of the 9 full-time faculty members, 2 of them have 40% release time to be assistant directors. In addition, there are several grant-funded staff positions including one administrative assistant, one file clerk, four Nursing Resource Lab Nurse Associates, one nursing counselor, and four adjuncts. A recommendation from the BRN Approval Report is that the college "consider budgetary provision, [and] sustaining funding [by the college] for grant-funded programs, particularly, the full-time faculty positions and the supporting staff, to ensure student success" [California Code of Regulations (CCR) Section 1424 (d)].

2. Per the BRN, there is a need to "establish consistency among faculty between each course of instruction." The inconsistency is due to the increased number of adjunct faculty to be supervised (28) and assisted by the nursing program director and full-time faculty. Adjunct faculty members need guidance, supervision, and assistance when student problems arise, and also need to be aware of BRN regulations and college policy. There needs to be more full-time faculty to help with the workload to ensure that BRN curriculum and clinical regulations are followed [California Code Regulation (CCR) Section 1424(d)].

3. There is need for a dedicated full-time nursing program director per BRN recommendations. Currently, in addition to college responsibilities including implementing policies; following Guild agreements; and participating in college issues and meetings, the Associate Dean is responsible for three health sciences programs: Emergency Medical Technician (EMT), Alcohol/Drug Studies (ADST), and Nursing, and serves as the Health Sciences Division Chair and Nursing Program Director. The Associate Dean's workload, therefore, includes maintaining compliance with the BRN, ADST, and EMT regulations as well as hospital and facility regulations; supervising, hiring, orienting and evaluating adjunct faculty members; maintaining all program evaluations; updating and managing curriculum; dealing with student and faculty issues; scheduling clinical rotations and classes; overseeing grants and the budget; writing evaluations; and verifying payroll hours.

1.0. Trend Analysis

For each program within the division, use the data provided to indicate trends (e.g., steady, increasing, decreasing, etc.) for each of the following measures.

Program	Academic Year	FTES Trend	FTEF Trend	WSCH / FTEF Trend	Full-Time % Trend	Fill Rate Trend	Success Rate Trend	Awards Trend
ALCOHOL/ DRUG STUDIES	2007-2008	60	4.1	469	39.3%	78.2%	74.3%	15
	2008-2009	66	3.8	551	41.9%	89.2%	76.6%	18
	2009-2010	83	4.8	553	37.5%	99.7%	79.7%	33
	2010-2011	68	5.0	432	31.8%	88.2%	76.8%	30
	% Change	+13.9%	+23.6%	-7.9%	-19.1%	+12.8%	+3.3%	+100.0%
	4-Yr. Trend	increasing	increasing	stable	decreasing	increasing	stable	increasing
EMT	2007-2008	49	1.2	1,291	0.0%	75.9%	65.7%	0
	2008-2009	57	1.3	1,416	0.0%	97.5%	53.8%	0
	2009-2010	70	1.2	1,836	0.0%	110.2%	58.1%	0
	2010-2011	53	2.0	845	0.0%	95.1%	60.4%	0
	% Change	+8.3%	+65.5%	-34.5%	--	+25.4%	-8.1%	--
	4-Yr. Trend	stable	increasing	decreasing	increasing	increasing	stable	Increasing
NURSING	2007-2008	325	14.5	715	82.9%	94.3%	96.1%	110
	2008-2009	337	15.8	677	80.4%	90.4%	95.0%	110
	2009-2010	311	15.3	646	79.7%	90.0%	95.3%	103
	2010-2011	220	15.7	445	87.4%	86.1%	96.6%	98
	% Change	-32.2%	+8.9%	-37.8%	+5.4%	-8.7%	+0.5%	-10.9%
	4-Yr. Trend	decreasing	stable	decreasing	stable	stable	stable	decreasing
HEALTH SCIENCES DIVISION TOTAL	2007-2008	434	19.7	700	68.8%	88.2%	88.2%	125
	2008-2009	461	21.0	699	68.4%	90.9%	85.8%	128
	2009-2010	464	21.3	693	65.7%	95.0%	85.7%	110
	2010-2011	342	22.8	477	67.4%	88.2%	84.9%	128
	% Change	-21.3%	+15.4%	-31.8%	-2.1%	+0.1%	-3.7%	+2.4%
	4-Yr. Trend	decreasing	increasing	decreasing	stable	stable	stable	stable

1.1. Describe how these trends have affected student achievement and student learning:

The FTEF trend had been stable up until Summer 2011. There were 13 FT faculty members up to last Spring 2011. Since then, 2 FT instructors retired, 1 was promoted to Associate Dean, and the other FT instructor was only a one year temporary hire who was not replaced. Currently, there are only 9 FT faculty members, with 2 instructors each with 40% release time as assistant directors, making it technically 8 FT faculty. **There are several "inconsistencies among faculty…in the course of instruction and evaluation of students," according to the BRN's final report findings of our program [CCR 1424 (d)].** This is mainly due to the high number of adjunct faculty needed to orient and supervise students, keeping the program consistent in order to meet BRN regulations and achieve student success and learning outcomes. The NCLEX-RN pass rate this last year was not affected; however, with increased adjunct faculty, there is more difficulty in keeping track of instructional consistency **and a trend in decreasing pass rates and increasing attrition rates may ensue in the coming semesters. The BRN requires that NCLEX-RN pass rates are 75% or above and attrition rates less than 25% per graduating class.** In addition, it may appear that we have only a few instructors; however, the adjuncts for clinical are not counted for the FTEF, so our FTEF may actually be higher.

The FTEF % trend appeared stable until Summer 2011. The staff has always had an increased workload due to the full-time versus adjunct ratio. In this case, the program would not be following the BRN regulations requiring that "Faculty numbers, including the ratio of full-time to part-time faculty, will be sufficient to safely implement the curriculum." Last year, the nursing program had 17 adjuncts and 13 full-time faculty. However, this trend has currently decreased because of the loss of four full-time faculty members last summer. We are now with 28 adjunct and 9 full-time faculty. Adjuncts have replaced the loss of the 4 full-time faculty, and this has created difficulties, mainly "inconsistencies in student instruction in class and clinical" per the BRN report findings this fall. Not only is this detrimental to student learning and success, but **a trend in a decreasing NCLEX-RN pass rate and a high attrition rate in the program may be foreseen**. We anticipate that our FTEF % trend will decrease next year.

The Fill Rate Trend is high and stable because the Nursing Program is required by the BRN regulations to keep the attrition rate less that 25% and to have a program filled to capacity as often as possible. The nursing program is able to achieve this because in every incoming group, additional students are taken as "alternates." If seats become available due to attrition, these alternates can fill the seats early in the first semester. Another explanation for the high fill rate is that the prerequisites and general education of nursing students are many and rigorous which creates a stronger foundation for the student.

The Success Rate Trend is high and stable due to the process that begins at admission. There is a set of admission criteria set by the Chancellor's office which includes the Chancellor's Formula (a weighted cut score) and the Test of Essential Academic Skills (TEAS) with a cut score. In addition, the program has an admitting grade point average (GPA) of 2.0 and satisfactory completion of prerequisites. All these factors are taken into consideration in determining eligibility of applicants. Eligible students are then placed into a pool for random selection. The Department of Health Services Grant funds tutoring, mentoring, counseling, and advisement for current students. This also contributes to student success, retention and completion of the program. In addition, the strong curriculum and 13 full-time faculty members on staff over the past four years have led to high NCLEX-RN pass rates. However, with a decrease in full-time faculty members, the success rate trend may decrease and result in poorer NCLEX-RN pass rates due to inconsistencies in instruction.

The Total Awards Trend is very high but decreasing as a result of the decrease in admitted students, due to decrease CCCCO grant funding for Capacity and Enrollment Growth. The nursing program highly encourages prospective pre-nursing students to finish their general education requirements in addition to the prerequisites in order to obtain their Associate's Degree in Nursing (ADN). This is not only to enhance their foundational knowledge and skills but to increase their chances of success in passing the NCLEX-RN and ability to move on to obtain a higher degree, such as their Bachelor's or Master's Degrees.

