Nursing Program Review Self-Study

Department/Program Name: Nursing and Allied Health/Nursing

Last Review: 2013/2014

Current Year: 2015/2016

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Area Dean: Antoinette Herrera

Overview of the Department/Program ("Program")

1. **Provide a brief summary of your program. Assume the reader does not know anything about it. Your explanation should include a brief history and a discussion of any factors that have been important to the program's development. Please explain the purpose of your program, what students you serve, what services you provide, and why these services are valuable.**

   According to the Bureau of Labor Statistics' Employment Projections 2012-2022 released in December 2013, Registered Nursing (RN) is listed among the top occupations in terms of job growth through 2022. The RN workforce is expected to grow from 2.71 million in 2012 to 3.24 million in 2022, an increase of 526,800 or 19%. The Bureau also projects the need for 525,000 replacement nurses, largely due to retiring nurses, bringing the total number of job openings for nurses due to growth and replacements to 1.05 million by 2022.

   Since 1962, the Evergreen Valley College Nursing Program has offered a 2-year associate degree in nursing (ADN) program approved by the California Board of Registered Nursing (CA BRN) and nationally accredited by the Accreditation Commission for Education in Nursing (ACEN). The Nursing Program is guided by the CA BRN regulations, and applies the ACEN standards and criteria to "foster educational equity, access, opportunity, mobility, and preparation for employment" (ACEN Goals).

   Applications are accepted every October and 80 students are admitted into the program every year. In October 2015, 656 applications were received. Of those applicants, 451 qualified. Students who meet eligibility requirements for the program are put into the State Chancellor's validated formula which includes cumulative GPA, prerequisite sciences (biology) GPA, English 1A GPA, and the number of science repeats. The formula generates a composite score, which is utilized in the selection process. The Evergreen Valley College (EVC) nursing program cut score is 75%. Ninety students are randomly selected (80 plus 10 alternates) and then required to take the Test for Essential Academic Skills (TEAS). Qualified applicants who are not randomly selected for admittance typically continue taking general education courses, enroll in the CNA/HHA certificate program, or complete other health care courses such as Pathophysiology for Health Professionals until they are ready to reapply to the program. Upon completion of the program, the student receives an Associate in Science Degree in Nursing and is eligible to take the NCLEX exam for RN Licensure. The most recently posted (2014-2015) NCLEX pass rate for the EVC's Nursing Program is 94.34% (first-time test takers).

   EVC's philosophy and beliefs about learning stress the integration/application of theory and practice, active involvement of the adult learner, and the teacher-facilitator role to promote critical thinking. Nursing classroom courses are typically scheduled during the day, Monday through Friday,

as well as skills and simulation labs. As a requirement of the program and the state, lab (AKA clinical) is scheduled concurrently with the theory course. Students are assigned clinical placements at acute care hospitals and community agencies during day or evening shifts. State regulations for nursing programs have strict requirements such as 1:10 faculty to student ratios in clinical/lab settings. All nursing faculty must be approved by the CA BRN, which ensures the public that each nursing educator is carefully reviewed for competency in the assigned content areas. Upon completion of the program, the graduate competently performs in the following areas: safe and effective care environment, health maintenance and promotion, psychological and physiological integrity of the client, and professional role of the nurse. After earning an associate of science degree in nursing, and passing the NCLEX-RN, graduates are prepared for entry-level practice into the profession of nursing.

2. **Please state at least three recent accomplishments for your program which show how it contributes to the College's success.**

The nursing faculty is proud of many accomplishments that have occurred in the last two years. The following are three accomplishments that faculty believe contribute to the overall goals of the college. In spring 2016, the nursing program was awarded continued accreditation status from ACEN. Through this accreditation, we offer our students a program that exceeds standards and criteria for educational quality. The San Jose-Evergreen Community College District has one of twenty-four nationally accredited ADN programs in California, and one of only four programs in Northern California. The nursing faculty at EVC agree with the ACEN belief, "that specialized accreditation contributes to the centrality of nursing for the public good and provides for the maintenance and enhancement of educational quality through continuous self-assessment, planning, and improvement. Accreditation indicates to the general public and to the educational community that a nursing program has clear and appropriate educational objectives and is working to achieve these objectives. Emphasis is placed upon the total nursing program and its compliance with established standards and criteria in the context of its mission/philosophy as well as current and future nursing practice" (ACEN nursing.org, 2016).

The nursing program strives to integrate innovative teaching strategies and the use of technology throughout the program. During the past two years, each course in the program participated in one or more days of high fidelity simulation each semester. The simulation lab is located on the San Jose City College campus. Simulated learning experiences offer the student nurse the opportunity to practice their competencies in a controlled and safe environment using a variety of learning scenarios that are aligned to student learning outcomes. The students are videotaped during the simulation and then participate in a de-briefing to provide the student valuable feedback to incorporate into their future nursing practice. According to Aebersold and Tschannen, 2013, simulation has demonstrated effectiveness as a method to train practicing nurses for new procedures, communication processes, and both skill based and non-skill based techniques. The lab provides interactive and engaged learning experiences for the student, and provides the student the opportunity to learn through self- reflection and through feedback from both the de-briefer and other student participants and observers. Simulation provides another method for achieving the program and institutional learning outcomes. The faculty is in the process of documenting learning outcomes after each simulation experience as well as making changes based on student recommendations. Plans to expand the physical space including a Simulation Center (lab) are underway.

In April 2008, EVC's Nursing Program partnered with San Jose State (SJSU) School of Nursing to streamline educational pathways for ADN graduates. In January 2009, the CCC State Chancellor's office awarded the EVC/SJSU collaboration $150,000 to implement the project. Both nursing programs worked together with college and university constituents and realized the project outcomes. In fall 2014, both parties resumed working collaboratively to seek grant funding to again offer and sustain an Internal ADN to BSN Bridge program and EVC was awarded the Song-Brown Special

Projects grant in spring 2015. Once admitted into the Bridge program, EVC students take concurrent EVC and SJSU courses during their third and fourth semesters of the ADN program. Our first cohort graduated with their ADN in spring 2016 and were approximately 50% completed with their baccalaureate in nursing (BSN). These students have smoothly transitioned to SJSU in order to complete their BSN in two semesters and one summer. Our second cohort started the Bridge program earlier this year, and we will be initiating a third cohort in spring 2017. With the support of our campus administration and continued partnership with SJSU, we will be sustaining an internal ADN-BSN Bridge program after the grant ends in 2017. The opportunity to receive a Bachelor's degree in nursing is yet another example of how the EVC's nursing program supports lifelong learning, and gives students the opportunity to further their education and professional growth.

3. **Where would you like your program to be three years from now?**

The San Jose Evergreen Community College District (SJECCD) has a high fidelity simulation center that is housed on the San Jose City College Campus. This center (lab) was built, through grant funding, in collaboration with Kaiser San Jose Hospital, and is now managed by the Business Workforce Institute (BWI). In the past years, there has been a shift from community simulation centers to specialized simulation centers or labs that are being built by individual entities including educational nursing programs. There is great benefit for programs to have their own simulation center on campus for easier access and scheduling, and overall control of management of the center.

For several years, EVC's nursing program was the only contracted entity using the simulation lab. SJCC Business Workforce Institute has downsized the space used for the simulation lab, which has negatively impacted the learning experience of our nursing students. Simulation is part of the nursing curriculum and student learning outcomes. The failing technical support, simulators, and equipment at BWI's Simulation Center has also negatively impacted student learning. A simulation center at EVC would provide the ideal setting for our students' simulated learning experiences, and address our increasing needs to look for alternatives in fulfilling required clinical (lab) hours. Nursing Administration and faculty have determined that moving the simulation lab to the EVC campus would allow greater access to this teaching modality and would expand our clinical lab opportunities.

Persistence is an area of concern for the nursing department. We would like to consistently meet our benchmark of > 60%, which we have not been able to accomplish. In fall 2015, students entering the nursing program were required to meet a new Chancellor Formula cut score, which was increased from 68% to 75%. The intended positive effect of this change was entering students would have a stronger foundation in the sciences resulting in a greater chance of successfully completing the program. Thus, increasing persistence and successful course and program completion rates. We will not be able to assess the results of this change until the first group of students complete the program in spring 2017. The department also formed a Retention Ad Hoc Committee to address our concerns about persistence. The committee is researching additional strategies for increasing retention and persistence, in order to develop an action plan that can be implemented by fall 2017.

PART A: Program Effectiveness and student success

1. **State the goals and focus of this department/program and explain how the program contributes to the mission, strategic initiatives, comprehensive academic offerings, and priorities of the College and District.**

The purpose of the EVC Nursing Program matches the mission statement of the college," to empower and prepare students from diverse backgrounds to succeed academically and to be civically responsible global citizens," and specifically, to provide an optimal learning environment that will enable the culturally diverse learner to begin the process of life-long learning as a registered nurse. Below are the Division's Commitments to Action

and how they align to the mission, goals and strategic initiatives. The division will be discussing new strategic initiatives for the 2017/2018 academic year during the spring 2017 semester.

Community Engagement:

I. Build an awareness of campus programs, both internal and external; communicate and network

Alignment: Faculty and students are empowered to participate with campus and community events. By doing so, they engage in positive change and become more civically responsible global citizens.

> a. During the course of the nursing program, students will participate in a minimum of one community event
>
> b. At least one faculty member will participate as club advisor and support campus clubs

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

Alignment: Campus and community engagement and collaboration supports students from diverse backgrounds to succeed academically.

> a. One division faculty member will participate in 50% of the meetings/events with the Medical Magnet Program at   Andrew Hill High School
>
> b. One division faculty member will participate in the annual College Connection
>
> c. One division faculty member will participate in the annual Kindercaminata

Organizational Transformation:

III. Increase online and hybrid course and program offerings

Alignment: Providing an array of course offerings and methods of delivery increases interest and accessibility to higher education.

> 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

IV. Increase persistence, retention and success rate for all courses

Alignment: On-going assessment supports student success including graduation and NCLEX passing rates.

> 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

V. Review, strengthen and implement emergency preparedness/response procedures

Alignment: Creating a safe and responsive environment supports student success.

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

VI. Provide training and support for employees to effectively offer online, hybrid courses, and student support services

Alignment: Professional development advances the knowledge and skills of faculty members, which directly impacts the quality and rigor of our courses.

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

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

Alignment: Healthy budgets that are managed effectively supports student success.

> a. Dean will include an update on the campus budget, as well as any grant funds, at 100% of the division meetings
>
> b. Faculty will research and apply for, at least, one grant to help improve a program or course

Student Centered:

VIII. 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.

Alignment: Providing courses on non-traditional schedules, such as Fridays and weekends, supports student access to higher education.

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

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

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

Alignment: Providing an array of health-related courses and using a variety of alternative instructional delivery systems supports student success.

