# Nurse Assistant & HHA Training Program Review

Evergreen Valley College

Spring 2014

## Mission Statement for the College

With equity, opportunity and social justice as our guiding principles, Evergreen Valley College's mission is to empower and prepare students from diverse backgrounds to succeed academically, and to be civically responsible global citizens.

**Department/Program Name:** Nurse Assistant/Home Health Aide (CNA/HHA) Training Program (Nurs109)

**Last Review:** Spring 2012

**Current Year:** 2013-2014

**Area Dean:** Antoinette Navalta Herrera, EdD, MSN, RN- Dean of Nursing and Allied Health

## Program Description

### Brief Summary

The Nurse Assistant/Home Health Aide (CNA/HHA) Training Program (NURS109) was developed in order to provide interested students with a foundation of basic nursing care.  The course was officially approved by the California Department of Public Health (CDPH) on January 19, 2010. On July 14, 2011, the CDPH officially approved of the HHA component of the program, which was first implemented during the spring 2013 semester.  The HHA component gives students additional training in caring for residents/clients in Assisted Living centers or in the home setting.

According to the United States Department of Labor, Bureau of Labor Statistics, the job outlook for CNAs  is expected to increase by 20%, or faster than average, by  2020 (http://www.bls.gov/ooh/healthcare/nursing-assistants.htm) .  In addition, the job outlook for HHAs for the same time frame is expected to increase by an even higher percentage of 70% (http://www.bls.gov/ooh/healthcare/home-health-and-personal-care-aides.htm).

Upon successful completion of the 7 unit course, students are qualified to take the California State Certification Exam to become Certified Nursing Assistants (CNAs).  CNAs are eligible for employment in Skilled Nursing Facilities, Acute Care Hospitals, as well as in the home setting through Home Health Care Agencies.   However, the State Certification is a regulatory requirement only for nursing assistants that want to work in the long-term care setting. Students can receive training within skilled nursing facilities.  With an increasing aging population, CNAs are needed more than ever in the skilled nursing facilities.

Requirements for the EVC course are: High School Diploma or GED, valid social security number, Physical Health Exam clearance, TB exam clearance, current CPR for Healthcare Provider, and Background Clearance. The course is open to all students with the aforementioned requirements and is based on open enrollment. The course is offered in the spring or fall semesters and can accommodate 30 (2 clinical sections with 15 students per section) students per semester. During the fall 2011 semester, a 3<sup>rd</sup> clinical section was added as a pilot to accommodate the many waitlisted students.

Those who successfully complete the training program and pass the state certification exam can work as CNAs or HHAs and/or further their education in nursing.

### *Program Effectiveness*

Students must successfully complete the course with a "C" or better in order to take the State Certification Exam. For varying reasons, some students who successfully pass the course opt not to take the exam (usually these students do not plan to work as CNAs, but take the course while waiting to get into a nursing program, or just to see whether the healthcare field is an area that they would like to pursue). Program effectiveness could be measured by the percentage of students who pass the state certification exam and/or who successfully gain employment after course completion.

The course includes skills lab practice at the school and the performance of basic nursing skills in the clinical setting under the supervision of a Registered Nurse. The CDPH approved curriculum for the Nurse Assistant program consists of 61 lecture hours and 100 clinical hours; the CDPH approved curriculum for the Home Health Aide program consists of an additional 40 hours of training (20 hours lecture, 20 hours clinical). A portion of the clinical hours (an average of 3 to 4) takes place in the skills lab setting at EVC prior to the actual start of training in the long-term care setting. In addition, extra skills lab practice is encouraged, although voluntary. Successful completion of course SLOs promotes safe and competent basic nursing care.

### *Results of Measures*

The course pass rates are as follows (i.e., "C" grade or better):

- Fall 2011: 26/28 or 93%
- Spring 2012: 29/30 or 97%
- Fall 2012: 26/27 or 96%
- Spring 2013: 26/27 or 96%

The pass rates for the California State Certification Exam are as follows:

- Fall 2011:  written:  100% or 29/29; skills:  96.6% or 28/29 (overall =98.3%)
- Spring 2012: written:  100% or 20/20; skills:  65% or 13/20 (overall =82.5%)
- Fall 2012:  written:  100% or 22/22; skills:  100% or 22/22 (overall = 100%)
- Spring 2013:  written:  100% or 23/23; skills:  91% or 21/23 (overall=95.5%)

The California Department of Public Health (CDPH) currently takes the average of the written and skills pass rates in order to determine pass rates.  Thus, our overall pass rate for the past 4 semesters is 94% these results show that the program is doing considerably well.  The lower pass rates during the Spring 2012 semester are directly related to testing procedures conducted by the American Red Cross; per Cynthia Harrison, the Director of Mission College's HWI, the American Red Cross was investigated by the CDPH due numerous (over 100) complaints issued by students from various schools throughout Northern CA regarding inconsistent testing practices.