1.2. Is there other relevant quantitative/qualitative information that affects the evaluation of your program?

The FTES has decreased because of the change to block scheduling, and the CCCCO (Capacity Building and Growth and Enrollment) Grant in the past 4-5 years has been gradually cut each year. The grant enabled the program to increase the number of students admitted each semester from 36 up to 60 in 2007. This student increase was recommended by the State of California to address the nursing shortage. Due to the economic downturn, the grant has dwindled from about $620,000 to $260,000 in the past four years and has forced the program to reduce the amount of students admitted. Effective Fall 2010, the nursing program admitted only 40 students per semester (20 students in the standard group and 20 students in the weekend/evening group). The nursing program is unable to sustain the number of increased graduating students without grants or funding. It is critical that the nursing program sustain its weekend/evening group to meet community needs and engage diverse learners that are working and need this type of schedule.

The WSCH/FTEF trend is decreasing because of the gradual decrease of admitted students from 60 to 40 per semester in the last four years due to the decrease in grant funding. As a result of the decreased number of students, there may not necessarily be a large decrease in faculty. The decrease in faculty may be slight because the program must maintain a weekend/evening and standard day program to meet student and community needs. Many of our students either work, have other responsibilities, and/or have children or family to care for, so the weekend/evening schedule or standard schedule are options that work well with this very diverse population.

While the WSCH/FTEF is a formula that addresses efficiency, it is not applicable to the clinical setting because our clinical sites do not permit more than 10 students in a cohort for every 1 instructor. The BRN mandates that this ratio established upon approval is maintained. This is critical in maintaining patient safety and maximizes student learning due to closer faculty oversight/supervision. As a result, we have more instructors required for one class or course compared to other disciplines. The WSCH/FTEF may also look low because of this requirement.

2.0. Student Learning and Curriculum

Provide the following information on each department and program within the division.

List each Department within the Division as well each degree, certificate, or other program* within the Department	Active Courses with Identified SLOs n/n	%	Active Courses Assessed n/n	%	Course Sections Assessed n/n	%	If this area has program outcomes have they been assessed? Yes or No
NURSING	18/18	100%	18/18	100%	5/5 SLOs and PLO #1	100%	YES

2.1. Please comment on the percentages above.

The nursing program has always implemented program evaluations per BRN regulations as part of a quality improvement analysis. The nursing program is also required to have terminal objectives for students which tie to the courses' student learning outcomes (SLOs). This is part of the reason some data has already been obtained. However, a constant timeline for course assessment cycles needs to be established.
Last academic year, the nursing program assessed NS 211 (1st semester), NS 202 (2nd semester), NS 203 (3rd semester), NS 214 (4th semester) , and NS 216 (Intersession after 3rd semester) and PLO #1.

2.2. a) Please provide a ***link**** to all program assessment timelines here. This link could be to your division /department website, eLumen.
b) Briefly summarize any pedagogical or curricular elements of courses/programs that have been changed or will be changed as a result of developing assessment timelines and course/program alignment matrixes.
c) Based on the program assessment timelines you have developed and the evidence you have gathered, please comment briefly on how far along your division/program is in the assessment process.

a) Go to the GCC Nursing website (http://www.glendale.edu/index.aspx?page=213), click on "Health Sciences Division," and then the subpage for the SLO and PLO will appear. The document can be downloaded on the page. Both are in PDF format.
b) The timelines have been helpful in organizing our focus for PLOACs and SLOACs each year or semester, respectively. **Our first PLOAC** is done annually every December because the **annual NCLEX-RN pass rates** are publicized for each college at the end of each year and we use it to assess if students have achieved cognitive success after two years of nursing school. This PLO assessment has triggered the nursing program to reach for even a higher NCLEX-RN pass rate of 100%. The program has been using the HESI exit exams which were grant-funded by the DHS to assess student success on the NCLEX-RN. The grant did not allow the HESI exit exam to be integrated into the curriculum as a grade. As a result, test scores from this test were not accurate because students did not take the test seriously and answered the questions without much thought. Because of this issue and dwindling grants, the program has decided to require all students to purchase the Kaplan Integrated Testing Review. Since students will have invested in this product and tests will be part of their final grade, the students will take the exit exam seriously. The results of the exit exam will guide the student and faculty in determining what areas need extensive review before the NCLEX-RN. The exam may

also be able to determine areas in the curriculum that need more emphasis or teaching by the faculty.

The Kaplan review can also create mid-curricular exams to assess cognitive success in students after the first year of nursing school. Since Kaplan is a new tool being used to assess the cognitive success of students after the first year, **the second PLO, which addresses this, will be assessed every odd year, starting June 2013.** This would ensure that there is enough time and data to see what curricular changes or teaching methodologies are necessary to lead to student success.

c) The nursing program is currently in its planning and implementation phases of the assessment cycle. In the last year we have implemented simulation into the 2nd, 3rd, and 4th semesters and 1st semester this fall. The Kaplan Integrated Testing Review is being integrated this fall 2011. Practicums (skills testing before clinical practice) were finally implemented in all four semesters last year 2010. The BRN is also requiring the program to develop a plan of action for all recommendations they have made from their visit this fall. Some of these recommendations include updating our philosophy and curriculum, integrating more safety education into the program as recommended by the Institute of Medicine (IOM), reorganizing courses, obtaining more full-time faculty and a dedicated program director for nursing, and writing policies. Proposed plan of actions and timelines must be presented to and approved by the BRN's Education and Licensing Committee by January 11, 2012.

2.3 a) Please provide a ***link*** to any program and/or relevant course assessment reports. Does the evidence from assessment reports show that students are achieving the desired learning outcomes?
b) Please briefly summarize any pedagogical or curricular elements of courses and/or programs that have been changed or will be changed as a result of the assessments conducted.

a) Go to the GCC Nursing website (http://www.glendale.edu/index.aspx?page=213), click on "Health Sciences Division," and then the subpage for the SLO and PLO will appear. The document can be downloaded on the page. Both are in PDF format. To obtain the SLOACs go to SLO, and to obtain the PLOACs go to PLO. The assessment reports are password-protected. Some of them are attached to this program review for your convenience.

Evidence from assessment reports of PLOs and SLOs provide evidence that students are achieving desired learning outcomes. For example, the PLO # 1 assessment report provides evidence that the program is achieving the general goal by the high NCLEX-RN pass rates (91.84% in the last year). With the implementation of the Kaplan Integrated Testing Review this semester we hope to see an even better pass rate and attrition rate in the future. SLOACs for NS 211 show evidence that although students passed the clinical portion, they complained that a particular hospital had areas that were not conducive to learning. SLOACs for NS 202, NS 203, and NS 214 (Spring 2011) have shown that simulation and clinical practicums (skills tests before clinical) proved to be more effective in teaching clinical skills and critical thinking in students as evidenced by stronger clinical performance and student satisfaction with the course in general.

b) The results of the assessments have been helpful. The lab/seminar courses NS 201, 202, 203, and 214, have implemented simulation as teaching methodology into their curriculum. Simulation is designed to enhance student learning and experiences for preparation in the clinical areas. Also, practicum has been added into the core medical/surgical classes in each semester for psychomotor skills success and clinical enhancement prior to clinical rotation entry.

The Kaplan/Lippincott Williams and Wilkins Deluxe Integrated Testing (IT) with NCLEX-RN® Review product has recently been added as required course material for each student to purchase to assist in their successful completion of each semester and subsequent preparation for passing the NCLEX-RN. The product features focused review tests that students can practice at home. This is also beneficial to ensure the program's curriculum is in line with the NCLEX-RN blueprint and standards set forth by the BRN in preparation of an entry-level RN. There are integrated proctored exams throughout, case studies in the third semester, and a full NCLEX-RN review when the student is in the 4th and final semester of the program. Through informal surveys, 4th semester instructors noted that 85-90% of students invested in a Kaplan review course (which costs $500 as a stand-alone product) upon graduation. The thought behind integrated testing is to prepare students throughout our curriculum with the costs spread over 2 years. This allows more access to tests, remediation, rationales for each correct answer, content review, study resources, aids and tools, and full technical and educational support 24/7. This system can also provide validated data concerning the strengths and weaknesses of the program.