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

2. **What is your program set standard (baseline standard that you don't fall below) for successful course completion to measure effectiveness? (Please use program 5 year average success rate and review 5 year state average to set the program set standard).How did your program do against this program set standard?**

The EVC Nursing Program is in the process of finalizing the program set standard. We will pilot a program set standard of 50% for all students, which correlates with the state average of course completion of Associate degree programs given in the annual report data retrieved from the California Board of registered nursing website. Our current program completion is 57% for all students, which puts us above this set standard. We plan to finalize this number as the data is obtained to include 5 year average data results from peer colleges for program completion. Our nursing program has made a major change to our requirements for admission. As previously mentioned, we increased the Chancellor's Formula score from 69% to 75%. Because this did not happen until fall 2015, we will not see the first full effect of this change until spring 2017. In addition, the EVC Nursing Program has three subsets of students within the program: 1) Generic students who begin our program in N001 and complete all nursing courses within 2 years, 2) returning students who separated from the program one time, and 3) the advanced placement students, LVNs and transfer students who begin later in the program. There is ongoing discussion regarding the selection of one set standard that includes all these students or a set standard for each subset. The plan is to use this standard and continue to have these discussions to see if the set standard needs to be changed by our next program review in 2018.

Evergreen Valley College has Institutional Set Standards (ISS) for CTE programs. The ISS exam pass rate for Nursing is 80% and for job placement it is 70%. Our exam pass rates have remained well above 80% and our job placement rate, for the 2015-2016 students who responded to the questionnaire, is 86%.

3. **(data) Identify student success rate and patterns within the department/program and compare your results to the overall college institutional set standard of 64% successful course completion with "c" or better and your program set standard (questions 2)?**

The EVC Nursing Program has maintained a successful course completion rate, well above the college institutional set standard of 64%. Below is a table of the percentage of course completions with a "C" or better. It is important to note that starting in the fall 2013 semester, the minimum "C" was changed from a 70% to a 75%, in keeping with standards in the Northern California region for nursing programs.

Course Completion Rates for All Students

	N001	N002A	N002B	N003	N004
Fall 11	95%	86%	97%	90%	97%

Spring 12	88%	83%	100%	76%	95%
Fall 12	87%	70%	97%	93%	90%
Spring 13	87%	81%	94%	77%	97%
Fall 13	93%	78%	93%	79%	100%
Spring 14	100%	89%	100%	94%	100%
Fall 14	90%	81%	100%	100%	97%
Spring 15	95%	81%	91%	90%	97%
Fall 15	93%	92%	95%	90%	93%
Spring 16	88%	92%	97%	93%	90%
Average	92%	83%	96%	88%	96%

EVC Nursing Annual Attrition Report

Program completion rates have varied throughout the semesters as can be seen in the table below. Students entering the nursing program starting in fall 2015, were required to meet the new Chancellor Formula cut score which was increased from 68% to 75%. We will have the program completion rates for those students starting in spring 2017. Due to the low program completion rates of the generic students, a Retention Ad Hoc Committee has been formed and is developing a Retention Plan, based on research, to increase retention.

Advanced placement students are showing some consistency in successfully completing the program. We have several interventions in place to help them with their transition into our program including a pre-requisite role transition course, early contact with the Student Success Coordinator, and open skills lab hours, including some Saturdays, for students to work with faculty on skills, clinical records, test-taking strategies and study strategies. In addition, a Bootcamp for Advanced Placement students was offered this past summer in order to assist them with adjusting to a RN program.

Program Completion Rates for Students

	Generic		Returning		Advanced Placement	
Fall 11	75%	30/40				
Spring 12	49%	20/41				
Fall 12	48%	19/40				
Spring 13	73%	24/33	66%	2/3	71%	5/7
Fall 13	48%	18/37	50%	2/4	66%	2/3
Spring 14	45%	17/38	71%	5/7	100%	1/1
Fall 14	60%	23/38	50%	3/6	100%	1/1
Spring 15	64%	24/37	100%	5/5	N/A	
Fall 15	49%	19/39	50%	4/8	100%	1/1
Spring 16	60%	18/30	44%	4/9	100%	6/6
Average	57%		54%		78%	

4. **(data) Identify current student demographics. If there are recent changes in student Demographics, explain how the program is addressing these changes.**

Below are the demographics of the EVC Nursing Program, which shows the diversity of our student population. Data was taken from BRN Annual Survey Report**.** The nursing program has seen an increase in the number of male students as well as students in the middle-age groups of 41 years old or greater. Job security, second careers after the downturn in the economy, and a variety of job choices available to nurses are all reasons for this increase. These increases did not require any changes to the nursing program.

2011/2012   **2012/2013**   **2013/2014**   **2014/2015**   **2015/2016**

Head Count: 89   **Head Count: 60**   **Head Count: 84**   **Head Count: 80**   **Head Count: 93**

Category	Total #	%	Category	Total #	%	Category	Total #	%	Category	Total #	%	Category	Total #	%
Gender			**Gender**			**Gender**			**Gender**			**Gender**		
Male	14	16	Male	12	19	Male	15	19	Male	19	24	Male	20	22
Female	75	84	Female	48	81	Female	69	81	Female	61	76	Female	73	78
Age			**Age**			**Age**			**Age**			**Age**		
17-20	0	0	17-20	1	2	17-20	0	0	17-20	0	0	17-20	0	0
21-245	48	54	21-25	18	30	21-25	24	29	21-25	0	0	21-25	33	35
26-30	32	36	26-30	15	25	26-30	33	39	26-30	52	65	26-30	32	34
31-40	8	9	31-40	18	30	31-40	17	20	31-40	18	23	31-40	19	21
41-50	1	1	41-50	7	11	41-50	7	8	41-50	7	8	41-50	8	9
51>	0	0	51>	1	2	51>	3	4	51>	3	4	51>	1	1
Ethnicity			**Ethnicity**			**Ethnicity**			**Ethnicity**			**Ethnicity**		
African American	1	1	African American	3	8	African American	7	4	African American	3	4	African American	3	4

Ethnicity			Ethnicity			Ethnicity			Ethnicity			Ethnicity		
Asian	19	21	Asian	13	29	Asian	24	29	Asian	25	31	Asian	23	26
Filipino	27	30	Filipino	17	11	Filipino	9	11	Filipino	7	8	Filipino	25	20
Latino	21	24	Latino	10	7	Latino	6	7	Latino	22	28	Latino	26	27
Pacific Islander	2	2	Pacific Islander	0	0	Pacific Islander	1	1	Pacific Islander	0	0	Pacific Islander	0	0
White	15	17	White	11	25	White	21	25	White	17	21	White	13	17
Other Declined Unknown	4	5	Other Declined Unknown	6	19	Other Declined Unknown	16	19	Other Declined Unknown	6	8	Other Declined Unknown	3	6

BRN Annual Survey Report

5. **(data) Identify enrollment patterns of the department/program in the last 6 years and provide an analysis of any notable trends or patterns.**

The EVC Nursing Program enrolls 40 students into the N001 course each semester. There are always more qualified applicants than there are spaces available, so students are selected by lottery after meeting the Chancellor's cut score. Though most nursing program across California are impacted (more qualified applicants than available program admissions), the nursing program has seen an increase in the number of qualified applicants over the past several years.

Another area connected with enrollment is our clinical placement sites. Our program has seen a decline in the availability of hospitals and/or units that will accommodate nursing students. There have been several reasons for this decline: 1) hospitals only accepting BSN students, 2) change in leadership, and 3) number of nursing programs competing for the same hospitals/units. Some of the solutions that we have implemented include utilizing less acute units in the Fundamentals course, forming partnerships with other facilities, scheduling clinical on less desirable days, and acquainting hospital administrators with our Internal RN-BSN Bridge Program with San Jose State University.

6. **(data) Identify department/program productivity (WSCH/FTEF).**

Currently, CROA does not separate the nursing program's productivity from other allied health nursing courses. Productivity for all nursing courses (including ADN program courses, stand-alone supplemental/health care courses, and CNA/HHA courses) for 2015FA is 262% (see Appendix B). Efforts to extrapolate data to calculate productivity specifically for the nursing program will take place once the campus researcher position is filled.

7. **If the program utilizes advisory boards and/or professional organizations, describe their roles.**

The Evergreen Nursing Program schedules an annual Community Advisory Committee meeting. The Committee consists of representatives from clinical agencies, local nursing programs (for example, SJSU and Mission College), the nursing faculty, EVC campus administrators, current students and graduates of the nursing program, high school counselors, and interested members of the community. The members of the Advisory committee share agency administrative concerns, report on the implementation of new policies or technologies and offer insight into community issues.

Santa Clara Valley Medical Center recently formed an educator's advisory group and invited the nursing faculty from EVC to participate. The first meeting took place in mid-October. The nursing Dean attends local and state Deans and Director's meetings and utilizes these opportunities to confer with colleagues to identify relevant trends and report on the activities of EVC.

PART B: Curriculum

1. **Identify all courses offered in the program and describe how the courses offered in the program meet the needs of the students and the relevant discipline(s).**

    Graduates of the Evergreen Valley College Associate of Science Degree Nursing Program function in the common domain of nursing practice after licensure. Completing the program outcomes will enable graduates, following registered nurse licensure, to give direct patient care in collaboration with other health care professionals, and to perform independent and interdependent nursing interventions. Graduates are prepared and empowered to practice successfully within the rapidly changing health care system of a multicultural society. Faculty recognizes that the role of the nurse is changing due to influences both internal and external to the nursing profession. Therefore, graduates will continue learning through the process of experience and ongoing continuing education.

    The purpose of the nursing program is to provide an optimal learning environment that will enable the culturally diverse learner to begin the process of life-long learning as a registered nurse. This purpose is congruent with the program philosophy in that each person is viewed as a distinct individual with multi-faceted life experiences. Within each individual, learning is an interactive process that integrates various learning styles, resulting in creative critical thinkers. The learner will in turn develop reasoning abilities through self-assessment and self-awareness, empowering students to strive for life-long learning.

    There are eleven (11) overall Course Learning Outcomes that are leveled across the curriculum; beginning with the fundamentals nursing course and ending in the program outcomes. The course student learning outcomes increase in difficulty, promote cumulative student learning, and culminate, in the fourth semester, into the program outcomes. Program outcomes are leveled by semester (i.e., student learning outcomes) and organize the presentation of content in a logical progression from simple to complex. The leveled student learning outcomes are also the foundations for measuring student success in both nursing theory and clinical courses via theory and clinical evaluations.

Nursing Program Core Course Descriptions by Semester
Semester 1
Nursing 001: Fundamentals of Nursing
This course addresses the health needs of individuals of varied psychosocial and cultural backgrounds. Nursing skills are developed to adapt nutrition, hygiene, comfort, safety, and pharmacology for each client. This course is designed to apply the nursing process to the health needs of the adult client utilizing basic nursing skills and caring behaviors to meet physical, social, and emotional needs. The Client Needs approach is used as the framework for providing safe and effective nursing care. The course includes clinical experiences in healthcare facilities.