Three years from now, the goal will be that the results will remain at or above 90%, with students successfully finding jobs upon completion of the course and passing the state exam.  At least 19 students who have completed the course since the last Program Review have gained employment in the healthcare field:  3 students from fall 2011, 3 students from spring 2012, 4 students from fall 2012, and 9 students from spring 2013.  It is difficult to obtain accurate data for employment rates, as it is voluntary for students to furnish such information upon course completion.  The program director will work with Dean Herrera and Adrienne Burns to develop an employment survey via Survey Monkey.  In addition at least 23 other students are currently enrolled in an RN or LVN program (6 students from fall 2011, 7 from spring 2012, 3 students from fall 2012, and 7 from spring 2013).

## PART A:  Overview of the Program

The CNA/HHA Program is within EVC's Department of Nursing and Allied Health; our current CTAs are outlined below.  The Program helps the college fulfill its Mission by preparing interested students to embark in an entry-level healthcare profession that allows them to provide  compassionate care to the infirm (especially to the fragile elderly), therefore helping serve humanity as responsible citizens.

<u>**Department of Nursing and Allied Health CTA's**</u>
  i. *Community Engagement*
     1. *Build an awareness of campus programs, both internal and external; communicate and network*

        a.   *During the course of a program, students will participate in a minimum of one community event*

        b.   *At least one faculty member will participate as club advisor and support one campus clubs*

2.   *Seek articulation with local high schools on all levels of courses*

        a.   *One division faculty member will participate in a community collaborative partnership*

  ii.  ***Organizational Transformation***

1.   *Increase online and hybrid course and program offerings*

        a.   *Develop one new online course, within the division*

        b.   *90% of the courses, in the division, will use the college's course management system*

2.   *Increase persistence, retention and success rate for all courses*

        a.   *The nursing faculty will identify two variables that can be changed in order to increase student success in the nursing program and on the NCLEX*

        b.   *The nursing program will offer a minimum of one TEAS workshop this academic year*

3.   *Review, strengthen and implement emergency preparedness/response procedures*

        a.   *At least one faculty member will represent the division on the Emergency Preparedness Committee*

4.   *Provide training and support for employees to effectively offer online and hybrid courses and student support services*

        a.   *>30% of the faculty will have opportunities for faculty development through grant funds*

5.   *Strengthen and implement accountability, compliance structures, and transparency in the budget process, including stable leadership over finances*

        a.   *Dean will include an update on the campus budget, as well as any grant funds, at 100% of the division meetings*

        b.   *Division members will research and apply for, at least, one grant to help improve a program or course*

  iii.  ***Student Centered***

1.   *Reassess and develop a balanced scheduling of course offerings to better meet the needs of students, including additional CTE offerings.  Increase the number of course offerings on Fridays and Saturdays.*

        a.   *FCS will offer a minimum of one class on Fridays*

           b. *Division will offer a minimum of one class on an alternate schedule*

  2. *Expand the number and type of course offerings and student services available via alternative instructional delivery systems including online and hybrid courses.*

           a. *Develop one new online course, within the division*

           b. *Annually maintain and update Nursing and CNA websites on the EVC webpage*

           c. *90% of division courses will offer course materials on the campus course management program*

           d. *Tutoring services will be posted on >90% of division course management sites*

### *Community Partnerships*

Through the Program, EVC has developed partnerships with the following:

- Lincoln Glen Nursing Facility (San Jose)- students have their clinical rotation at this facility
- The California Department of Public Health- the Program maintains its regulatory approval through the CDPH
- Mission College Health Workforce Initiative (Santa Clara) - testing for the Certification Exam is processed through this regional testing center
- American River College (Sacramento)- Program faculty currently maintains contact with American River College's CNA Program faculty
- All Care Plus (Palo Alto)- agency through which live scanning of students is completed
- Arthur N. Rupe Foundation (Santa Barbara) Program faculty is in the process of securing a grant through this foundation, which will provide funds for program enhancement/improvement
- Nurse Education Workshops (San Jose)- Agency which provides CPR training for the students