The BRN is also requiring the program to develop a plan of action for all recommendations made from their visit this fall. See above in answer 2.3 b.

2.4 Please list all courses which have been reviewed in the last academic year.
Note: Curriculum Review is required by the Chancellors Office every 6 years.

The courses reviewed from Fall 2010 to present are: NS 211, NS 202, NS 203, NS 214, NS 216 and PLO # 1.

2.5 Please list all degree/certificate programs within the division that were reviewed in the last academic year.

Nursing –Associate's Degree in Nursing (ADN)

2.6 For each program that was reviewed, please list any changes that were made.

In evaluating each course, the nursing program director assigned to each level's faculty that they analyze their data from the classroom and clinical setting. Through this analysis, each level was to summarize their strengths, weaknesses and a plan of action.

As an example, in Fall 2010, the evaluation of one clinical site prompted the relocation of students for Spring 2011. There were 13 students who responded to the survey about Huntington Memorial Hospital (HMH).

- **Strengths:** 92.3% students felt there were adequate supplies, equipment and helpful, supportive staff who served as good role models. 84.6% of students felt there were an adequate number of clients.
- **Weaknesses:** 15.4% students would not recommend this facility to other students. Some of the narrative comments were that students felt opportunities were very limited.
- **Plan:** The students were mainly on the Acute Rehabilitation and Oncology Medical-Surgical unit. We are considering changing this rotation in the future due to the limited amount of patients.

In Fall 2010, there was some student feedback regarding negative nurse attitudes and limited clinical experiences at the Psychiatric Mental-Health Clinical Rotation for NS 222. This site was changed for Fall 2011 to allow increased student experiences at HMH for the weekend/evening psychiatric nursing rotations.

Overall, the following changes have occurred:

1. Curriculum implementation and integration of Kaplan Integrated Testing Review;
2. Addition of a competency practicum in each Medical-Surgical semester prior to clinical hospital rotations;
3. Change in the LVN-RN bridge course (effective Summer 2011) allowing for the use of simulation as a teaching methodology. This would allow this particular group to be successful in clinical and perhaps, have a decreased attrition rate;
4. Integration of simulation in all the semesters, including first semester this fall;
5. Adjunct faculty employed in the NRL as simulation experts; and
6. Trained staff and faculty regarding simulation scenarios, debriefing conferences, and instruction.

3.0. Reflection and Action Plans

3.1 What recent activities, dialogues, discussions, etc. have occurred to promote student learning or improved program/division processes?

There has been a great amount of dialogue in weekly faculty meetings to prepare for the BRN continuing approval visit, and to work as a team to maintain the program's quality, especially after the sudden departure of the former Associate Dean. The BRN visit was initially scheduled in May 2011 and our department began discussions in Fall 2010 to prepare for this visit. Since the visit was postponed to September 2011, this allowed the faculty more time to review and refine course outlines, content material, syllabi, textbooks and teaching methodologies. This has resulted in increased awareness, teamwork, sharing of information, and empowerment of the faculty regarding the curriculum and course outlines, goals from the BRN and student learning outcomes. In our faculty meetings there is a section for input from students, adjunct/full-time faculty, and staff to allow for program improvement, student success, and retention. There is increased peer tutoring, grant-funded by the Los Angeles County Department of Health Services Tutoring and Mentoring grant. This ensures that students tutor each other and have the opportunity to seek the Nurse Advisor (20% release time for a full-time faculty member). This allows early identification, referrals, and remediation for at-risk students.

3.2 Using the weaknesses, trends and assessment outcomes listed on the previous pages as a basis for your comments, please briefly describe your plans and/or modifications for program/division improvements

Plans or Modifications	**Anticipated Improvements**
Kaplan Integrated Testing Review Curriculum Implementation	Attainment of PLO#1, streamlining of curriculum content to prepare entry-level medical surgical Registered Nurse, continued increased NCLEX-RN annual scores.
Semester Practicum	PLOAC # 2, ensuring early identification of at-risk students, that remediation occurs prior to clinical hospital rotation, and that all students are at the same level skill set.
Simulation	Improved and increased clinical exposure to infrequent experiences, strengthening of skills, debriefing to promote dialogue and learning amount students and faculty
Change in Hospital Clinical Sites	Better student clinical experiences, increased learning and student satisfaction
Required Meeting with BRN Education Licensing Committee January 11, 2012 for follow-up on Re-approval Visit.	Present the Nursing Program's Action Plan for all recommendations and non-compliances reported by the BRN in the final report from the September 19-20, 2011 visit.

Format Rev. 8.31.11

2011 PROGRAM REVIEW

Section 4
IHAC Request

Health Sciences: NURSING ***FT Psychiatric Mental-Health Nursing Instructor (replace)***	**I: HS.Nur-1**

If this is a repeat request, please list the Resource ID code or year requested: _____

4.1 The Office of Instruction will provide data on instructional hires during the past five years, including the full-time percentage of each new hire.

a) Number of full-time faculty currently assigned to the Program	9
b) Number of full-time faculty assigned to the Program in 2005	6
c) Does this position cover classes currently taught by adjuncts? Yes or No	Yes
c) Does this position contribute to program expansion? Yes or No	No

4.2 CPF Index (Committees Per Full-time Faculty)

1. Total number of full-time faculty members in this department/ program.	9
2. Total number of committees in which all FT faculty members in this area participate (Governance and other campus related committees & participation).	10 (SLOs; IHAC; Judicial Board; Flex; C&I; Service Learning/Student Outreach: Guild, Academic Senate; Team A)
3. CPF INDEX (Total of # 2 divided by #1)	1.111

4.3 Status of Released Time Faculty

Faculty Name	Release Time Position	% RT	Term of Assignment
Karen Whalen	Nurse Advisor for at risk students	20%	DHS Grant funded
Kohar Kesian	Assistant Director	40%	2 years
Michelle Ramirez	Assistant Director	40%	2 years

4.4 How does this assignment relate to the college's Mission Statement?

A part of the College's Mission Statement states that Glendale Community College is committed to helping students develop important skills that are critical for success in the modern workplace, as well as create a supportive, non-discriminatory environment which enables students to reach their educational goals. This **psychiatric mental-health nursing**

faculty position would provide the theory and clinical instruction required by curriculum as mandated by the State Board of Registered Nursing (BRN). This rigorous curriculum requires that the students are trained in providing nursing management for the **psychosocial aspects of patients** and their illnesses. The program's philosophy leads students to consider all levels of human needs. This requires an integration of critical thinking, a fundamental knowledge base, information competency, cultural competency, ethical principles, growth and development, health promotion, disease prevention and leadership and management. This program allows for the application of basic skills, prerequisites (such as anatomy, physiology, chemistry, mathematics, English, and microbiology) when learning about disease process and nursing care. Verbal and written communication is practiced through various writing assignments, development of care plans and one-on-one patient interactions at the bedside and through simulation in the nursing resource lab. This position would support, encourage and contribute to a well-rounded nursing professional equipped to provide care in an ever changing healthcare environment and educate nursing students who would be able to earn an Associate's Degree in Nursing (ADN) and transfer to a University or four year college.

4.5 How does this position relate to the objectives and functions of the college?

a) Associate Degree
b) Transfer to a four-year institution
c) Career and Technical Education
d) Basic Skills development
e) Noncredit Adult Education
f) Personal enrichment

This instructor position mainly addresses the a, b, and c objectives of the college. The instructor plays a role that contributes to student completion of our **career and technical education program** wherein they obtain an **Associate degree in Nursing.** Seventy percent of our students are able to find nursing jobs four to eight months after graduation compared to 40-50% for the rest of the state last year. The student can seamlessly transfer **to a four-year institution to obtain a Bachelor's and Master's Degree in Nursing** because the program prepares students in research across the curriculum, APA format, Journal Article Analysis, and writing assignments.