Semester 2

Nursing 002A: Basic Medical-Surgical Nursing

This course focuses on health promotion and health maintenance in the adult client with chronic illness. The course content includes pharmacological therapies, the nurse's role in preventive and rehabilitative services, and the maintenance/restoration of physiological and psychosocial integrity through the application of the nursing process. This course includes clinical experiences in adult health care units. This is an 8-week course.

Nursing 002B: Maternity Nursing

This course focuses on health promotion and health maintenance for the childbearing client. The course content includes pharmacological therapies, the nurse's role in maternity nursing, and the maintenance/restoration of physiological and psychosocial integrity through the application of the nursing process. This course includes clinical experiences in maternity units. This is an 8-week course.

Semester 3

Nursing 003: Advanced Pediatrics and Medical-Surgical Nursing

This course includes the application of medical surgical nursing care for the pediatric, adolescent, and adult client with complex disorders. Course content emphasizes pathophysiology, growth and development, nutrition, and pharmacology. The nursing process is used to apply these concepts to the maintenance and restoration of physiological and psychosocial integrity of the client. The course includes clinical experiences in pediatric and adult health care settings.

Semester 4

Nursing 004: Advanced Medical-Surgical/Geriatrics/Mental Health/Leadership and Management Nursing

This course contains mental health nursing, advanced medical surgical nursing, geriatrics, leadership and management, including the preceptorship. Mental health nursing includes the principles of mental health and the social, economic, cultural, and physiological factors that predispose a person to mental illness. In advanced medical surgical nursing, critical thinking and leadership concepts are applied to the management and care of multiple clients in adult and geriatric settings. During preceptorship, in collaboration with a registered nurse, the student will provide optimal client outcomes by applying concepts learned throughout the nursing program.

Supplemental courses: N131A, N131B

These are credit/no-credit optional skills labs designed to supplement the objectives of N001, N002A, N002B and N003. Low fidelity skills lab opportunities are provided under the direction of a nursing professor.

2. **All course outlines in this program should be reviewed and revised every six years. If this has not occurred, please list the courses and present a plan for completing the process, including timelines and dates for each course.**

   Nursing courses are reviewed and revised every two years, according to the campus requirements for VTE programs. The EVC Nursing Program completes the Program and Course Student Learning Outcome Assessment Matrices, departmental course matrices, and a Total Evaluation Plan (TEP) of the nursing program. At this time, all course reviews are current.

3. **Identify and describe innovative strategies or pedagogy your department/program developed/offered to maximize student learning and success. How did they impact student learning and success?**

Evergreen Valley College Nursing Program is committed to enhancing technology competency of the nursing students. Our high fidelity simulation clinical experiences have grown to include all 5 courses across the curriculum. With faculty and student buy in, course content and learning outcomes, clinical reasoning, and critical thinking have been strengthened.

Additional advances in technology include implementation of web-enhanced courses and online testing. Our campus course management system, Canvas, affords the program the opportunity to increase student access to course information. This online course management tool is utilized for posting syllabi, lectures, grades, course documents, announcements, and links to Quality and Safety Education in Nursing (QSEN), and geriatric resources. In addition, it has been the priority communication tool between faculty and students. All nursing courses utilize Exam View Player for testing, and schedule exams in the nursing/biology computer lab. This same online test format is available through the Disabled Student Program (DSP) for students requiring accommodations. To decrease our continued problems with Exam View Player, computer and software updates were completed in spring 2016. Additionally, faculty has collaborated with Assessment Technologies Institute (ATI) to help students utilize online resources to strengthen content, remediate and practice NCLEX-type questioning. Students have access to electronic health records for viewing and documentation as well as medication administration.

The Nursing Department is committed to student success and has continued to support innovative student success activities. Utilizing our Enrollment Growth/Assessment /Remediation/Retention grant funds from the State Chancellor's office, the nursing students have continued to benefit from student success activities including Peer Led Team learning (PLTL), nursing tutors, a faculty PLTL coordinator, and a designated Student Success Coordinator.

PLTL is a well-established grant-funded program designed to provide an opportunity for review of lecture content and apply critical thinking skills. The program allows third semester students the opportunity to lead first semester students in small group discussions to promote application and critical thinking to support fundamental nursing concepts. Content may include case studies, application of math concepts, opportunities for skills review, and low fidelity simulation. This method has a mutually beneficial effect for both first semester students to enhance critical thinking development and for third semester students to develop leadership skills. Third semester students apply for the PLTL leadership positions. Currently, PLTL leaders receive a small stipend for their work. Each leader must have a formal recommendation from a previous nursing instructor and be approved by the Board of Trustees. The PLTL coordinator, which is a grant funded 10% FTE position, works with the leaders and guides the mentoring and coaching skills. PLTL leaders meet on a weekly basis with the coordinator prior to the group meetings. Feedback is received through surveys of both the leaders and the first semester participants. PLTL is a required component of the Fundamentals course. Peer Led Team Learning benefits both the entry nursing students as well as developing leadership potential in the mentors.

The student success coordinator works one on one with students needing support in test testing, didactic and clinical areas and connects students with available resources. Additionally, the student success coordinator provides a series of workshops open for all nursing students. The key areas covered in the workshops include medication math, CINAHL database searches, APA, NANDA development, skill demonstration and practice.

The Nursing Student Success Program is designed to help students develop strategies to be successful in the Nursing Program and to be lifelong learners. The Student Success Coordinator's role allows a full time faculty member to meet with students that are at risk and/or have questions or

concerns regarding their performance in the nursing program. Student Success hours are flexible. There are posted hours that allow students the opportunity to have a structured system in place to seek assistance when needed. Student Success hours are also available by appointment to allow the student to meet at a time that does not interfere with class or clinical time. The Student Success Coordinator keeps track of students that are seen and reports directly to the Dean of Nursing and Allied Health. Students may initiate meetings with the Student Success Coordinator or may be referred by an instructor. At the beginning of each semester students meet with the coordinator with questions about the program, questions on study tips, and review of testing skills. As the semester progresses there is an increase in the number of students requesting appointments with the Student Success Coordinator at the 4th, 8th and 12th week. These time frames coincide with exams. Recently a more formalized format for tracking students was implemented. Average time spent with the student is one hour. Throughout the semester 3-4 students are seen on average per week. Concerns range from time management, help with reading and comprehension techniques, study techniques, and care planning assignments. Students also come in when experiencing family issues and high stress issues. At this time, students are referred to confidential campus counseling services offered through Student Health.

A nursing tutor is also available for the student throughout the semester. The students can self-refer or may be referred by the student success coordinator or their course instructor. The nursing tutor is a practicing registered nurse and assists primarily with pathophysiology and care plans.

Interventions for student success are implemented throughout the nursing program. Examples include the "Getting to Know You" interview in first semester. Second and fourth semester employ reflective journaling as a weekly assignment entered in Moodle or Canvas to reflect on their experiences in the clinical setting. First, second and third semester have implemented a weekly anecdotal form that allows for weekly feedback to the student. This form reviews student areas in need of improvement as well as the areas in which the student has demonstrated proficiency. In the nursing program, instructors will activate an "Early Alert, Student Agreement Strategy for Success" for students that are identified as being high risk for academic failure. The form can be initiated at any time by the theory or clinical instructor. Strategy for Success plans are automatically initiated by the theory instructor for any student that receives less than 75% on an exam. This process begins a remediation plan that sets in motion a number of interventions designed to promote student success. The faculty and/or student success coordinator meet regularly with the student to monitor progress of the remediation plan and to modify it as necessary. Students are referred to campus support services that may help promote their academic success. The role of the coordinator includes meeting with the student to discuss and implement plans for success. These include but are not limited to, test taking strategies, dealing with test anxiety, study tips, reading help, time management, and organizational skills. The college employs an" Early Alert" program approximately three weeks into the semester. Students registered for coursework who may be having academic difficulty are notified that they should meet with their instructor and/or seek additional assistance.

Students performing poorly in the clinical setting are also started on an "Early Alert, Student Agreement Strategy for Success" and/or "Skills Remediation" form. The faculty member identifies a specific area of remediation that the nursing skills lab faculty will use to work with the student. Remediation may include a combination of skill practice, low fidelity simulation scenarios, and viewing media. A student may also be requested to meet with the nursing tutor. Tutoring hours are set and available on a weekly basis in the nursing building.

RN Boot Camp is an 8-hour class set up prior to the start of the N001 Fundamentals course to help students to be successful in the nursing program. The class covers professional communication, orientation to Canvas, practice with Exam View Player as well as multiple strategies for reading, studying, and time management.

Students are introduced briefly to QSEN as well as what to expect in the clinical setting. Students are introduced to the clinical paperwork requirements, APA paper requirements, as well as the math exam requirements. Ample time is allotted for student questions and answers.

4. **Discuss plans for future curricular development and/or program (degrees & certificates included) modification. Use a Curriculum Mapping form as needed.**

   Future curricular development includes offering a supplementary Pharmacology course and Critical Thinking course utilizing case studies for first and second year students. Other plans include pursuing funding to once again offer a collaborative transition course and to develop a refresher course to increase employment opportunities for nurses who have been out of the nursing field for some time. Lastly, as the current curriculum outcomes are evaluated, a possible curriculum change may be in the future.

5. **Describe how your program is articulated with the High School Districts, and/or other four year institutions. (Include articulation agreements, CID, ADTs…)**

   The Nursing Program is not articulated with the High School Districts or other four-year institutions.

6. **If external accreditation or certification is required, please state the certifying agency and status of the program.**

   The Evergreen Valley College Nursing Program is approved by the California Board of Registered Nursing (BRN), and nationally accredited by the Accreditation Commission for Education in Nursing (ACEN). The next approval process for the CA BRN will occur in 2020. The department expects an accreditation visit with ACEN in 2021.

PART C: Student Learning Outcomes and Assessment

1. **On the program level, defined as a course of study leading to a degree or certificate, list the Program Learning Outcomes (PLO), and how they relate to the GE/ILOs (link to ILOs). If you are completing this program review as a department or discipline and do not offer any degrees or certificates, please disregard this question.**

   EVC Nursing Program has eleven Program Learning Outcomes that are leveled across the curriculum; beginning with the fundamentals nursing course and ending in the program outcomes. The course student learning outcomes increase in difficulty, promote cumulative student learning, and culminate, in the fourth semester, into the program outcomes. Program outcomes are leveled by semester (i.e., student learning outcomes) and organize the presentation of content in a logical progression from simple to complex. The leveled student learning outcomes are also the foundations for measuring student success in both nursing theory and clinical courses via theory and clinical evaluations. Below are each of the PLOs and their alignment to the campus ILOs:

   Program Outcomes

   At the completion of the nursing program, the graduate competently performs in the following areas.