### *Accomplishments*

Four recent accomplishments for the program:

- Achievement of a 100% in written & skills pass rate (Fall 2012)
- Achievement of a 100% retention rate (Fall 2012)
- Implementation of the Home Health Program (Spring 2013)
- An increase in the number of students employed as CNAs by 55% (from 4 students in Fall 2012 to 9 students in Spring 2013)

### Program Goal/Focus

The goal of the Program is to allow students who complete the course to gain entry-level knowledge and employment in the health care (nursing) field. Because the Program is only one semester long and State testing is completed shortly after course completion, students could potentially become employed within 4-5 months upon enrolling in the course. This provides opportunities for those who (because of family commitments or lack of financial resources or time, etc.) are not able to attend college for a longer period. The course is also an option for students waiting to get into the nursing program. Students who have completed the course prior to commencement of the nursing program have indicated they felt much more prepared and confident when they began the nursing program.

One goal is to secure a grant from the Arthur N. Rupe foundation; funds may be used to purchase better equipment in the skills lab; offer scholarships for students who demonstrate need; etc.

### Student Demographics

Currently, student demographics for NURS109 are incorporated into data for the nursing discipline. The program faculty has devised a general demographics survey to utilize at the beginning of each semester as of Fall 2011 in order to obtain demographical data (in the event that EVC's Research Department is unable to separate course data from the nursing discipline). Data for students' gender and age was obtained from the students' initial CNA application form (form CDPH283B). Headcount is defined as number of students in the class at the time of census; retention is defined as number of students who persisted in the course after the census date; and success is defined as the number of student who also succeeded (grade "C" or better).

**GENDER**

|  | Fall 2011 | Spring 2012 | Fall 2012 | Spring 2013 |
|---|---|---|---|---|
| Female | 33/37= 89% (100% retention; 97% success) | 28/30= 83% (26/28 or 93% retention, 25/28 or 89% success | 25/28= 89% (100% retention; 96% success) | 21/25= 84% (19/21 or 90% retention; 86% success) |
| Male | 4/37= 11% (1 dropped- 75% retention & success) | 2/30= 6.7% (100% retention/ success) | 3/28= 11% (2/3 or 67% retention; 67% success) | 4/25= 16% (100% retention & success) |

**ETHNICITY- Fall 2011 (37 students)**

|  | Headcount | Retention | Success |
|---|---|---|---|
| African American | 1= 2.7% | 0 | 0 |
| Asian (all other) | 1= 2.7% | 1= 100% | 1=100% |
| Asian/Cambodian | 3= 8% | 3= 100% | 3=100% |
| Asian/Chinese | 0 | n/a | n/a |
| Asian Indian | 1= 2.7% | 1= 100% | 1=100% |
| Asian/Vietnamese | 15= 41% | 14= 93% | 13= 87% |
| Filipino | 2= 5% | 2= 100% | 2= 100% |
| Latino | 6= 16% | 6= 100% | 6= 100% |
| Native American | 0 | n/a | n/a |
| Pacific Islander | 1= 2.7% | 1= 100% | 1= 100% |
| White | 7= 19% | 7= 100% | 7= 100% |
| Other/Unknown | 0 | n/a | n/a |
|  | **37/37** | **36/37=97%** | **34/37= 92%** |

**ETHNICITY – Spring 2012 (29 students)**

|  | Headcount | Retention | Success |
|---|---|---|---|
| African American | 0 | n/a | n/a |
| Asian (all other) | 2= 7% | 2= 100% | 2= 100% |
| Asian/Cambodian | 1= 3.3% | 1= 100% | 1= 100% |
| Asian/Chinese | 0 | n/a | n/a |
| Asian Indian | 1= 3.3% | 0 | n/a |
| Asian/Vietnamese | 9= 31% | 9= 90% | 9= 90% |
| Filipino | 3= 10% | 3= 100% | 3= 100% |
| Latino | 6= 20% | 6= 100% | 5= 100% |
| Native American | 0 | n/a | n/a |
| Pacific Islander | 0 | n/a | n/a |
| White | 6= 20% | 6= 100% | 6= 100% |
| Other/Unknown | 1= 3.3% | 1= 100% | 1= 100% |
|  | **29/29** | **28/29=97%** | **27/29=93%** |