4.6 Describe how this position enhances student success. Ex: enhances instructional skills, meets community or industry needs, contributes to state of the art technical education, etc. What measureable outcome will result from filling this request?

a. Enhances instructional skills
b. Meets community needs
c. Meets industry needs
d. Contributes to state of the art technical education
e. Creates consistency in teaching the course and clinical (and not divided by several adjunct)

Due to the lack of full-time nursing faculty, we have many adjunct faculty that teach theory and clinical. This position would allow continuity of the course with one instructor teaching all components, especially in the area of psychiatric nursing which is required by the BRN. Continuity decreases attrition rates within the courses and increases the NCLEX pass rates, which increase the number of nurses to meet community and hospital need. With the current changes in health care reform, there is an anticipated need for more nurses in the community and industry. This position would help contribute to the development of these nurses. This position would be involved in the integration of innovative technologies (such as simulation in our nursing resource lab) within the curriculum. This teaching modality would enhance student competence by providing exposure to various complex scenarios that may occur in the hospital, but not limited to the physical and biological aspects of the body but to the psychiatric

needs of the individual as well.

4.7 Are there anticipated negative impacts for not hiring this position? If so describe.

The BRN regulations requiring that: "Faculty numbers, including the ratio of full-time to part-time faculty, will be sufficient to safely implement the curriculum". At this time the program has 28 adjuncts and 9 full- time instructors. The Board of Registered Nursing (BRN) made their re-approval visit this September 19 and 20. They noted instructional "inconsistencies among faculty in evaluation and clinical expectations" due to the increased number of adjunct faculty and the high workload by the director and full-time faculty in keeping adjunct oriented and within the instructional and curriculum guidelines. The California Code of Regulation (CCR) Section 1425.1(a) require that the program "Establish consistency among faculty between each course of instruction and when teaching and evaluating students". Lack of consistency because of the high adjunct to full-time ratio can possibly lead to a higher attrition rate in the program and lower National Council Licensure Examination for Registered Nurses (NCLEX-RN) pass rates. The BRN require that nursing programs have an NCLEX-RN pass rate of at least 75% and an attrition rate per graduating class of less than 25%.

In the visit, the BRN also recommended that the college "consider for future budgetary provision, sustaining funding by the college for grant funded programs, particularly the full-time faculty position to ensure student success and retention." Under BRN CCR Section 1424(d), it is written that "the program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment, including technology, to achieve the program's objectives". During our interim BRN interim visit in Spring 2007, our program received a verbal warning regarding the lack of full-time instructors to carry out a consistent and sound program. This instructor position would create more consistency between classes and clinical rotations, especially on the psychiatric setting; decrease barriers to resources and insure that students have access when necessary.

4.8 Are there any other special concerns not previously identified? If so, please explain.

The instructors for all the psychiatric lectures and rotations for the nursing program are adjunct faculty in both the standard and weekend/evening programs. There is a dire need to unify this area of the program for consistency in curriculum and clinical guidelines. It is difficult to insure that policies are adhered to by all. Sometimes students "slip through the cracks" when there is no lead instructor. There is an overwhelming amount of work for full-time faculty and the director to ensure consistency.

APPROVALS

AGENCY	***DECISION***								
The Program Review Committee has reviewed the data, outcomes and plans in the report and finds this request to be:	Well supported								
	Adequately supported								
	Not supported								
	Reason:	Sect.1: Data		Sect.2: SLOs		Sect.3: Plans		Other:	
Standing Committee Review of Resource Request **Committee: Academic Affairs**						Prioritization Score			

Rev. 10.31.11

2011 PROGRAM REVIEW

Health Sciences: NURSING *FT Medical-Surgical Nursing Instructor*	**I: HS.Nur-2**

Section 4
IHAC Request

If this is a repeat request, please list the Resource ID code or year requested: _____

4.1 The Office of Instruction will provide data on instructional hires during the past five years, including the full-time percentage of each new hire.

a) Number of full-time faculty currently assigned to the Program	9
b) Number of full-time faculty assigned to the Program in 2005	6
c) Does this position cover classes currently taught by adjuncts? Yes or No	Yes
c) Does this position contribute to program expansion? Yes or No	No

4.2 CPF Index (Committees Per Full-time Faculty)

1. Total number of full-time faculty members in this department/program.	9
2. Total number of committees in which all FT faculty members in this area participate (Governance and other campus related committees & participation).	10 (SLOs; IHAC; Judicial Board; Flex; C&I; Service Learning/Student Outreach: Guild, Academic Senate; Team A)
3. CPF INDEX (Total of # 2 divided by #1)	1.111

4.3 Status of Released Time Faculty

Faculty Name	Release Time Position	% RT	Term of Assignment
Karen Whalen	Nurse Advisor for at risk students	20%	DHS Grant funded
Kohar Kesian	Assistant Director	40%	2 years
Michelle Ramirez	Assistant Director	40%	2 years

4.4 How does this assignment relate to the college's Mission Statement?

A part of the College's Mission Statement states that Glendale Community College is committed to helping students develop important skills that are critical for success in the modern workplace, as well as create a supportive, non-discriminatory environment which enables students to reach their educational goals. This **Medical/Surgical nursing faculty position** would provide the stable theory and clinical instruction required by the curriculum as mandated by the State Board of Registered Nursing (BRN). This rigorous curriculum requires that the students are trained in providing nursing management for the **physical and**

psychosocial aspects of patients and their illnesses. The program's philosophy leads students to consider all levels of human needs. This requires an integration of critical thinking, a fundamental knowledge base, information competency, cultural competency, ethical principles, growth and development, health promotion, disease prevention and leadership and management. This program allows for the application of basic skills, prerequisites (such as anatomy, physiology, chemistry, mathematics, English, and microbiology) when learning about various disease processes and nursing care. Verbal and written communication is practiced through various writing assignments, development of care plans and one-on-one patient interactions at the bedside and through simulation in the Nursing Resource Lab (NRL). This position would support, encourage and contribute to a well-rounded nursing professional equipped to provide care in an ever-changing healthcare environment and educate nursing students who would be able to earn an Associate's Degree in Nursing (ADN) and transfer to a University or four year college.

4.5 How does this position relate to the objectives and functions of the college?

a) Associate Degree
b) Transfer to a four-year institution
c) Career and Technical Education
d) Basic Skills development
e) Noncredit Adult Education
f) Personal enrichment

This instructor position mainly addresses the a, b, and c objectives of the college. The instructor plays a role that sets the foundation which contributes to student completion of our **career and technical education program** wherein they obtain an **Associate degree in Nursing.** Seventy percent of our students are able to find nursing jobs four to eight months after graduation compared to 40-50% for the rest of the state last year. The student can seamlessly transfer **to a four-year institution to obtain a Bachelor's and Master's Degree in Nursing** because the program prepares students in research across the curriculum, APA format, Journal Article Analysis, and writing assignments.

4.6 Describe how this position enhances student success. Ex: enhances instructional skills, meets community or industry needs, contributes to state of the art technical education, etc. What measureable outcome will result from filling this request?

a) Enhances instructional skills
b) Meets community needs
c) Meets industry needs
d) Contributes to state of the art technical education
e) Creates consistency in teaching the course and clinical (and not divided by several adjunct)

Due to the lack of full-time nursing faculty, we have many adjunct faculty that teach theory and clinical. This position would allow continuity of the course with one instructor teaching all components, especially in the area of medical-surgical nursing which is required by the BRN. Continuity decreases attrition rates within the courses and increases the National Council Licensure Examination for Registered Nurses (NCLEX-RN) pass rates, which results in an increased number of nurses to meet community and hospital need. With the current changes in health care reform, there is an anticipated need for more nurses in the community and industry. This position would help contribute to the development of these nurses.

This position would also be involved in the integration of innovative technologies (such simulation in our NRL) within the curriculum. This teaching modality would enhance student competence by providing exposure to various complex scenarios that may occur in the hospital.