   1. Implement nursing care based on the nursing process to meet client needs throughout the life span in a variety of settings. (ILO #2)
   2. Promote achievement of optimal client outcomes by directing nursing care of clients throughout the life span in a variety of settings through advocacy and delegation. (ILO#2)
   3. Act as a client advocate to promote access and enhance quality of care throughout the life span in a variety of settings. (ILO #1 and #4)
   4. Utilize teaching/learning principles to promote optimal health throughout the life span in a variety of settings. (ILO #1 and #4)

5. Utilize therapeutic communication to provide client care throughout the life span in a variety of settings. (ILO #1)

6. Demonstrate cultural sensitivity when providing care to clients throughout the life span in a variety of settings. (ILO #1 and #4)

7. Implement caring behaviors that support mental emotional and social well-being of the client throughout the life span in a variety of settings. (ILO #1 and #4)

8. Implement nursing care utilizing critical thinking skills based upon knowledge of biological sciences, pathophysiology, nutrition, pharmacology and growth and development to achieve maximum physiological integrity and reduce the risk potential for the client. (ILO #2 and #3)

9. Utilize leadership and management principles in providing and delegating the delivery of client care, as a member of the health care team. (ILO #1 and #4)

10. Demonstrate accountability for providing and evaluating nursing care that adheres to professional standards and incorporates legal and ethical responsibilities of the nurse. (ILO #5)

11. Demonstrate autonomy in recognizing one's own need for life-long learning, personal transformation and professional growth. (ILO #5)

2. **Since your last program review, summarize SLO assessment results at the course and program level (if this is your first program review, please summarize your SLO assessment results over the past 6 years). Please include dialogue regarding SLO assessment results with division/department/college colleagues and/or GE areas. Provide evidence of the dialogue (i.e. department meeting minutes or division meeting minutes…)**

EVC Nursing Program's last Program Review was in 2013-2014. Since that time, the program has met 29/37 (78%) of the Program Level SLO and Assessment criteria, including the NCLEX pass rate. Although many of the outcomes have been met, there are still consistent problems involving the ATI Comprehensive Predictor exam, the ATI Critical Thinking exam, the persistence rate, and the employment rate. The following interventions were implemented in fall 2015 with little change in the results. To help increase persistence rates the nursing department provided a full-time skills lab faculty, provided regularly scheduled nursing tutoring, and heightened available computer resources available such as test taking strategies, case studies, NCLEX-RN type questions, pharmacology study guides. To assist students in achieving the benchmark ATI Comprehensive Predictor score, students were required to complete an ATI focused review if they did not achieve a > 90% on non-proctored exam on the first attempt. Changing the test date from the last day of class, reviewing ATI strategies for facilitating critical thinking, incorporating additional critical thinking strategies into courses and discussing benchmarking for the ATI Critical Thinking assessment with ATI representatives were strategies implemented to improve program outcomes.

Individual nursing course SLO assessment is done every year along with reevaluation of interventions that were implemented. Assessment tools include the Clinical Performance Evaluation Tool (CPET), the Simulation Evaluation Tool (SET), Exams, Clinical Records and individual assignments developed for each course. Most assessment tools are aligned with course learning outcomes and institutional learning outcomes, and data collection and analysis has been ongoing since fall 2014. For those courses that are not fully participating in the assessment process, actions plan are in place to insure that this process is completed. All core nursing courses have completed at least one full cycle of assessment and evaluation for the college requirements. Attached is an example of one of the internal course matrices that are completed each academic year for the core nursing courses (see Appendix A: N004 Course Matrix).

The majority of assessment results for the nursing courses show that students are meeting the learning outcomes, but there are three consistently identified problem areas throughout most of the nursing courses. The first one is the Clinical Record, more specifically the Data Analysis, Nursing

Diagnoses, and Care Planning sections. The second one is alternate format exam questions. Alternate item format questions use a format other than the standard, four-option, multiple-choice questions and can include multiple response, fill in the blank, or ordered response. These types of questions are part of the NCLEX exam, so students need to master this format. Lastly, in simulation, outcomes identified with less than 90% met were primarily in the #1 Safe and Effective care outcome area. Over all, this outcome received 87% for all courses. The breakdown of areas that fell below 90% in this area are: (A.2) perform nursing assessment of client, (A.3) report significant findings, (A.4) follow 9 rights when administering medication, (A4a) consistently use two forms of identification, (A4b) aware of classification, action, indications, usual dosage, routes , major side effects, and nursing implications, (A4c) calculate math accurately. Also, in outcome #3 Psychosocial Integrity, (A3) address client's need in timely manner, fell below 90% overall

All three of these areas involve the following three SLOs: 1)Implement nursing care of optimal client outcomes by directing nursing care of clients throughout the lifespan in a variety of settings, 2) facilitate achievement of optimal client outcomes by directing nursing care of clients throughout the lifespan in a variety of settings through advocacy and delegation, and 3) prioritize nursing care utilizing critical thinking skills based upon knowledge of biological sciences, pathophysiology, nutrition, pharmacology, and growth and development to achieve maximum physiological integrity and reduce the risk potential for the client.

Course and Program Review are frequent agenda items in Curriculum Meetings. Attached are several meeting minutes that include discussions involving Program Review and individual course outcomes (see Appendix B: Curriculum Committee Meeting Minutes).

3. **What plans for improvement have been implemented to your courses or program as a result of SLO assessment?**

An Instructional Design Subcommittee was formed in spring 2016 with the responsibility of developing action plans for the criteria not met on our Total Evaluation Plan which includes the problem areas from our Program Review. They will be presenting their report in Fall 16. Also, as previously mentioned, a Retention Ad Hoc Committee was formed to start the process of researching strategies that we can utilize to increase persistence rates.

For the courses, several plans have been implemented to help students better meet the outcomes. In regards to the clinical record, N002A is requiring an analysis on all clinical preps so the students have more opportunity for feedback. N002B is modifying the instructions and adding additional prompts for further clarification. N004 is using 15 minutes from each clinical conference to discuss clinical records and answer questions. In addition, they are having students read each other's data analysis and provide feedback prior to the due date. Alternate item format questions are being incorporated into quizzes and lecture areas so that students have more opportunity to practice this type of question. Also, faculty are encouraging students to use available resources such as ATI and their textbooks. For Simulation, more time has been allowed in scenarios to practice safe medication administration, assessment, standard precautions, and identifying change in status.

4. **As a result of SLO assessment data, will you be requesting additional resources for your program or courses (i.e. additional faculty, equipment request, program personnel...)?**

The Simulation Lab provides valuable learning experiences in implementing, directing and prioritizing nursing care for our students. The loss of simulation space at SJCC and the increased need to incorporate more simulation experiences into the courses will best be solved by relocating the Simulation Center/Lab to the Evergreen Valley College campus. In addition, simulators/mannequins and related equipment are aging, malfunctioning, and will need to be updated to maintain quality learning experiences for the students. Maintenance agreements will also need to be obtained. Finally, simulation is an expanding and changing teaching modality in nursing education. Simulation training for all faculty is necessary to ensure the highest standard of teaching for our nursing students.

The Nursing and Allied Health Division has two skills labs (one small and one larger) for use by both Nursing and CNA/HHA students. The CNA/HHA program has expanded and has required more time in the skills labs. The addition of a Skills/Lab faculty has increased the use of the skills labs by nursing students. As a result, faculty must find alternative locations for their skills labs; Maternity nursing faculty has been using the Simulation Lab and Pediatric nursing faculty schedules additional time on the pediatric unit in the hospital. Additional skills lab space is necessary to accommodate all of the required lab needs for the division.

The increased use of these two labs by both CNA/HHA and nursing students is best coordinated through careful scheduling, appropriate upkeep of equipment and supplies, and availability of multiple and functional state-of-the-art equipment and devices. At present, most of this is accomplished through grant funding. A more secure form of funding is required to safeguard the availability of lab equipment in the future.

PART D: Faculty and Staff

1. **List current faculty and staff members in the program, areas of expertise, and how positions contribute to the program success.**

At present, there are nine full time faculty and nine part time faculty teaching in the pre-licensure RN degree program. Six out of nine full-time faculty are tenured, all Masters (MSN) prepared with one doctoral prepared. There are two full-time faculty in each of the four semesters. Currently we have openings for two FTE tenure track positions (one in first semester and one in second semester) that we plan to fill for fall 2016. Adjunct faculty teaching during 2015-2016 include Abraham, Leirer, Mecwan, Nwogu, Pena, Rivera (Elisa), Rivera (Rachel), Tegegne, and Tran. Four out of nine (44.4%) adjunct faculty members hold a MSN. One adjunct faculty who has a BSN has been accepted into a Master's program and will start in fall 2016.

All full- and part-time faculty members meet the CA BRN regulations for their positions as outlined in section 1425 of the California Nursing Practice Act. (See: California Nurse Practice Act). All faculty are BRN approved to teach in their respective theoretical and clinical areas. Dr. Antoinette Herrera serves in the position as the Dean of Nursing and Allied Health since July 2013. Of the three full-time tenure track faculty, one faculty was hired in fall 2013 and two additional faculty members were hired in fall 2015. All three new faculty have previous teaching experience. This has allowed faculty the opportunity to expand in areas such as simulation and use of computer charting in lab. Furthermore, the majority of adjunct faculty and a few full time faculty continue to work in the hospital. This ensures that their clinical practice is up to date.

Each faculty member participates in the planning and ongoing evaluation of the course. Full time faculty assigned to each course meet as a team, at a minimum monthly, to implement, plan, evaluate and discuss course content, progress and student concerns. Adjunct faculty is encouraged to attend team meetings. Communication between the team and their adjunct faculty is done by email; this would include team meeting minutes as well as students' progress and any issues or concerns. Weekly student learning outcomes are reviewed in order to ensure similar experiences for all clinical groups within a course.

Faculty members remain current in content and practice through continuous education hours, coursework, and work experience. In addition to team meetings, each course is reviewed on an ongoing basis with content expert reviews and student evaluations. The nursing faculty has a minimum of one content expert in each required content area. Content experts annually review the curriculum for content currency, appropriateness and logical progression of subject matter, teaching-learning methods, evaluation methods and content links to the curriculum infrastructure using practice standards appropriate to the area. Content expert suggestions are reviewed by the faculty team to maintain the integrity and concurrency of the course/program. Findings are presented and faculty members have the opportunity to discuss, make recommendations for change and approve the

review. Content experts stay current in practice trends by attending educational conferences, completing continuing education units and through clinical experiences. Furthermore, both the results of the Dean's focus groups with the students and the anonymous course evaluation feedback are reviewed and integrated into the course to optimize delivery of course content.