**ETHNICITY – Fall 2012 (27 students)**

|  | Headcount | Retention | Success |
|---|---|---|---|
| African American | 6=21% | 6=100% | 6=100% |
| Asian (all other) | 0 | n/a | n/a |
| Asian/Cambodian | 1= 3.5% | 1= 100% | 1= 100% |
| Asian/Chinese | 1= 3.5% | 1=100% | 1=100% |
| Asian Indian | 2= 7% | 2=100% | 1=50% |
| Asian/Vietnamese | 6= 21% | 6=67% | 4=100% |
| Filipino | 2= 7% | 2=100% | 2=100% |
| Latino | 7= 25% | 7=100% | 7=100% |
| Native American | 0 | n/a | n/a |
| Pacific Islander | 0 | n/a | n/a |
| White | 3=11% | 3=100% | 3=100% |
| Other/Unknown | 0 | n/a | n/a |
|  | **27/27** | **27/27=100%** | **25/26=96%** |

**ETHNICITY- Spring 2013 (27 students)**

|  | Headcount | Retention | Success |
|---|---|---|---|
| African American | 0 | n/a | n/a |
| Asian (all other) | 2= 7% | 2= 100% | 2= 100% |
| Asian/Cambodian | 1= 3.7% | 1= 100% | 1= 100% |
| Asian/Chinese | 0 | n/a | n/a |
| Asian Indian | 1= 3.7% | 1= 100% | 1= 100% |
| Asian/Vietnamese | 10= 37% | 10= 100% | 10= 100% |
| Filipino | 3= 11% | 2= 100% | 2= 100% |
| Latino | 7= 26% | 7= 100% | 7= 100% |
| Native American | 0 | n/a | n/a |
| Pacific Islander | 0 | n/a | n/a |
| White | 3= 11% | 2= 67% | 1= 50% |
| Other/Unknown | 0 | n/a | n/a |
|  | **27/27** | **25/27=93%** | **24/27= 89%** |

**AGE**

|  | Fall 2011 | Spring 2012 | Fall 2012 | Spring 2013 |
|---|---|---|---|---|
| 19 or < | 1 | 3 | 0 | 0 |
| 20-24 | 14 (1dropped; 1 failed) | 15 (1 dropped;1 failed) | 16 | 15 (1 failed) |
| 25-29 | 9 (1 dropped; 1 failed); | 5 | 3 | 3 |
| 30-34 | 5 | 2 | 3 (1 failed) | 3 (1 dropped) |
| 35-39 | 3 | 0 | 2 | 1 |
| 40-49 | 2 | 4 | 3 (1 dropped) | 3 |
| 50 or > | 3 | 0 | 1 | 1 (dropped) |
|  | **37 students** | **29 students** | **27 students** | **27 students** |

| GRADES | Fall 2011 | Spring 2012 | Fall 2012 | Spring 2013 |
|---|---|---|---|---|
| A | 21 | 18 | 11 | 10 |
| B | 9 | 7 | 13 | 12 |
| C | 4 | 2 | 2 | 2 |
| D | 1 | 1 | 1 | 1 |
| F | 1 | 0 | 0 | 0 |

*Enrollment Patterns*

- The majority of students in the program have been female. While the discipline of nursing and nursing care has historically been a predominately female career, there has been an increasing amount of males in the profession (Where are the Men? *Nursing*, July 2003) due to a shortage of nurses and change in gender attitude.
- Most of the students have been in the age group of 20-24. With the Bay Area being a cultural melting pot, it is not surprising that the students come from various ethnic backgrounds, with the largest group coming from Vietnamese and Latino backgrounds.
- The above data is consistent with the EVC's ADN Program data.
- Many of the students have expressed that they plan to pursue the field of nursing and have found the course to be a valuable foundation.

*Program Productivity (WSCH/FTEF)*

Because the CDPH mandates a ratio of 15:1 for instruction in the clinical and laboratory settings, the WSCH/FTEF (Weekly Student Contact Hours and Full Time Equivalent Faculty) for the Program will always be less than the 525 breakeven points:

- Fall 2011: 345.9
- Spring 2012: 349.5

- Fall 2012: 336.0
- Spring 2013: 297.5

Clinical groups, however, are combined into one lecture class to enhance course efficiency.