4.7 Are there anticipated negative impacts for not hiring this position? If so describe.

The BRN regulations requiring that: "Faculty numbers, including the ratio of full-time to part-time faculty, will be sufficient to safely implement the curriculum". At this time the program has 28 adjuncts and 9 full- time instructors. In reality, we are operating with 8 full-time faculty when we consider the release time of 3 instructors that is equivalent to 100%. The Board of Registered Nursing (BRN) made their re-approval visit this September 19 and 20. They noted instructional "inconsistencies among faculty in evaluation and clinical expectations" due to the increased number of adjunct faculty and the high workload by the director and full-time faculty in keeping adjunct oriented and within the instructional and curriculum guidelines. The California Code of Regulations (CCR) Section 1425.1(a) require that the program "Establish consistency among faculty between each course of instruction and when teaching and evaluating students". Lack of consistency because of the high adjunct to full-time ratio can possibly lead to a higher attrition rate in the program and lower NCLEX-RN pass rates. The BRN require that nursing programs have an NCLEX-RN pass rate of at least 75% and an attrition rate per graduating class of less than 25%.

During the continuing approval visit, the BRN also recommended that the college "consider for future budgetary provision, sustaining funding by the college for grant funded programs, particularly the full-time faculty position to ensure student success and retention." Under BRN CCR Section 1424(d), it is written that "the program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment, including technology, to achieve the program's objectives". During our interim BRN interim visit in Spring 2007, our program received a verbal warning regarding the lack of full-time instructors to carry out a consistent and sound program. This instructor position would create more consistency between classes and clinical rotations, especially on the psychiatric setting; and decrease barriers to resources and insure that students have access when necessary.

4.8 Are there any other special concerns not previously identified? If so, please explain.

In our weekend/evening program, the first (1st) semester is all taught by adjunct faculty. This makes it difficult to insure that policies are adhered to by all. Sometimes students "slip through the cracks" when there is no lead instructor. There is an overwhelming amount of work for full-time faculty and the director to ensure consistency.

APPROVALS

<table>
<tr><th>AGENCY</th><th colspan="8">DECISION</th></tr>
<tr><td rowspan="4">The Program Review Committee has reviewed the data, outcomes and plans in the report and finds this request to be:</td><td colspan="7">Well supported</td><td></td></tr>
<tr><td colspan="7">Adequately supported</td><td></td></tr>
<tr><td colspan="7">Not supported</td><td></td></tr>
<tr><td>Reason:</td><td>Sect.1: Data</td><td></td><td>Sect.2: SLOs</td><td></td><td>Sect.3: Plans</td><td></td><td colspan="2">Other:</td></tr>
<tr><td colspan="9"></td></tr>
<tr><td colspan="6">Standing Committee Review of Resource Request
Committee: Academic Affairs</td><td colspan="2">Prioritization Score</td><td></td></tr>
</table>

Rev. 10.31.11

2011 PROGRAM REVIEW

Health Sciences: NURSING *FT Advanced Medical-Surgical Nursing Instructor*	**I: HS.Nur-3**

Section 4
IHAC Request

If this is a repeat request, please list the Resource ID code or year requested: _____

4.1 The Office of Instruction will provide data on instructional hires during the past five years, including the full-time percentage of each new hire.

a) Number of full-time faculty currently assigned to the Program	9
b) Number of full-time faculty assigned to the Program in 2005	6
c) Does this position cover classes currently taught by adjuncts? Yes or No	Yes
c) Does this position contribute to program expansion? Yes or No	No

4.2 CPF Index (Committees Per Full-time Faculty)

1. Total number of full-time faculty members in this department/program.	9
2. Total number of committees in which all FT faculty members in this area participate (Governance and other campus related committees & participation).	10 (SLOs; IHAC; Judicial Board; Flex; C&I; Service Learning/Student Outreach: Guild, Academic Senate; Team A)
3. CPF INDEX (Total of # 2 divided by #1)	1.111

4.3 Status of Released Time Faculty

Faculty Name	Release Time Position	% RT	Term of Assignment
Karen Whalen	Nurse Advisor for at risk students	20%	DHS Grant funded
Kohar Kesian	Assistant Director	40%	2 years
Michelle Ramirez	Assistant Director	40%	2 years

4.4 How does this assignment relate to the college's Mission Statement?

A part of the College's Mission Statement states that Glendale Community College is committed to helping students develop important skills that are critical for success in the modern workplace, as well as create a supportive, non-discriminatory environment which enables students to reach their educational goals. This **Advanced Medical-Surgical nursing faculty position** would provide the theory and clinical instruction required by curriculum as mandated by the State Board of Registered Nursing (BRN). This rigorous curriculum requires

that the students are trained in providing nursing management for the **physical and psychosocial aspects of patients** and their illnesses. The program's philosophy leads students to consider all levels of human needs. This requires an integration of critical thinking, a fundamental knowledge base, information competency, cultural competency, ethical principles, growth and development, health promotion, disease prevention and leadership and management. This program allows for the application of basic skills, prerequisites (such as anatomy, physiology, chemistry, mathematics, English, and microbiology) when learning about disease process and nursing care. Verbal and written communication is practiced through various writing assignments, development of care plans and one-on-one patient interactions at the bedside and through simulation in the nursing resource lab. This position would support, encourage and contribute to a well-rounded nursing professional equipped to provide care in an ever changing healthcare environment and educate nursing students who would be able to earn an Associate's Degree in Nursing (ADN) and transfer to a University or four year college.

4.5 How does this position relate to the objectives and functions of the college?

a) Associate Degree
b) Transfer to a four-year institution
c) Career and Technical Education
d) Basic Skills development
e) Noncredit Adult Education
f) Personal enrichment

This instructor position mainly addresses the a, b, and c objectives of the college. The instructor plays a role that contributes to student completion of our **career and technical education program** wherein they obtain an **Associate degree in Nursing.** Seventy percent of our students are able to find nursing jobs four to eight months after graduation compared to 40-50% for the rest of the state last year. The student can seamlessly transfer **to a four-year institution to obtain a Bachelor's and Master's Degree in Nursing** because the program prepares students in research across the curriculum, APA format, Journal Article Analysis, and writing assignments.

4.6 Describe how this position enhances student success. Ex: enhances instructional skills, meets community or industry needs, contributes to state of the art technical education, etc. What measureable outcome will result from filling this request?

a) Enhances instructional skills
b) Meets community needs
c) Meets industry needs
d) Contributes to state of the art technical education
e) Creates consistency in teaching the course and clinical (and not divided by several adjunct)

Due to the lack of full-time nursing faculty, we have many adjunct faculty that teach theory and clinical. This position would allow continuity of the course with one instructor teaching all components, especially in the area of medical-surgical nursing which is required by the BRN. Continuity decreases attrition rates within the courses and increases the NCLEX pass rates, which increase the number of nurses to meet community and hospital need. With the current changes in health care reform, there is an anticipated need for more nurses in the community and industry. This position would help contribute to the development of these nurses.

This position would also be involved in the integration of innovative technologies (such as simulation in our nursing resource lab) within the curriculum. This teaching modality would

enhance student competence by providing exposure to various complex scenarios that may occur in the hospital.

4.7 Are there anticipated negative impacts for not hiring this position? If so describe.

The BRN regulations requiring that: "Faculty numbers, including the ratio of full-time to part-time faculty, will be sufficient to safely implement the curriculum". At this time the program has 28 adjuncts and 9 full- time instructors. The Board of Registered Nursing (BRN) made their re-approval visit this September 19 and 20. They noted instructional "inconsistencies among faculty in evaluation and clinical expectations" due to the increased number of adjunct faculty and the high workload by the director and full-time faculty in keeping adjunct oriented and within the instructional and curriculum guidelines. The California Code of Regulation (CCR) Section 1425.1(a) require that the program "Establish consistency among faculty between each course of instruction and when teaching and evaluating students". Lack of consistency because of the high adjunct to full-time ratio can possibly lead to a higher attrition rate in the program and lower National Council Licensure Examination for Registered Nurses (NCLEX-RN) pass rates. The BRN require that nursing programs have an NCLEX-RN pass rate of at least 75% and an attrition rate per graduating class of less than 25%.