According to the AFT 6157 Collective Bargaining Agreement, faculty is responsible for curriculum development, including the analysis and coordination of text materials; constant review of current literature in the field, the preparation of selective, descriptive materials, such as outlines and syllabi; conferring with other faculty and administration on curricular issues; and attending and participating in college curriculum and implementation committees.

Full time faculty actively participates in standing committees within the nursing department including Curriculum, Program Review, and Community Advisory Board. The Assistant Director of the Nursing Program chairs the Nursing Curriculum Committee. The primary work of this committee is to evaluate the comprehensive and cohesive nature of the curriculum. The nursing curriculum committee must approve all curriculum changes prior to submission to the All College Curriculum Committee and the CA BRN. The Program Review Subcommittee, chaired by the Dean, ensures the quality of the nursing program and that it meets all of the nursing standards for both the California Board of Registered Nursing and the Accreditation Commission for Education in Nursing. The Community Advisory Board meets annually with faculty, hospital representatives, and community agencies in order to communicate and collaborate with the community we serve. This advisory board looks at trends in nursing practice, the effectiveness of the program, and nursing job development and job placement.

Full-time faculty typically teach both theory and clinical, whereas part-time faculty typically are assigned to clinical only. The standard faculty/student ratio for clinical is 1:10. This standard is currently met by all full time faculty taking clinical groups and the use of qualified adjunct faculty. The standard faculty/student ratio for theory courses on average ranges between 1:20 to 1:40, which we feel is sufficient since the majority of college level lecture courses have a student faculty ratio of 1:40 to 1:50. While lecture is one method for teaching theory courses, faculty members often incorporate a variety of other teaching-learning strategies that involve small group work focusing on collaborative learning, problem-based learning, case study analysis, and small group presentations. During these times, other faculty members will often join the primary lecturer to assist with these alternative teaching-learning methodologies. A full-time faculty member is assigned to teach in the skills lab and simulation lab.

The program strives to have the students taught primarily by full-time faculty members. Part-time faculty, however, play a valuable role in providing excellent clinical teaching. Theory continues to be taught by full time faculty members. Because the application of theoretical concepts in clinical teaching is critical, part-time faculty members are given an extensive orientation to the curriculum, are assigned a faculty mentor, and given a list of expectations and requirements. Many adjunct faculty members attend team meetings, and all adjunct faculty check in with their team on a weekly basis. The program also utilizes skills labs and Simulation, in Skills labs the ratio is 1:10, which is adequate to supervise students practicing skills. In simulation, the faculty is 2-3 faculty/staff to 10 students which is adequate to smoothly run a simulation. The nursing program complies with the established college policy that states that one hour of weekly theory instruction throughout the semester is equal to one semester unit. Three hours of weekly clinical laboratory instruction throughout the semester is equal to one semester unit.

In summary, faculty members (full- and part-time) teaching in the Evergreen Valley College Nursing Program are academically and experientially qualified as evidenced by BRN approvals, and maintain expertise in their areas of responsibility. The primary mission of the college and nursing program is teaching. The utilization of full- and part-time faculty is sufficient to support the mission of both education units. The number and type of faculty are

adequate to carry out the purposes and objectives of the nursing program. Faculty/student ratios in the classroom and supervised clinical practice are sufficient to insure adequate teaching, supervision, and evaluation.

2. **List major professional development activities completed by faculty and staff in this department/program in the last six years and state proposed development and reasoning by faculty in this program.**

   Nursing faculty members are committed to life-long learning. Because the mission of the college and nursing program is teaching, faculty members primarily focus on maintaining expertise in nursing education and clinical practice trends (see Appendix C: Faculty Report).

3. **Identify current schedule for tenure review, regular faculty evaluation, adjunct faculty evaluation, and classified staff evaluation.**

   All faculty, full-time and adjunct, are scheduled for tenure review or faculty evaluation according to the directives written in the AFT 6157 contract. Classified staff are evaluated according to the CSEA union contract. At present, all reviews and evaluations are current.

4. **Describe the departmental orientation process (or mentoring) for new full-time and adjunct faculty and staff (please include student workers such as tutors and aides).**

   One hundred percent of new full- and part-time faculty are oriented by the Dean and 1-2 faculty members. New faculty is provided a formal campus orientation by the Human Resources Department and the Dean offers a College, Division, and Department orientation individualized to the new nursing faculty member. New full-time faculty also receive an additional orientation through the District. Orientation to the course is facilitated by a full-time faculty member. All new full-time faculty members are receiving regularly scheduled pre-tenure evaluations, have peer mentors, and clinical teaching mentors as needed and have completed program and college orientations. New part-time faculty are encouraged to attend an Adjunct Orientation through the college. Adjunct faculty are mentored by a full time faculty through their first semester. Adjunct faculty also check in with full time faculty on a weekly basis and are offered the opportunity to attend team meetings. Team meeting minutes are emailed to adjunct faculty. The Dean communicates with all new full- and part-time faculty weekly via meetings, emails, or phone.

PART E: Budget Planning and Resource Allocation

1. **Current Budget**

   A. **Identify the budget currently allocated for the department/program through the division budget (fund 10). Discuss its adequacy in meeting your program's needs.**

   The nursing program's current budget totals $2,212,310. Only $5,000 is allocated for non-personnel expenses, which does not even met the demands of professional membership fees the program has to maintain such as national nursing accreditation through Accreditation Commission for Education in Nursing (ACEN). Fund 10 does not meet the program's needs. Funding for supplies, equipment, repairs, maintenance contracts, adequate nursing exam software, faculty mileage reimbursement for traveling to hospitals, classroom teaching supplies, professional memberships, and professional development, to name a few, is desperately needed for the nursing program's fund 10 account. Additionally, a capital budget account is needed for future plans to build a simulation center on campus and another skills lab.

B. **Identify any external (fund 17) funding the department/program receives, and describe its primary use.**

The nursing program has consistently applied for the California Community Colleges Chancellor's Office grant every year, and has been successful in securing funding to help with student success efforts such as nursing tutoring services, conducting a Peer Led Team Learning (PLTL) program, and funding for a Student Success Coordinator. In our continuous efforts to secure funding from other external sources, the nursing has also applied for a very competitive grant through the Office of Statewide Health and Planning (Song-Brown grant) in the past, but only able to secure funding twice in the past several years. Our current Song-Brown grant helps fund our new Internal ADN-BSN Bridge Program, which partners with SJSU. We will be submitting another Song-Brown application next month, and hope to receive funding towards our planned simulation center at EVC as well as our student success program.

C. **Explain any grants or other external funding sources (partnerships) for which your program is benefiting from.**

The nursing program is not receiving any other grants or external funding. The two grants assisting with funding currently expire in June 2017.

2. **Explain any grants or other external funding sources for which your program would be a good candidate. Do you have plans to apply for such sources?**

As noted above in 1.B., the nursing department will continue to apply for funding from the CCCCO and Song-Brown. Though we try to keep a close pulse on grant opportunities as they arise, the lack of a grant writer and allocated time to current personnel creates challenges in meeting grant application deadlines.

PART F: Future Needs:

1. **Please describe any unmet needs for your program and how you plan to address them. Are any additional resources needed to accomplish your program's outcomes? Please provide rationale on how the requests tie into the strategic initiatives, college mission, SLO Assessment or Student Success.**

A future need, in addition to what has already been discussed in Part C, sections 2 and 4, is a potential Curriculum Change. The nursing department has recognized student success, in the areas of retention and persistence, as a major concern in our program. Changes have been initiated and further work is in place to increase our success rate but faculty feel that the curriculum is another area that may need to be addressed. The last curriculum change was implemented in fall 2007 and nursing education has evolved since that time. According to the National Advisory Council on Nurse Education and Practice (NACNEP), nurse educators must continuously evaluate and revise education curricula, approaches, and programs used to educate new and practicing nurses to keep pace with the rapidly changing healthcare environment. The NACNEP states the need to expand the use of technologies (e.g., simulation, distance learning, virtual worlds) to prepare faculty to teach effectively and efficiently and to prepare nurses for practice in complex healthcare delivery systems. Finally, they emphasize the importance of promoting innovative practice models that provide learning opportunities that emphasize safe, coordinated, and affordable healthcare as well as inter-professional models of education that provide collaborative and consumer-centered care.

2. **What faculty positions will be needed in the next six years in order to maintain or build the department? Please explain. What staff positions will be needed in the next six years in order to maintain or build the department? Please explain.**

At this time, the Nursing Program has no additional faculty needs. We have one new faculty to start in fall 2016 and a second faculty member will start in spring 2017 instead of fall 2016.

3. **Does your program require any additional facilities, equipment, technology and/or supplies over the next six years (above and beyond the program's current budget)?**

The Simulation Lab provides valuable learning experiences in implementing, directing and prioritizing nursing care for our students. The loss of simulation space at SJCC and the increased need to incorporate more simulation experiences into the courses will best be solved by relocating the Simulation Center/Lab to the Evergreen Valley College campus. In addition, simulators/mannequins and related equipment are aging, malfunctioning, and will need to be updated to maintain quality learning experiences for the students. Maintenance agreements will also need to be obtained. Finally, simulation is an expanding and changing teaching modality in nursing education. Simulation training for all faculty is necessary to ensure the highest standard of teaching for our nursing students.

The Nursing and Allied Health Division has two skills labs (one small and one larger) for use by both Nursing and CNA/HHA students. The CNA/HHA program has expanded and has required more time in the skills labs. The addition of a Skills/Lab faculty has increased the use of the skills labs by nursing students. As a result, faculty must find alternative locations for their skills labs; Maternity nursing faculty has been using the Simulation Lab and Pediatric nursing faculty schedules additional time on the pediatric unit in the hospital. Additional skills lab space is necessary to accommodate all of the required lab needs for the division.

The increased use of these two labs by both CNA/HHA and nursing students is best coordinated through careful scheduling, appropriate upkeep of equipment and supplies, and availability of multiple and functional state-of-the-art equipment and devices. At present, most of this is accomplished through grant funding. A more secure form of funding is required to safeguard the availability of lab supplies and equipment in the future.

PART G: Additional Information

Please provide any other pertinent information about the program that these questions did not give you an opportunity to address.

PART H: Annual Assessment: Program Faculty and PR Committee

Please attach copies of any Annual Reviews that you have completed in the last six years (if applicable)
N/A

PART I: Resource Allocation Table

Program Reviews provide a valuable source of information for the College as it makes decisions on resource allocation, both in terms of funding and cuts. The following information, in table format, will be used by the College Budget Committee to help inform EVC's Budget and Planning Process.