### *Success rate and patterns*

Four of the five students who did not successfully complete the course (i.e. with a "C" or better) since the last Program Review were female. The students ranged from 19 to 30 years of age and were of various ethnic backgrounds (1 Vietnamese, 1 African-American, 1 Hispanic, 1 Asian-Indian, and 1 Caucasian). In identifying possible causes of unsuccessful course completion, program faculty learned that four of the students were experiencing stress factors related to personal family problems. One student expressed that she felt she may have a learning disability (LD), but did not want to look into the diagnostic process needed to pursue special services from the Disabilities Support Program (DSP) office. All five students chose to stay in the course because they valued the experience and knowledge that they were gaining.

It is important to note that not all students who successfully completed the course have passed the state certification exam (please refer to Certification Pass Rates on page 3). Only those who successfully complete the course are eligible to take the exam. Also, not all students who successfully completed the course have opted to take state certification exam (either due to lack of funding to pay the $90 examination fee, or they wanted to continue taking nursing courses without working as CNAs). Since the last Program Review, all students who took the certification exam passed the written component; 10 students failed the skills component.

**Demographics of those who failed the certification exam:**
- All 10 were female
- 7 ages 20-24; 3 ages 25-29
- 6 Asian/Vietnamese; 2 Filipino; 1 Hispanic; 1 Caucasian

The demographics for those who did not pass the certification exam are consistent with the overall demographics of the Program and of the nursing general course (i.e. most being female, in between the ages of 20-29, of Vietnamese or Hispanic descent).

At least 19 students who completed NURS109 since the last Program Review are currently employed within the healthcare field.

*Advisory Boards and/or Professional Organizations*

Currently, there is no advisory board for the program/course. The program director will collaborate with Dean Herrera to develop an advisory group

## PART B: Curriculum

*Courses offered*

Currently NURS109 is the only course offered in the Nurse Assistant/Home Health Aide Training Program. Depending on workforce demands and the occupational outlook for this particular field, the expansion of the program (i.e., adding more clinical sections) may be considered.

*How has program remained current in the discipline?*

- The program faculty utilizes the most current State-approved Model Nursing Assistant Curriculum (the 2010 version, offered through The California Community College Health Care Initiative and the Butte College Regional Health Occupations Resource Center).
- The program faculty also utilizes the 2013 edition of *Hartman's Nursing Assistant Care.*
- The program faculty has affiliation with the Santa Clara Long Term Care Nurses Council. The Council provides in-service education on current topics of interest related to long-term care.

*Course Outlines*

The following course outline is based on the state required topics presented in the 2010 Model Nursing Assistant Curriculum and will be reviewed either every 6 years or sooner if an updated version of the model curriculum comes out, whichever is first:

1) Introduction
A. Role and responsibilities of the Certified Nursing Assistant
B. Title 22: State Regulations pertaining to Certified Nursing Assistant Programs
C. Requirements for nurse assistant certification
D. Professionalism
E. Ethics and confidentiality

2) Patients' Rights
A. Title 22
B. Health and Safety Code
C. Code of Federal Regulations regarding Nurse Aide Training and Competency Evaluation

3) Communication and Interpersonal Skills
A. Communications
B. Defense mechanisms

C. Socio-cultural factors
D. Attitudes- illness/health care
E. Family interaction

4) Prevention and Management of Catastrophe and Unusual Occurrences
A. Emergency Care Procedures
B. General safety rules
C. Fire and disaster plans
D. Roles and procedures for C.N.A.
E. Patient Safety

5) Body Mechanics
A. Basic body mechanics
B. Transfer techniques
C. Ambulation techniques
D. Proper body mechanics/positioning techniques

6) Medical and Surgical Asepsis
A. Microorganisms
B. Universal precautions
C. Principals of asepsis

7) Weights and Measures
A. Metric system
B. Weight, length, and liquid volume measurements
C. Military time, i.e., a 24-hour clock

8) Patient Care Skills
A. Bathing/medicinal baths
B. Dressing
C. Oral Hygiene
D. Hair care, shampoo, medicinal shampoo, nail care, shaving
E. Prosthetic devices
F. Skin care/decubitus ulcers
G. Elimination needs
H. Bowel and bladder retraining
I. Weighing/measuring the patient

9) Patient Care Procedures
A. Collection of specimens: stool, urine, and sputum
B. Care of patient with tubing: gastric, oxygen, urinary, IV. This care does not include inserting, suctioning, or changing the tubes.
C. Intake and output
D. Bed making
E. Cleansing enemas, laxative suppositories

F.  Admission, transfer, discharge
G.  Bandages, non-sterile dry dressing application of non-legend topical ointments to intact skin