In the visit, the BRN also recommended that the college "consider for future budgetary provision, sustaining funding by the college for grant funded programs, particularly the full-time faculty position to ensure student success and retention." Under BRN CCR Section 1424(d), it is written that "the program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment, including technology, to achieve the program's objectives". During our interim BRN interim visit in Spring 2007, our program received a verbal warning regarding the lack of full-time instructors to carry out a consistent and sound program. This instructor position would create more consistency between classes and clinical rotations, especially in the medical- surgical setting; decrease barriers to resources and insure that students have access when necessary.

4.8 Are there any other special concerns not previously identified? If so, please explain.

In our weekend/evening program, the third (3rd) semester is all taught by seven (7) adjunct faculty. This makes it difficult to insure that policies are adhered to by all. Sometimes students "slip through the cracks" when there is no lead instructor. There is an overwhelming amount of work for full-time faculty and the director to ensure consistency.

APPROVALS

AGENCY	***DECISION***								
The Program Review Committee has reviewed the data, outcomes and plans in the report and finds this request to be:	Well supported								
	Adequately supported								
	Not supported								
	Reason:	Sect.1: Data		Sect.2: SLOs		Sect.3: Plans		Other:	
Standing Committee Review of Resource Request **Committee: Academic Affairs**						Prioritization Score			

Rev. 10.31.11

2011 PROGRAM REVIEW

HEALTH SCIENCE: Nursing *Multi Simulator Maintenance*	I:HS.Nur- 4

Section 4
Resource Request

Type of Request: ___ Facilities/Maintenance ___ Classroom Upgrades ___ New space
_X__ Instructional Equip. ___ Non-Instructional Equip __X_ Conference/Travel __x_ Training
___ Computer/Hdware ___ Software/Licenses ___ Supplies _X_ Other

Mandatory: Is this request for one-time funding? ___ OR Does this request require ongoing funding?_X__

If this is a repeat request, please list the Resource ID code or year requested: _____2010_____

Mark if the following apply to this request: ___ Health & Safety Issue ___ Legal Mandate
___ Accreditation Requirement _x__ Contractual Requirement

4.1. Clearly describe the resource request.

Simulator Maintenance to include:
Yearly maintenance and upgrading of high fidelity manikins is essentially insurance for each high fidelity simulator. In the last 3-7 years we have purchased 4 high-fidelity manikins: Sim Man, METI-Man, iStan, and birthing mother Noelle all with grant money. This request is only for all of the following:

Amount requested $ _____14,772____

Breakdown of cost (if applicable):
Single Year iStan Extended System Warranty - $ 6300.00 (expiring 3/20/2013)
Single Year ECS Extended System Warranty - $4872.00 (expiring 12/712)
Simulation Training by John Cordova - $75/hr x 8 hrs (average per semester) = $600
iStan Basic Onsite Education Course for faculty updates $2000
Annual maintenance of other lab equipment and computers, and programs that go with simulation; and repair or maintenance of birthing mother Noelle-$1000

4.2. Justification and Rationale: What planning goal, core competency or course/program SLO does this request address? Use data from your report to support your request.

This position would address the overall nursing program PLOs and institutional SLOs:
PLO #1: Students will be able to demonstrate the cognitive skills necessary to integrate the nursing concepts learned in a two year ADN program,: 75% of graduates passing NCLEX successfully
PLO # 3: To demonstrate the psychomotor skills necessary to integrate the nursing concepts learned in a two-year ADN program: Pass clinical competencies; Simulation would enhance clinical competency and skills Institutional Core competencies in students that address this request would be:
1) Communication skills: with the practice of listening, speaking, and debating with others in a simulated hospital environment;
2) Critical Thinking skills: in evaluating, analyzing, interpreting, and problem solving in a simulated hospital emergency or problem;
5.) Global Awareness and Appreciation Skills: regarding scientific complexities of humans and disease; social and cultural diversity, and ethical reasoning in a simulated hospital event; and
7.) Application of Knowledge in computer, technical, and workplace skills.

Strategic Goal 3: Instructional Programs and Student Services
4 Streamline the movement through curriculum & 3.5 Promote innovative Learning for 21st Century Students and Faculty

4.3. What measurable outcome will result from filling this resource request?

Simulation enhances student learning by reinforcing the theory content learned in a clinical setting. Simulation also helps students experience situations that may never arise during their clinical rotations. With this enrichment, we hope to upkeep our NCLEX pass rate at 75% or better as well as keep our attrition rate <25% per BRN requirement. Simulation will also strengthen clinical skills and critical thinking skills that a entry-level registered nurse is required to have.

There are also several other reasons why our nursing students benefit from simulation in the lab:
1) They can learn from mistakes without repercussions;
2) They learn to critically think on their feet and better answer NCLEX-RN and exam questions because of more experience;
3) They learn empathy and compassion for patients and their families and friends;
4) They are allowed to practice in a safe and confidential environment;
5) Simulation allows them to think quickly and learn to work with other health care providers and peers;
6) Simulation allows them to debrief by rethinking, and describing their feelings after the scenario; This evoking of emotions is critical in retention of concepts.
7) Simulation makes a more competent and confident nurse of the future.

APPROVALS

AGENCY	***DECISION***								
The Program Review Committee has reviewed the data, outcomes and plans in the report and finds this request to be:	Well supported								**X**
	Adequately supported								
	Not supported								
	Reason:	Sect.1: Data		Sect.2: SLOs		Sect.3: Plans		Other:	
Standing Committee Review of Resource Request **Committee: Academic Affairs**						Prioritization Score			

Rev. 10.31.11

2011 PROGRAM REVIEW

HEALTH SCIENCE: Nursing
QSEN Training for Faculty

I:HS.Nur- 5

Section 4
Resource Request

Type of Request: ___ Facilities/Maintenance ___ Classroom Upgrades ___ New space
___ Instructional Equip. ___ Non-Instructional Equip __X Conference/Travel _X__ Training
___ Computer/Hdware ___ Software/Licenses ___ Supplies ___ Other

Mandatory: Is this request for one-time funding? _X__ OR Does this request require ongoing funding?___

If this is a repeat request, please list the Resource ID code or year requested: _____

Mark if the following apply to this request: ___ Health & Safety Issue ___ Legal Mandate
__X_ Accreditation Requirement ___ Contractual Requirement

4.1. Clearly describe the resource request.

QSEN (Quality Safety Education in Nursing) Training for Faculty. The Board of Registered Nursing final report from our re-approval visit September 19-20, 2011 stated that "some students reported that not all faculty members are using the standards of instruction established by the program….Students expressed concerns regarding the level of inconsistency among faculty in evaluation and clinical expectations".

The BRN **Recommendation from California Code Regulation Section 1425.1(a)** stated that the nursing program needs to "**Establish consistency among faculty between each course of instruction and when teaching and evaluating students in the skills lab, simulation center, and clinical settings."** In order to achieve this recommendation we are required to "comb" through our curriculum to update and incorporate "Quality Safety in Education of Nurses" (QSEN) concepts. Resources will be needed to send faculty to QSEN conferences to assist in helping incorporate required concepts into the nursing curriculum.

The 2012 Quality and Safety Education for Nurses (QSEN) National Forum will take place in Tucson, Arizona from 1pm on May 30 – 12pm on June 1, 2012.

Due to generous grant support from the Robert Wood Johnson Foundation (RWJF), registration fees for the conference are discounted at $150. Registration for the conference will begin in January 2012.
Amount requested $ 4,000.00

Breakdown of cost:
Registration for 4 instructors : 4 x $ 150 =$ 600

Lodging in Tucson, Arizona 85718 $164/night for 3 nights for two instructors= $492 Plan to send 4 instructors: Total = $984

Food $65 x 3 days = $ 195 food /person 4 x $ 195 = $780

Flights to Tuscon American Airlines or US Airways: $300 x 4 = $1200 and miscellaneous transportation.