Item Title	Response
Productivity (WSCH/FTEF)	247.35
Student Success Rate (Retention Rate)	Fall 2015= 49%; Spring 2016= 60%; Average= **55%**

Number of class sections offered by your program	19/semester
Changes in enrollment	Fall 2012-Spring 2015: 3%; 8%; 4%
Your Program's Current Budget (from Fund 10)	$2,212,310.00
Current External Funding (from Fund 17)	$243,178.00
Future Needs: Faculty (Estimated Additional Cost)	--
Future Needs: Staff (Estimated Additional Cost)	--
Future Needs: Facilities (Estimated Additional Cost)	(Will try to use current open space on campus for Skills Lab)
Future Needs: Supplies (Estimated Additional Cost)	$1,000,000.00

* Do your program's future needs assume that your program's enrollment will remain stable or do they depend upon enrollment growth? If they depend on growth, please explain the growth projections on which you are basing your assumptions. You may attach any supporting documentation to explain or support assumptions.

Appendix A – N004 Course Matrix 2014-2015

ILO	PLO	CLO	QSEN	Assessment Tools	Benchmark	Assessment	Recommendation	Reevaluation 2015-2016
#1 Communication	#3 #4 #5 #6 #7 #9	CLO#3 CLO#4 CLO#5 CLO#6 CLO#7 CLO#9	#1 #2 #5 #6	-Geri paper	90% of students will achieve max point on a minimum of 3 outcomes that relate to CLO #5, 6 or 7	Met: >90% met three out of four Communication outcomes. 79% met one of the Communication outcomes.	Assessment was only for Spring 2015. Will need to evaluate entire academic year. Also, rubric was modified to better reflect outcomes. Will use the new rubric for 2015	After evaluating for one full year, the benchmark was not met.
				-Process recording	90% of students will meet a minimum of 4 outcomes that relate to CLO #5, 6 or 7 on first attempt	Not met: > 90% of students met only one out of the four minimum outcomes.	Recommend peer collaboration and review, after one-on-one communication with client, before submitting assignment	The benchmark was met in 2015/2016
				-CPET	90% of students will achieve a satisfactory on final clinical evaluation	Met: 97% of students achieved a satisfactory on final clinical evaluation	No changes needed	
				-Exams	75% of the communication questions, will have total correct $\geq$ 70%	Met: 78% (114/147) of the questions had $\geq$70% correct	No changes needed	
				-Clinical Records: MS & MH	90% of students will meet the entire communication course learning outcomes on	Met: 96% 60/62 students met communication course learning outcome on final clinical	Overall benchmark met, but three areas of concern: Data Analysis, Nursing Diagnoses and Care Plan. Discuss	Continue to have problems with the same 3 areas: Data Analysis, Nursing Diagnoses and Care Plan

				the final clinical record evaluation	record evaluation		expectation in these areas at the beginning of the course. Offer 15 minutes each clinical conference time for questions on clinical record preparation. Encourage students to use Clinical Lab Instructor as resource	
				-SET	The effective communication outcomes will be met by 80% of the simulation groups outcomes	Not Met:	See simulation analysis at end of report for recommendations	The benchmark was met in 2015/2016
				-QSEN Poster	90% of students will meet a minimum of 2 outcomes that relate to Communication	Met: 100% of students met two of the three Communication outcomes	Benchmark met: Note: Clarify instructions regarding application of QSEN concepts. This outcome was only 77%.	

ILO	PLO	CLO	QSEN	Assessment Tools	Benchmark	Assessment	Recommendation	
#2 Inquiry and Reasoning	#1 #2 #8	CLO#1 CLO#2 CLO#8	#1 #3 #4 #5 #6	-Exams	75% of the Inquiry and Reasoning questions, will have total correct $\geq$ 70%	Met: 80% (158/198) of the questions had $\geq$ 70% correct	No changes needed	
				-Clinical Records: MS & MH	90% of students will meet the entire inquiry and reasoning	Met: 96% 60/62 students met inquiry and reasoning	Overall benchmark met, but three areas of concern: Data Analysis, Nursing	Continue to have problems with the same 3 areas: Data Analysis, Nursing

	course learning outcomes on the final clinical record	learning outcome on final clinical record evaluation	Diagnoses and Care Plan. Discuss expectation in these areas at the beginning of the course. Offer 15 minutes each clinical conference time for questions on clinical record preparation. Encourage students to use Clinical Lab Instructor as resource	Diagnoses and Care Plan
	-QSEN Poster	90% of students will meet a minimum of 2 outcomes that relate to Inquiry and Reasoning	Met: 100% met 2 of the 3 Inquiry and Reasoning outcomes	Benchmark met: Note: Clarify instructions regarding outcome #4. This outcome was only 85%.	
	-Geri Paper	90% of students will meet a minimum of 5 outcomes that relate to Inquiry and Reasoning	Not met: four of the five outcomes were above 90% Results of assessment was 87.5% Implementation was 69%	Assessment was only for Spring 2015. Will need to evaluate entire academic year. Also, rubric was modified to better reflect outcomes. Will use the new rubric for 2015/2016 and reevaluate	The benchmark was not met for 2015/2016. Implementation continues to be a problem; identifying 3 interventions from evidence based practice is a new identified problem
	-CPET	90% of students will achieve a satisfactory on final clinical evaluation	Met: 97% of students achieved a satisfactory on final clinical evaluation	No changes needed	
	-SET	The inquiry and reasoning outcomes will be met by 80%	Not met	See Simulation analysis at end of report for recommendations	Benchmark met in 2015/2016

ILO	PLO	CLO	QSEN	Assessment Tools	Benchmark	Assessment	Recommendation	
					of the simulation groups			
				- Process Recording	90% of students will meet a minimum of 1 outcome that relates to Inquiry and Reasoning	Not met: 76% met outcome #2 and 84% met outcome #4	Recommend peer collaboration and review, after one-on-one communication with client, before submitting assignment	This benchmark was not met for 2015/2016 Still continue to have problems with outcome #2 (88%) and outcome #4 (75%)
#3 Information Competency	#8	CLO#8	#3 #4 #5 #6	-Geriatric paper	90% of students will meet a minimum of 3 outcomes that relate to Information Competency on first attempt	Met: 94% of students met the outcomes	Assessment was only for Spring 2015. Will need to evaluate entire academic year. Also, rubric was modified to better reflect outcomes. Will use the new rubric for 2015/2016	The benchmark was met for 2015/2016
				-Clinical Records MH & MS	90% of students will meet the Information Competency course learning outcomes on the final clinical record	Met: 96% 60/62 students met the Information Competency learning outcome on final clinical record evaluation	Overall benchmark met, but three areas of concern: Data Analysis, Nursing Diagnoses and Care Plan. Discuss expectation in these areas at the beginning of the course. Offer 15 minutes each clinical conference time for questions on clinical record preparation. Encourage students to	Continue to have problems with the same 3 areas: Data Analysis, Nursing Diagnoses and Care Plan

				Assessment Tools	Benchmark	Assessment	Recommendation	
							use Clinical Lab Instructor as resource	
				-CPET	90% of students will achieve a satisfactory on final clinical evaluation of CLO #8	Met: 97% of students achieved a satisfactory on final clinical evaluation	No changes needed	
				-Exams	75% of the Information Competency questions, will have total correct $\geq$ 70%	Met: 80% (158/198) of the questions had $\geq$ 70% correct	No changes needed	
				- Process Recording	90% of students will meet a minimum of 1 outcome that relates to Inquiry and Reasoning	Not met: 76% met outcome #2 and 84% met outcome #4	Recommend peer collaboration and review, after one-on-one communication with client, before submitting assignment	This benchmark was not met for 2015/2016 Still continue to have problems with outcome #2 (88%) and outcome #4 (75%)
				-SET	The Information Competency outcomes will be met by 80% of the simulation groups	Not met	See Simulation Analysis at end of report for recommendations	Benchmark met in 2015/2016

ILO	PLO	CLO	QSEN	Assessment Tools	Benchmark	Assessment	Recommendation	
#4 Social Responsibility	#3 #4 #6 #7 #9	CLO#3 CLO#4 CLO#6 CLO#7 CLO#9	#1 #2 #4 #5	-Geriatric paper	90% of students will meet a minimum of 3 outcomes that relate to CLO #3, 4, 6, 7 & 9 on first attempt	Not met: two of the three outcomes were above 90% Results of assessment were 87.5%	Assessment was only for Spring 2015. Will need to evaluate entire academic year. Also, rubric was modified to better reflect outcomes. Will	The benchmark was not met for 2015/2016. Implementation continues to be a problem; identifying 3 interventions from

		Results of implementation were 69%	use the new rubric for 2015/2016 and reevaluate.	evidence based practice is a new problem
-Exams	75% of the Social Responsibility questions, will have total correct $\geq$ 70%	Met: 77% (114/147) of the questions had $\geq$70% correct	No changes needed	
-Clinical Record MH & MS	90% of students will meet the entire social responsibility course learning outcomes on the final clinical record	Met: 96% 60/62 students met the Information Competency learning outcome on final clinical record evaluation	Overall benchmark met, but three areas of concern: Data Analysis, Nursing Diagnoses and Care Plan. Discuss expectation in these areas at the beginning of the course. Offer 15 minutes each clinical conference time for questions on clinical record preparation. Encourage students to use Clinical Lab Instructor as resource	Continue to have problems with the same 3 areas: Data Analysis, Nursing Diagnoses and Care Plan
-CPET	90% of students will achieve a satisfactory on final clinical evaluation of CLO #3, 4, 6, 7, & 9	Met: 97% of students achieved a satisfactory on final clinical evaluation	No changes needed	
-SET	The Social Responsibility outcomes will be met by 80% of the	Not met	See Simulation Analysis at end of report for recommendations	Benchmark met in 2015/2016

				Assessment Tools	Benchmark	Assessment	Recommendation	
						simulation groups		
				-Process recording	80% of students will meet the outcomes that relate to Social Responsibility	Met: > 90% of students met at least two outcomes	No changes needed	
				-QSEN Poster	90% of students will meet a minimum of 2 outcomes that relate to Social Responsibility on first attempt	Met: 100% met 2 of the 3 Social Responsibility outcomes	No changes needed	

ILO	PLO	CLO	QSEN	Assessment Tools	Benchmark	Assessment	Recommendation	
#5 Personal Development	#10 #11	CLO#10 CLO#11	#2 #4 #5	-CPET	90% of students will achieve satisfactory on final clinical evaluation	Met: 97% of students achieved a satisfactory on final clinical evaluation	No changes needed	
				-SET	The Personal Development outcomes will be met by 80% of the simulation groups	Met: 86% or > met this outcome	No changes needed, see Simulation Analysis at end of report	
				-Geriatric Project	80% of students will meet the outcomes that relate to Personal Development	Not Met: Results of assessment were 87.5% Results of implementation were 69%	Assessment was only for Spring 2015. Will need to evaluate entire academic year. Also, rubric was modified to better reflect outcomes. Will	The benchmark was not met for 2015/2016. Implementation continues to be a problem; identifying 3 interventions from

			use the new rubric for 2015/2016 and reevaluate.	evidence based practice is a new problem. APA format is also a problem.
-Process Recording	90% of students will meet a minimum of one outcomes that relates to Personal Development on first attempt	Met: >90% of students met one of the outcomes	No changes needed	
-Exams	75% of the Personal Development questions, will have total correct $\geq$ 70%attempt	Met: 80 % (83/104) of the questions had $\geq$70% correct	No changes needed	
QSEN Poster	70% of students will have correct answers for all social responsibility questions	Not met: 100% of students met outcomes 1 & 2; 85% of students met outcomes 4 & 5; 77% met outcome 3	Recommendation: Clarify instructions	
Clinical Record-MS	90% of students will meet the Professional Development course learning outcomes on the final clinical record	Met: 96% of students met outcome		

Exam Analysis

ILO #1 Communication and ILO #4 Social Responsibility

    Mental Health Exam I

        3 questions – 2 questions pertain to nursing process (1, 25) and 1 question was a concept (32)

        Faculty recognized difficulty with countertransference concept and plan to give more examples in lecture to clarify concept (32)

    Mental Health Exam II

        7 questions – 1 question was a teaching question (44), 5 questions pertain to nursing process (3, 21, 49, 57, 58), and 1 question was a concept (45)

        Faculty recognized that the wording of question #44 may have been unclear to some students so wording was modified. Faculty recognized difficulty with conversion concept and will emphasize and give examples in lecture (45). Faculty modified wording (hypervigilance) on question # 58.