10)  Vital Signs
A.  Purpose of vital signs
B.  Factors affecting vital signs
C.  Normal ranges
D.  Methods of measurement
E.  Temperature, pulse, respiration
F.  Blood pressure
G.  Abnormalities
H.  Recording

11)  Nutrition
A.  Proper nutrition
B.  Feeding technique
C.  Diet therapy

12)  Emergency Procedures
A.  Signs and symptoms of distress
B.  Immediate and temporary intervention
C.  Emergency codes

13)  Long-term Care Resident
A.  Needs of persons with retardation, Alzheimer's, cerebral palsy, epilepsy, dementia, mental illness
B.  Introduction to anatomy and physiology
C.  Physical and behavioral needs and changes
D.  Community resources available
E.  Psychological, social, and recreational needs
F.  Common diseases/disorders, including signs and symptoms

14)  Rehabilitative Nursing
A.  Promoting patient potential
B.  Devices and equipment
C.  Activities of Daily Living (ADLs)
D.  Family interactions
E.  Complications of inactivity
F.  Ambulation
G.  Range of Motion (ROM)

15)  Observation and Charting
A.  Observation of patients and reporting responsibilities
B.  Patient care plan
C.  Patient care documentation

D. Legal issues of charting
E. Medical terminology and abbreviations

16) <u>Death and Dying</u>
A. Stages of grief
B. Emotional and spiritual needs of patient and family
C. Rights of dying patient
D. Signs of approaching death
E. Monitoring the patient
F. Postmortem care

**Home Health Aide Content**

    I.      Introduction
        a.  Definition, functions and responsibilities of a home health aide as a member of the health service team in a home health agency
        b.  Interpretation of the importance of understanding the employing agency's policies, including
            1.  Employment practices
            2.  Nursing policies and procedures
            3.  Supervision
            4.  Ethics and confidentiality

    II.     Interpretation of medical and social needs of people being served
        a.  Basic simple description, in lay terms, of disease and its effects on the individual and the family
        b.  Personal adjustment of the individual and his family to illness and disability

    III.    Personal care services
        a.  Assisting patients with personal hygiene
        b.  Assisting patient in self-care activities:
            1.  Bathing:  tub, shower, bed
            2.  Dressing and undressing
            3.  Feeding
        c.  Assisting with mobility
            1.  Getting in and out of bed, chair, wheelchair, toilet
            2.  Walking with or without devices
            3.  Assisting with exercises as ordered
            4.  Positioning
        d.  Assisting the client with self-administered medications

    IV.    Cleaning and care tasks in the home
        a.  Home safety measures
        b.  Economical cleaning materials and method of use
        c.  Maintenance and cleanliness of where dishes and food are stored

       d.    Principles of general cleanliness of environment
       e.    Handling of laundry

    V.       Nutrition
       a.    Basic principles of diet
       b.    Meal planning and serving
       c.    Food purchasing
       d.    Food preparation, sanitation and storage

### *Innovative strategies which maximize student learning & success*

In preparing for taking the State Certification exam, which is the ultimate goal upon successful completion of the course, students have benefited most from demonstration and practice of skills (for example, occupied bed making) learned within both the skills lab at the school and clinical settings, but especially in the former.  The use of current audiovisual (i.e. DVDs) has also been beneficial.  The implementation of the home health aide training allows the students to be more "marketable".   Finally, program faculty has incorporated new teaching strategies adapted from the January 2011 workshop, "Creative Teaching Strategies".  Students have found the strategies to both enjoyable and useful.

### *Plans for future curricular development*

Plans for future curricular development circle around enhancements to the skills lab.  CNA certification exam pass rates for the written portion have remained at 100% for the past 2 years.  However, the second component of the certification exam, skills, has fluctuated between 65-100% pass rates since spring 2011.  More operable equipment is needed in the skills lab for students to learn and practice their skills.  Teaching strategies will be enhanced to optimize the allotted time for the instructor to demonstrate the skill, and to observe and evaluate students' learning.

Additionally, future plans to expand the program is being discussed with the division Dean as the student waiting list to enroll in the Nursing Assistant Training Program has totaled between 20-30 students every semester for the past few years.  A grant has been submitted to help fund for skills lab enhancements and expansion.