4.2. Justification and Rationale: What planning goal, core competency or course/program SLO does this request address? Use data from your report to support your request.

Institutional core competencies in students that address the request of the implementation of QSEN into the curriculum include:

1) Critical Thinking: evaluation, interpretation; analysis of data and problem solving to assist in making safe and sound nursing decisions about patient care
2) Personal Responsibility: of the student in self-management, self-awareness and in the understanding of consequences, both positive and negative, and of their own actions
3) Application of Knowledge: in safe technical and workplace skills

This resource also addresses:
PLO #1: Students will be able to demonstrate the cognitive skills necessary to integrate the nursing concepts learned in a two year ADN program. QSEN is interwoven throughout the curriculum and is a new and innovative way of teaching safety to our students. It is an important concept highly recommended by the BRN to interweave into out curriculum and most likely will be on the National Council Examination for Registered Nurses.

PLO #3: Students will be able to demonstrate the psychomotor skills necessary to integrate the nursing concepts learned in a two year ADN program. It is important to incorporate safety skills into every aspect of the curriculum and would increase student success in the hospital clinical setting.

Strategic Goal 3: Instructional Programs and Student Services
4 Streamline the movement through curriculum
3.5 Promote innovative Learning for 21st Century Students and Faculty

4.3. What measurable outcome will result from filling this resource request?

With formal training, faculty and staff will be better equipped to manage the implementation of QSEN into the nursing curriculum as recommended by the BRN. These funds can help our faculty and staff provide consistency in content (theory and clinical) of the latest up-to-date information on safety and technology.

APPROVALS

AGENCY	***DECISION***								
The Program Review Committee has reviewed the data, outcomes and plans in the report and finds this request to be:	Well supported								
	Adequately supported								**X**
	Not supported								
	Reason:	Sect.1: Data		Sect.2: SLOs		Sect.3: Plans		Other:	
Standing Committee Review of Resource Request **Committee: Academic Affairs**						Prioritization Score			

2011 PROGRAM REVIEW

Section 4
Resource Request

HEALTH SCIENCE: Nursing *EMR Simulator Annual Subscription*	I:HS.Nur- 6

Type of Request: __X_ Facilities/Maintenance ___ Classroom Upgrades ___ New space
_X_ Instructional Equip. ___ Non-Instructional Equip ___ Conference/Travel ___ Training
__X_ Computer/Hdware __X_ Software/Licenses ___ Supplies ___ Other

Mandatory: Is this request for one-time funding? ___ OR Does this request require ongoing funding? __X_

If this is a repeat request, please list the Resource ID code or year requested: _____

Mark if the following apply to this request: ___ Health & Safety Issue ___ Legal Mandate
___ Accreditation Requirement __X_ Contractual Requirement

4.1. Clearly describe the resource request.

We have purchased access to a web-based electronic medical record (EMR) simulator. This EMR is a called the Student Learning System (SLS) from El Sevier. It is to help our students learn computer charting which is used in almost all the hospitals where our students do clinical.

SLS annual subscription - $1000 (expiring 4/1/2012)
Maintenance of other lab equipment and computers, and programs that go with simulation: $1000.

Amount requested $2,000

4.2. Justification and Rationale: What planning goal, core competency or course/program SLO does this request address? Use data from your report to support your request.

The nursing program must keep up with the ever changing technology in the hospitals. Because of the mandated use of electronic medical records (EMRs) in our contracted facilities, it has been a challenge to obtain computer access for our students mainly because of the Health Insurance Probability and Accountability Act (HIPAA) that protect patient privacy and the bureaucracy in getting hospital approval for computer access for only a minimal amount of time. As a result, the nursing program purchased the web-based SLS so students could practice using the computer with instructor guidance while in lecture or seminar. The SLS has case studies about different kinds of patients that students can read about and use as care plans/reports as they do with real patients in the hospitals. The students are also able to document in the medical record while looking up relevant medical and surgical history and patient medications, and lab and diagnostic results as they do in real life. Currently, the SLS is being paid for by the CCCCO grants; however, these grants are decreasing each year.

This request addresses the SLOAC from NS 216 Intermediate Clinical in our curriculum;

1. **NS 216 SLOAC (February 2011) : The student will be able to demonstrate a satisfactory level of growth and a proficiency in clinical competencies and realistically evaluate individual areas of strength and weakness which impact the emerging level of individual nursing practice**. This course is a required intersession clinical rotation for students entering their final semester in the fall or spring. In the past, this course has proven to be very helpful in tying in third semester concepts and clinical skill s with that of 4th semester required competencies. However, although about 99% of the students pass this course, there were many complaints about computer access on the clinical surveys this past winter and summer intersessions.

2. **PLO # 3 to demonstrate the psychomotor skills necessary to integrate the nursing concepts learned in a two year ADN program:** Pass clinical competencies; Simulation case studies and EMRs would enhance clinical competency and skills

Institutional Core competencies in students that address this request include the following:
1) Communication skills: Students learn to practice writing as in charting nurses' notes and reading a chart in a simulated hospital environment.
2) Critical Thinking skills: Students are learning evaluating, analyzing, interpreting, and problem solving for a simulated patient case
3) Information Competency: Student learns how to locate and retrieve information in the EMR; and also learn to evaluate the information and determine legal and ethical use of the information.
4) Application of Knowledge in computer and technical skills.

Strategic Goal 3: Instructional Programs and Student Services
4 Streamline the movement through curriculum
3.5 Promote innovative Learning for 21st Century Students andFaculty

4.3. What measurable outcome will result from filling this resource request?

Simulation enhances student learning by reinforcing the theory portion they have learned in a clinical setting. Simulation also helps students experience situations that may never arise during their clinical rotations. With this enrichment, we hope to upkeep our NCLEX pass rate at 75% or better as well as keep our attrition rate <25% per BRN requirement. It will also strengthen clinical skills and critical thinking skills that a entry-level registered nurse is required to have.

There are also several other reasons why our nursing students benefit from simulation in the lab.

1) Students can learn from mistakes without repercussions
2) They learn to critically think on their feet and better answer NCLEX and exam questions with more experience.
3) They learn empathy and compassion for patients and their families and friends.
4) Students are Allowed to practice in a safe and confidential environment
5) Allows them to think quickly and learn to work with other health care providers and peers
6) It Allows them to debrief by rethinking, and describing their feelings after the simulation experience
7) Simulation makes a more competent and confident nurse of the future.

APPROVALS

AGENCY	***DECISION***								
The Program Review Committee has reviewed the data, outcomes and plans in the report and finds this request to be:	Well supported								**X**
	Adequately supported								
	Not supported								
	Reason:	Sect.1: Data		Sect.2: SLOs		Sect.3: Plans		Other:	
Standing Committee Review of Resource Request **Committee: Academic Affairs**						Prioritization Score			

Rev. 10.31.11

2011 PROGRAM REVIEW

Section 4
Resource Request

HEALTH SCIENCES: Nursing *Contractual Stationary Supplies*	I:HS.Nur-7

Type of Request:
___ Facilities/Maintenance ___ Classroom Upgrades ___ New space
___ Instructional Equip. ___ Non-Instructional Equip ___ Conference/Travel ___ Training
___ Computer/Hdware ___ Software/Licenses __X_ Supplies __X_ Other

Mandatory: Is this request for one-time funding? ___ OR Does this request require ongoing funding?_X_

If this is a repeat request, please list the Resource ID code or year requested: _____

Mark if the following apply to this request: ___ Health & Safety Issue ___ Legal Mandate
___ Accreditation Requirement _X_ Contractual Requirement

4.1. Clearly describe the resource request.

This resource request is for the request for stationery and office supply funding required by the contractual agreement between the College Foundation and Mr. Bhupesh Parikh and family. After the college received a very generous amount of $1,000, 0000 to help pay for part of the building of the Bhupesh Parikh Health and Technology building, it was agreed in a contract that the Health Sciences Division/Nursing program supply stationery with the Kumud Parikh Health Sciences Division Logo to use in all its correspondences. The previous nursing director had stationary made when the building opened; however this supply has been depleted. Mr. Parikh has been very generous in his support of the building and the health sciences, but brought it to our attention via the Foundation that the stationary is a contractual agreement.