        2 questions (57, 58) were alternate format questions

    Med/Surg Exam I

        8 questions – 5 questions were based on medications (6, 8, 40, 42, 44) and 3 questions pertain to nursing process (36, 43, 47)

        1 question (47) was an alternate format question

    Med/Surg Exam II

        15 questions – 12 questions pertain to nursing process (8, 13, 17, 25, 26, 27, 30, 31, 44, 51, 52, 55) and 3 questions were based on medications (19, 50, 53)

        There were no alternate format questions – faculty will add a minimum of two alternate format questions Med/Surg Exam II

        4 questions (26, 27, 30, 31) were from the Chest Trauma Lecture and all pertained to the nursing process – faculty will investigate alternative teaching methods for this material

        Faculty recognized the need to emphasize arrhythmias in electrical burns in lecture (44), antiplatelet action (50), interventions for ruptured aneurysms (51), and local anesthesia for cataract surgery (55).

ILO # 2 Inquiry and Reasoning and ILO #3 Information Competency

    Mental Health Exam I

        5 questions – all questions pertain to nursing process (1, 17, 25, 27, 31)

        Faculty recognized that the wording for answer "d" may have been unclear for some students, answer modified.

    Mental Health Exam II

        12 questions – 10 questions pertain to nursing process (3, 10, 21, 45, 49, 50, 57, 58, 59, 60) and 2 questions relate to teaching (44, 56)

        5 questions were alternate format questions (56, 57, 58, 59, 60)

        Faculty recognized that the wording for answer "a" (50), and "a" (56) may have been unclear for some students, answer modified. Faculty modified wording (hypervigilance) on question # 58. Faculty recognized difficulty with defense mechanisms and plan to give more examples in lecture to clarify concept.

    Med/Surg Exam I

        See Communication – ILO #1 and ILO #4

    Med/Surg Exam II

        See Communication – ILO #1 and ILO #4 and 1 additional question (36) pertains to nursing process

ILO #5 Professional Development

    Mental Health Exam I

        1 question – pertains to nursing process (1)

    Mental Health Exam II

        3 questions – 1 questions was a concept (45) and 2 questions pertain to nursing process (57, 58)

        2 questions were alternate format (57, 58)

        Faculty recognized difficulty with conversion concept and will emphasize and give examples in lecture (45). Faculty modified wording (hypervigilance) on question # 58.

    Med/Surg Exam I

        See Communication – ILO #1 and ILO #4 excluding question #36

    Med/Surg Exam II

        See Communication – ILO #1 and ILO #4 excluding question #26, 27, 30, and 31

Simulation Analysis – Discuss recommendations with Simulation Lab Instructor

ILO #1

    NG Tube – Simulation outcome #1: 71% of groups met outcome –

    Shock – Simulation outcome #9: 71% of groups met outcome

    Chest Tube – All outcomes were met with at least 86% of groups

ILO #2

    NG Tube – Simulation outcome # 4: 57% of groups met outcome

        Simulation outcome #1 & 3: 71% of groups met outcome

    Shock – Simulation outcome #10: 43% of groups met outcome

        Simulation outcome #1, 11, 13, 16: 71% of groups met outcome

    Chest Tube – Simulation outcome #4: 43% of groups met outcome

ILO #3

    NG Tube – Simulation outcome #4: 57% of groups met outcome

        Simulation outcome #3: 71% of groups met outcome

    Shock – Simulation outcome #11, 13, & 16: 71% of groups met outcome

    Chest Tube – All outcomes met with at least 86% of groups

ILO #4

    NG Tube – Simulation outcome #1: 71% of groups met outcome

    Shock – Simulation outcome #11: 71% of groups met outcome

    Chest Tube – all outcomes met with at least 86% of groups

ILO #5

    All outcomes met with at least 86% of groups in all scenarios

Additional Recommendations

    Provide a minimum of one alternate format question during each lecture with ample time for discussion.

    Provide medication worksheet prior to start of course.

    Emphasize and offer alternative teaching methods using the nursing process (i.e. case studies, concept mapping based on nursing process).

Appendix B: Curriculum Meeting Minutes

Evergreen Valley College Nursing Program

Monday, May 16, 2016

Curriculum Meeting Minutes

Attendance: Antoinette Herrera (recorder), Felicia Mesa, Pat Braun, Garry Johnson, Maureen Adamski, Susana Machado, Nancy Lin, Sue Wetzel, Karen Cheung

Absent: Barbara Tisdale (excused)

1. Approval of meeting agenda – *M/S Sue/Susana, unanimously approved*

2. Approval of minutes from March 28, 2016 and April 25, 2016 – *M/S Susana/Sue, unanimously approved with the following changes: N003 Clinical Records – there are 4 not 2; HED 011 – delete "check summer and intercession, " add "Maureen, the Curriculum Committee Division Rep, will review and make recommendations for course revision."*

3. Geriatric Content Expert Report

- *Sue presented report to faculty via projection*

- *Summary of findings (see Content Expert Report)*

    o *"How many students are not completing Geriatric Component of CR?" None*

- *Recommendations (see Content Expert Report)*

    o *Sue recommended requiring students to add one geriatric consideration, besides medication, to the clinical record. Faculty discussed where it should be added; each course will decide.*

    o *Sue recommended to add Geri Considerations to Clinical Record outcomes rubric*

    o *Sue will send out Geriatric information monthly. She will also send the information for obtaining 30 CEUs after reading Ebersole book and completing posttest.*

    o *Sue encouraged faculty to add geriatric topics to pre-/post-conference and to let her know when they do so she can keep track.*

- *M/S Felicia/Maureen, unanimously approved to accept Geriatric Content Expert Report*

4. Maternity Content Expert Report

- *Susana presented report to faculty via projection*

- *Highlights of Summary of Findings (See Content Expert Report)*

- o *Added CDC website*

- o *Added QSEN KSAs to Content Expert template after ATI NCLEX-RN Comprehensive Predictor Group Profile Score*

- o *Current OB Initiative*

- o *Attended National Conference, Summer 2015*

- o *ATI – seeing more students reach level 2 or above*

  - ▪ *Nursing Process – analysis and diagnosis improving*

- *Reviewed last year's recommendations briefly; discussed current recommendations more extensively.*

- *Action Item: Felicia to follow up with Barbara to see if the ATI Comprehensive Predictor can be scheduled earlier so Susana can capture that data in her report. Susana will forward, to faculty, an Addendum to her report that will include analysis of this semester' ATI CP and her final exam. Will add as a Curriculum agenda item in September, if additional discussion needed.*

- *M/S Maureen/Felicia, unanimously approved to accept Maternity Content Expert Report*

5. Multi-Criteria Admission Selection Process

    a. Website Posting – *Antoinette followed up with BRN who reported that they do not have an answer on whether or not you can post a general statement regarding changing the admission process or how long it must be posted before the change can be made. They recommended contacting the State Chancellor's office.* Action Item: Antoinette will follow up with State Chancellor's office

    b. Plan for Reporting – *deferred*

6. Program Review

    a. Plan for completion – *Program Review Committee requested to meet before the end of the semester.* Action Item – Felicia will send out possible dates.

7. Revised Clinical Record – *Garry emailed to faculty earlier today; faculty will review and approve this CR as the "foundational" CR; each semester will edit it to what is appropriate for that semester, less prompts as students move forward in the program; N004 will have no prompts. Each course will upload they version on the QSEN website for other courses to view by the start of the fall 2016 semester.*

8. SLO Matrix

    a. To-date analysis report: each team to share a brief analysis of their SLO Matrix thus far

- *N002A (Maureen) – midterm was analyzed and evaluated and found to be pretty solid; starting Fall, points will be given for reaching Level 2 on ATI Community; adopted online quizzes which have improved their scores; areas for strengthening include prioritization and multiple response questions (2 questions on exams).*

- *N004 (Felicia) – students in N004 also have problems with multiple response questions (approximately 5 questions on exams); other areas students continue to have difficulty with are analysis, nursing diagnosis, and interventions on the CR.*

- *N003 (Nancy) – there are 8-9 multiple response questions, students having difficulties with these questions*

- *N002B (Susana) – there are 4 multiple response questions*

- *N001 (Garry and Karen) – Garry states there should be approximately 16% alternate format questions; Karen stated initially the lecture for the OR patient was not done in order (pre-op, intra-op, post-op) and students didn't do as well as when the lecture is in the correct order; Garry went over ATI focus review with students and they are doing well in gaining a level 2 or above on ATI*

- *Discussion*
  - *Maureen – there appears to be a problem with multiple response questions*
  - *Sue – perhaps have "put in order of prioritization" response questions across the curriculum*
  - *Pat- recommended students to consider other books to study multiple response questions*
  - *Susana- online quizzes, for her class, have shown decreased anxiety in class and students are nodding, with understanding, more frequently*
  - *Antoinette – shared results of first 3 quarters of NCLEX results; first 2 quarters were approximately 90%, 3 quarter there were 5 fails which put us into approximately 86% for first 3 quarters; continued discussion regarding correlation with ATI scores*
  - *Garry- should we change the points for passing proctored ATI exams and offer increasing point amounts for the different levels; discussion amongst faculty with additional questions that need to be answered; deferred until Fall 2016*
  - *Maureen – recommended to increase interactive or alternate format as most classes are still primarily lecture style*
    - *Garry stated he flipped two of his lectures, 1 did not go well; has found literature showing less support for flipping classrooms*
    - *Felicia reminded faculty to make sure they are evaluating any new implementations on your course matrix*
    - *Felicia stated she uses concept mapping for her shock lecture; Maureen also uses concept mapping for her endocrine lecture; both found improvement on test scores for these topics; Felicia shared, when she evaluated Pat, she noticed that she uses concept mapping during her lecture and the students actively participated*