### *Program articulation- NA*

### *External Certification/Status*

The program maintains state approval through the CDPH.  The program is reviewed by the CDPH every 2 years and has obtained renewal for both the CNA and HHA components through May

2015.  Based on our certification exam pass rates, we are in current good standing with the CDPH.

## PART C:  Student Outcomes

### The following are the SLOs of NURS109:

Upon successful completion of the course, the student will be able to:

1.   Identify the role of the CNA/HHA and the state requirements for certification.

2.   Identify principles of client safety, including environment assessment and emergency procedures.

3.   Demonstrate skills necessary to perform nursing assistant procedures safely and effectively, including accurate measurement of vital signs, transfer techniques, bathing/grooming principles and feeding techniques.

4.  Accurately document nursing assistant and home health aide skills, including vital signs, patient transfers, bathing, grooming, and feeding.

5.   Describe basic infection control procedures, client rights, and confidentiality.

6.   Utilize beginning principles of therapeutic communication.

7.   Explain responsibilities to prevent, recognize, and report client abuse.

8.   Identify and address the needs of clients undergoing various stages of care including long-term care, rehabilitative care, and the dying process.

9.   Identify and address the special needs of clients with developmental and mental disorders.

10. Identify and address the needs of clients with HIV/AIDS, Hepatitis, and TB.

11. Demonstrate and provide culturally sensitive care to all clients.


The program utilizes a skills assessment form which has been approved by the CDPH in order to assess the completion (i.e., return demonstration) of nursing assistant skills.  Five multiple-choice exams of 100 questions each, and quizzes which range from 10 to 20 points each, are utilized in order to test and assess acquisition of theoretical knowledge.  These tools thus far have been effective; however, a mechanism for determining and analyzing causes of student failure (both in the course itself and in the state exam) is needed.

## PART D:  Faculty & Staff

### Current faculty and staff

The instructor and coordinator for NURS109 is Elaine Amo Kafle.  Currently, there is no other faculty or staff member in the program, though she has gratefully utilized assistance from the Department of Nursing and Allied Health's Program Coordinator, Adrienne Burns, and has received much support from Dean Herrera and her colleagues within the Department.

Elaine has been an RN since 1991.  She has experience in long-term care nursing as well as home-health nursing, totaling about 6-7 years.  In addition, prior to becoming an RN, she worked as a nursing assistant in the acute care setting while in nursing school, which has proven to be beneficial when relating first-hand nursing assistant experiences to her students in the program.

Elaine has had her Director of Staff Development Certificate since 2002, a requirement of the CDPH to teach in a nursing assistant training program.

Elaine has a Master of Science in Nursing degree from UCSF, with a focus on Gerontology/Nursing Education.  Both have contributed to the success of the program.

Finally, Elaine has her Public Health Nurse (PHN) certificate, a requirement by the CDPH to obtain approval for the HHA program.

### *Major professional development activities*

Elaine has current professional membership in the National League for Nursing and Sigma Theta Tau International Nursing Honor Society (Alpha Eta Chapter).  Her main focus at EVC since she began teaching the program in Spring 2010 has been to prepare the students to successfully pass the state certification exam and to provide compassionate, competent care to others.  Elaine has completed continuing education courses specific to gerontology and the care of geriatric clients.

Elaine is currently pursuing a PhD in Education (specializing in Postsecondary/Adult Education) at Capella University, a fully-accredited online institution.  She began her course of studies in Fall of 2011 and has since completed all of her coursework with a 4.0 GPA.  In December of 2012 she completed the last of three in-person residencies; in May of 2013 she successfully passed the comprehensive examinations.  Elaine's area of interest is Learning Disabilities (LDs) in adult students.  In November of 2013 she completed the 4th of sixteen milestones in the dissertation process.

Elaine currently serves as the Division Representative for the Department of Nursing & Allied Health on the Faculty Association's Council of Division Representatives.  The goal of the Council is to serve as a liaison between faculty and the Union; to keep both full-time and adjunct faculty aware of their rights as faculty; and to answer questions that faculty may have surrounding the contract.  Elaine contributes articles to the FA Newsletter on a regular basis.

*Schedule for Tenure Review*

Elaine has had a review every Fall semester since Fall 2011 and is scheduled to reach tenure in Fall of 2014.

*Orientation process*

Elaine received guidance from American River College's Nurse Assistant Training program faculty, Judy Young, in order to complete the initial application for program approval and to further develop the program. The Department's former Interim Dean, Sandy DeWolfe, was her mentor the first semester. Minerva Duke also served as a mentor through the Union during her first 2 semesters. In addition, another faculty member in the department, Felicia Mesa, served as a mentor for 2 semesters per the recommendation of Ms. DeWolfe. In the future, if more faculty is needed for the program, Elaine will orient and train the faculty.