Amount requested $ 1,400

Breakdown of cost:

Stationery 24# Laser bond Letterhead 7,500 = $460.00 Standard Envelope 7,500= $510.00 $12.50 for Postage and Delivery $4.50 Fuel charge $86.36 SalesTax

Color Printer/Toner, Laser Jet CP1518NI $74.00 Black, $69 Yellow, $69 Magenta

Toner for HP12A $64 each x 5 = $320

4.2. Justification and Rationale: What planning goal, core competency or course/program SLO does this request address? Use data from your report to support your request.

This resource request is for the request for stationery funding required by the contractual agreement by the GCC Foundation and Mr. Bhupesh Parikh and family. The nursing department mails several letters to applicants and students throughout the year for admission and remediation processing into the nursing program Mr. Parikh has been very generous in his support of the building and the health sciences and will continue to do so in the future.

Strategic Goal 4: Fiscal Stability and Diversification (Enrollment Management)
Diversify revenue sources

4.3. What measurable outcome will result from filling this resource request?

The outcome of this request would increase public relations with the community; increase advertisements of the college; increase our resources; and fulfill the contract agreement with the Parikh family.

APPROVALS

AGENCY	***DECISION***								
The Program Review Committee has reviewed the data, outcomes and plans in the report and finds this request to be:	Well supported								**X**
	Adequately supported								
	Not supported								
	Reason:	Sect.1: Data		Sect.2: SLOs		Sect.3: Plans		Other:	
Standing Committee Review of Resource Request **Committee: Academic Affairs**					Prioritization Score				

Rev. 10.31.11

2011 PROGRAM REVIEW

Section 4
Resource Request

HEALTH SCIENCES: Nursing *FT Nursing Program Director*	I:HS.Nur-8

Type of Request:
___ Facilities/Maintenance ___ Classroom Upgrades ___ New space
___ Instructional Equip. ___ Non-Instructional Equip ___ Conference/Travel ___ Training
___ Computer/Hdware ___ Software/Licenses ___ Supplies __X_ Other

Mandatory: Is this request for one-time funding? ___ OR Does this request require ongoing funding?__X_
If this is a repeat request, please list the Resource ID code or year requested: _____

Mark if the following apply to this request: __ Health & Safety Issue _X_ Legal Mandate
_X_ Accreditation Requirement ___ Contractual Requirement

4.1. Clearly describe the resource request.

There is a desperate need for a dedicated full-time nursing program director for nursing per BRN recommendations. Currently, the Associate Dean is responsible for three programs including: Emergency Medical Technician, Alcohol/Drug Studies and Nursing. In addition to overseeing these programs, the Associate Dean serves as the Health Sciences Division Chair and Nursing Program Director with a workload that includes maintaining compliance with the BRN, ADST, and EMT regulations; college policies; Guild agreements, and hospital and facility regulations. Her duties also include supervising, hiring and orienting several adjunct faculty members, program evaluations, updating the curriculum, dealing with student and faculty issues, scheduling clinical rotations and classes, managing grants, writing evaluations, checking payroll hours, managing curriculum, tending to college issues and meetings, as well as other duties assigned.

The Board of Registered Nursing (BRN) requires that "the director and the assistant director (s) shall dedicate sufficient time for the administration of the program" under the California Code of Regulations (CCR) 1424 (e). Although the current Associate Dean of Health Sciences has 100% release time, only 30% is dedicated to the administration of the Nursing Department. Two Assistant Directors have 40% release time. However, because of the complexities and workload alone as a nursing director, the BRN has strongly recommended that a program director dedicated to nursing alone is needed.

Amount requested _tbd by Budget Committee

4.2. Justification and Rationale: What planning goal, core competency or course/program SLO does this request address? Use data from your report to support your request.

The nursing director position would help meet and address all core competencies of the college (Institutional Learning Outcomes). The Nursing program director is responsible for educating pre-licensure nursing students so that community needs are met. The director must be an excellent decision maker, problem solver, and possess strong interpersonal skills, for teamwork is a necessary part of the job as well as public relations and networking with hospitals and the community. Areas that a director is responsible for are:

Curriculum: The director oversees the implementation of the state-required nursing curriculum and must ensure that the curriculum meets the standards the state sets, as well as the benchmarks that the United States government has established. The director must conduct an annual program evaluation required by the BRN and college as a quality improvement

assessment to improve the curriculum and overall program. One must be familiar with the policies of the college, and design and enforce the academic curriculum accordingly. This involves overseeing that teaching occurs in:

1. **Communication skills,** such as in reading, writing, listening, speaking and interpersonal interactions with patients and other health care providers.
2. **Mathematical Reasoning** such as in safely calculating dosages of drugs.
3. **Information Competency.** Students learn to obtain appropriate data and resources and be able to evaluate this information for reliability, and accuracy, and use it in an ethical and legal matter.
4. **Critical Thinking.** Students learn to evaluate the significance of information; effectively interpret, analyze, synthesize, explain, and infer concepts and ideas, as well as problem solve and make decisions.
5. **Application of Knowledge.** The skills involved are computer and technical, skills. Life-long learning is also encouraged so that students can transfer their skills to the workplace and to higher education

Policy Development: The director is also responsible for the implementation and development of policies for students and faculty within the nursing department. Nursing program policies that are required by the BRN along with college regulations address qualifications of teachers that are hired, and the students that are admitted. Policies concerning grades and student issues must also be addressed. The director must know how the college handles incompletes, academic dishonesty, such as cheating or plagiarism, and unsatisfactory grades or performance and incorporate them into the program's nursing requirements and regulations. The director must also work closely with hospitals and nursing facilities regarding securing clinical rotations for the students. A contract to communicate clear expectations between the college and the facility is also required. By setting rules and regulations by the director and nursing faculty, students are better able to develop:

6. **Global Awareness and Appreciation by** encouraging ethical reasoning.
7. **Personal Responsibility by** encouraging self-management, self-awareness, and study skills.

Faculty Training: Other responsibilities include teaching the teachers. Initial and ongoing professional development for nursing faculty members is a must as well as orienting new staff and faculty. .

Budgeting: The scope of the director's responsibility includes developing or approving a budget for the year. One must determine daily expenses of operating the nursing school, which including payroll, textbooks, instructional and lab supplies, hiring employees, and maintaining medical equipment and technology.

The nursing director position would help implement the overall nursing program PLOs:
PLO #1: Students will be able to demonstrate the cognitive skills necessary to integrate the nursing concepts learned in a two year ADN program,: 75% of graduates passing NCLEX successfully
PLO # 3 to demonstrate the psychomotor skills necessary to integrate the nursing concepts learned in a two year ADN program: Pass clinical competencies
The director would need to assure that the NCLEX –RN pass rates are >75% and the attrition rates are <25% and develop strategies to maintain or improve the rates.

4.3. What measurable outcome will result from filling this resource request?

The nursing program director position will lead to a:

- Higher or maintained annual NCLEX-RN pass rate (currently 91% since June 2011). The BRN requires a 75% or better rate.
- Decreased or maintained attrition rate <25% (required by the BRN)
- Higher student success rate to better serve the community
- An organized, strong and up to date nursing curriculum and program that leads to student success
- High quality reputation in the community to increase employment opportunities for our students

APPROVALS

AGENCY	***DECISION***								
The Program Review Committee has reviewed the data, outcomes and plans in the report and finds this request to be: *Personnel - Not Applicable*	Well supported								
	Adequately supported								
	Not supported								
	Reason:	Sect.1: Data		Sect.2: SLOs		Sect.3: Plans		Other:	
Standing Committee Review of Resource Request **Committee: Cabinet**						Prioritization Score			

Rev. 10.31.11