## PART E: Facilities, Equipment, Materials & Maintenance

*Facilities, equipment, materials, maintenance*

The program currently shares the two Nursing Resource Centers (skills labs) for learning and practicing nursing assistant skills. While sharing the labs has been working, it can at times be cumbersome. Simulation is sometimes utilized in order to conserve supplies and materials, or because of lack of supplies. If more funds become available, added lab space and additional supplies would be something to consider. Specifically, additional sphygmomanometers (for the measuring of blood pressure) are needed.

*Currency of Technology*

Testing is conducted through computerized online testing (ExamView), based on Computer Lab availability. The faculty incorporates Moodle (posting of grades; posting of reading assignments, weekly learning objectives and PowerPoint materials) within the course.

*Support from the Industry*

Adequate support is received from the CDPH Liaison, Thomas Hill, RN. The program/faculty also receives support from its affiliated clinical facility, Lincoln Glen, and from American River College. Finally, support is received through Mission College Health Workforce Initiative in relation to arranging certification exam testing for students who successfully complete the course.

## PART F:  Future Needs

### *Current Budget*

The CDPH requires that all students enrolling in any Nurse Assistant Training Program be live scanned (fingerprinted for Background Check) prior to having contact with nursing home residents.  The CDPH also requires that the student not incur any costs for this procedure. Currently, live scanning is done through All Care Plus, Inc. at a cost of $50 per student plus administrative fees (i.e. $1,660 per semester).  It is important that future budgets for the program include this cost, as the cost is not allocated into the current budget.  Also, as of the Fall 2011 semester, the clinical facility has requested that we provide gloves for the students' use during clinical.  This is an added cost that needs to be incorporated into the budget.  Gloves for a class of 30 students will cost approximately $580 for one semester, or $1,160 annually.

### *Faculty Positions*

If additional clinical sections for the program are added in the future, faculty with the following requirements are needed:

- An active nursing license, preferably RN license vs. LVN license.
- A Director of Staff Development certificate
- The desire to teach and foster student learning and growth
- The nurse need not have a Bachelor's or Master's degree
- Long-term care and home health experience (minimum of one year)

Finally, if funds are available, a teaching assistant to help the instructor in the labs would be helpful, but is not required.

### *Equipment beyond the program's current budget*

Additional lab space is something to consider, although right now the program is managing with sharing space with the nursing courses.  The cost of live scanning and gloves definitely needs to be incorporated into future budgets.

## PART G:  Additional Information

It is worthwhile to mention that the staff and residents (clients) of the nursing facility where we have our clinical rotation have continued to express over and over how grateful they are to have the Evergreen Valley College nursing assistant students there.  Often times in nursing homes, because of staffing ratios, many of the clients do not receive the extra attention that they

deserve; many are lonely because of busy schedules, family members are not always available to visit them.  The residents have expressed to their Social Services Coordinator during Resident Council Meetings the joy they feel whenever our students are there.  In addition, even the students have told me what a valuable experience the course has been for them, in introducing them to the field of nursing and healthcare in general.

## PART H:  Annual Assessment:  Program Faculty & PR Committee

## PART I:  Resource Allocation Table

| Item Title | Response |
|---|---|
| Productivity (WSCH/FTEF) | 332.23 |
| Student Success Rate (Retention Rate) | 96.75% |
| Number of Class Sections offered | 2 |
| Changes in enrollment | None |
| Program's Current Budget (from Fund 10) | $118,290 |
| Current External Funding (from Fund 17) | None |
| Future Needs:  Faculty (Estimated Annual Cost)<br>• $117,860= salary and benefits to add another full-time, tenured-tracked faculty member to teach another 30 students<br>• $400=estimated cost for travel/mileage reimbursement | $117,860 +<br><br>$400 |
| Future Needs: Staff (Estimated Annual Cost)<br>• Received grant to pilot expanded skills lab for academic year 2014-15 | None |
| Future Needs:  Facilities (Estimated Annual Cost) | None |
| Future Needs:  Supplies (Estimated Annual Cost)<br>• $3,320= Live Scanning for another 60 students (30 per semester)<br>• $580=70 boxes of gloves<br>• $10= 2 boxes of alcohol wipes<br>• $20= mailing of initial CNA applications with live scan forms; state certification exam fees (priority mail w/tracking or certified mail) | $3,930 |