- *N003 (Pat and Nancy) – Stated the APA papers were a little disappointing; only 4 students participated in "Peer Review" of their draft paper; Sue stated students did not fully utilize the library tutorials; Nancy stated students are still have challenges with originality*

    - *Turn It In can be accessed thru Moodle; N001 will start using it for their APA papers*

- *Maureen recommended for Antoinette to ask students, during the focus groups, if they are utilizing resources (library tutorials, tutors, etc.) and if not, why?*

9. N001 Test Review Sheet – *Garry sent to faculty today; students able to plot out why they got questions wrong in order to identify a pattern; sheet has directions on how to fill out, what to do with results; M/S Maureen/Susana, unanimously approved for all courses to start using this tool in fall 2016; faculty agree to insert a copy of the completed tool in students file for future reference, if needed.*

10. Other

- *Recommendation to add constant agenda item to discuss student concerns/issues in closed session*

- *Maureen asked faculty to notify her of any course proposals or revisions so she can log onto Curricunet to review and respond to as our Division ACCC rep*

- *Sue will send the Simulation Report at the end of the semester*

11. Adjourn – *1658 M/S Maureen/Felicia, unanimously approved to adjourn*

Attendance: Felicia Mesa, Antoinette Herrera (recorder), Garry Johnson, Karen Cheung, Maureen Adamski, Susana Machado, Nancy Lin, Pat Braun, Barbara Tisdale, Sue Wetzel

1. Approval of meeting agenda – *M/S Johnson/Tisdale, all approved*

2. Approval of minutes from last meeting May 11, 2015 – *deferred, Dean Herrera will email to faculty for approval*

3. Program Review Matrix update

    a. Review of outcomes

- *Mesa reviewed PLO results with faculty*

- *Identified PLOs not met and discussed importance of developing action (interventions) and timeline*

- *Discussion regarding interventions*

    i.   Interventions

- *Require students to complete focus review if they do not reach 90% on the non-proctored exam on the first attempt*

- *Students who had to reach a 75% on the Chancellor's Cut Score started this fall*

- *Review data on ATI skills modules; this requirement started one year ago*

- *Leadership ATI – Mesa is reviewing information from ATI*

    b. ATI Critical Thinking benchmark

- *Mesa followed up with ATI representative – no benchmark exists*

- *Timing – don't schedule the exit exam on the last day of N004*

    o *Multiple measurements including research papers – look at analysis for 1st and 3rd semester*

- *Invite ATI reps to come in and review components –* *Action item: schedule in November*

4. Course Matrix Update

    a. Where we are and where we need to go

- *Idea of having two separate meetings: Program Review and Instructional Design which meet on the same day but separately then come together to vote on interventions every other month at Nursing Curriculum Committee.*

- *Roles of each committee*

  - *Program Review – Look for problem areas where we are not meeting the SLOs*

  - *Instructional Design – propose interventions to solve problems*

- *Meetings*

  - *Each committee (Program Review and Instructional Design) meets one month and then both committees meet together at Nursing Curriculum Committee the next month.*

- *Members*

  - *Program Review – Mesa, Wetzel, Machado, Lin*

  - *Instructional Design – Adamski, Tisdale, Braun*

  - *Johnson and Cheung would like time to discuss and decide, will notify of their decision later.*

5. Total Evaluation Plan
   a. *Mesa will put hard copies of draft on faculty mail shelves.*
   b. *Faculty to mark up hard copy with revisions, suggestions and ideas.*
   c. *Return revised hard copy to Mesa mail shelf by September 18th.*

6. Getting ready for the BRN
   a. EVC Nursing Program curriculum
   - *Reviewed Philosophy, Conceptual Framework*

   - *Current revision in 2008; went from once a year enrollment to twice a year.*

   - *Key concepts integrated in each semester*

   - *Adaptation Model- created with various theorists in mind but does not follow or answer to just one.*

   - *Reviewed matrix table which aligns SLOs to PLOs to ILOs for each semester*

7. Other

      a. Need a volunteer for Day in the Park

- *Johnson volunteered; will follow up with Adamski for event outcomes and information*

- *Students will do blood pressures*

b. Skills Lab

- *We do not replace supplies in students' skills bags*

- *Contact Wetzel for ordering any skills lab supplies*

- *Faculty responsible for setting up own labs; may content Wetzel if needing assistance to find supplies*

- *Faculty responsible for cleaning up after their labs.*

- *Students should mimic "gel in" and "gel out"*

- *No food in skills lab; only drinks, in covered containers, are permitted in skills labs*

  - *Action item: Dean Herrera to make signs*

c. Faculty Handbook

- *Dean Herrera and Mesa drafting revisions*

- *Will be posted on QSEN website for faculty review in 2 weeks.*

8. Adjourn - *1635*

Appendix C: Faculty Report

State of California

Department of Consumer Affairs
Board of Registered Nursing

REPORT ON FACULTY
VERSION 2

(916) 322-3350

Name:
 	
Title:
 	
California RN license number and expiration date:
 	
BRN approved as:
  Classification (I, AI, CTA):
  Clinical area(s) (M/S, O, C, PMH, G) (from form EDP-P-02):
	Date of Appointment to Current Position:
	
	Indicate full-time or part-time status:
		Education preparation from initial degree/diploma through highest earned degree:
		
		(List degree and year received)
			Professional experience and continuing education activities for the past 5 Years:
			
			(List year(s), course title, and number of units/contact hours earned)
			
			(List employment other than as faculty)
				Teaching assignment(s)
				
				(List clinical and theory courses by number and title. Indicate whether responsible for theory, clinical, or both)
				
				If designated content expert, please indicate for which clinical area(s):

Tina Abraham
Title:
 	
California License:
  Number – 742111
  Expires – 9/30/2016
 	
Board Approved:
Classification: AI
Clinical Areas:
  Medical/Surgical
	12/29/2014
	
	Part-time Faculty
		BSN, 2008 – Bellarmine University, Louisville, KY	**Employment:**
			Telemetry/Cardiac, Regional Medical Center, San Jose, CA 2010-2013
			Trauma Med/Surg Regional Medical Center, San Jose, CA 2014-present
			Continuing Education:
			2014
			11/24 Principles of Teaching Adult Learners, 30 CEUs
			2015
				N001
				Fundamentals
				Clinical

			Critical Care Orientation, 30 CEUs	
Maureen M. Adamski **Title:** Assistant Director **California License:** Number- 346571 Expires-11/30/2015 **Board Approved:** **Classification:** I **Clinical Areas:** Medical/Surgical Geriatrics	1/2008 Full-time Faculty	**MS, 12/2007** – San Jose State, San Jose, CA **BSN, 1977** - Temple University, Philadelphia, PA	**Employment:** **Medical-Surgical-Telemetry,** O'Connor Hospital, San Jose, CA 1982-2008 St Louise Regional Hospital, Gilroy, CA 2008-2013 **Continuing Education:** **2015** 6/19 Advanced Debriefing Workshop, CINHC, 6.5 CEUs 5/26-5/28 QSEN National Forum 2015, Case Western University, 13.5 CEUs **2014** 10/2-10/3 Answering the Call to Lead, Assoc. of CA Nurse Leaders, 9.5 CEUs 6/27/14-Concept maps in Nursing Education, Nurse Tim Incorp, 1.25 CEUs 6/26/14-Best practices for Improving Student Success and Retention, parts 1,2,3, Nurse Tim Incorp, 3.75 CEUs 6/26/14-Item analysis made easy, Nurse Tim Incorp, 1.25 CEUs 4-3-4-2014	N002A Basic Medical-Surgical Theory & Clinical

			Transforming the Future of Nursing Education, Asilomar Conference, 8.25 CEUs	
			3/20-21/2014 ACEN Self Study Forum, 9.5 CEU's	
			1/10/14	
			Effective teaching Strategies to Improve Student Success featuring Starla Ewan, 6.5 CEUs	
			2013	
			9/20/13 Accreditation success: Meeting the New NLNAC/ACEN Standards,1.25CEUS	
			Academic Units	
			Fall 2013, Human Sexuality, 3 units	
			6/21/13 Annual Skills Day At St. Louise Regional Hospital, 6 CEUs	
			6/18/13-6/19/13 –PALS Provider Certification, 14 CEU's	
			6/14/2013 HIV Testing: The Cornerstone of HIV/AIDS Prevention. 0.75 CEU's	
			6/13/13 QSEN Faculty Development Institute and Two Year Follow-up Meeting, 5 CEUs	

			6/6/13 NIH Stroke Scale Training, 3 CEU's	
			5/13 The Nursing Profession: The Unconditional Surrender,7.75CEU's	
			3/13 ACLS Provider Course, 14 CEU's	
			2012	
			7/12 Creative Teaching Strategies for Nurse Educators, 6 CEUs	
			6/12 Annual Skills Day at St. Louise Regional Hospital, 6 CEUs	
			6/12 QSEN Faculty Development Institute and Two Year Follow-up Meeting, 10.25 CEUs	
			Spring/12-Genetics and Society,3 Units	
			2011	
			11/11 Studor Customer Service Training at St. Louise Hospital, 4 CEUs	
			Fall/11-Vietnamese Culture, 3 Units	
			7/2011 - Emerging Technologies in Nursing Education, 16.2 CEUs	

			6/2011 – SF Bay QSEN Faculty Development Workshop, 12.5 CEUs	
			6/2011 – PALS Provider Course, 14 CEUs	
			Spring/11-Religion: The Live Hypothesis, 3 Units	
			5/2011 ACLS provider Course, 14 CEUs	
			1/2011 Guidelines Adherence Improves Diabetes, 1 CEU	
			1/2011 ACOG Guidelines on HIV Infected Women, 0.5 CEUs	
			1/2011 Fewer Missed HIV Diagnosis, 1.25 CEUs	
			2010	
			11/2010 Anatomy of a Sentinel Event, 1 CEU	
			Fall/10-Asian/Pacific Islander Culture, 3 Units	
			Summer/10-Societal Problems, 3 Units	
			6/2010 Educare-a wound and skincare system, 8 CEUs	
			6/2010 SF Bay QSEN Faculty Development Workshop, 15 CEUs	

			6/2010 Interruptions Linked to Med Errors by Nurses, 0.5 CEU 6/2010 Dialysis Linked to Foot Ulcers in Diabetics, 0.5 CEU 4/2010 Asilomar: Back to Basics 8.5 CEUs Spring/10-Chicano/a Culture, 3 Units 1/2010 Stop HTN Now, 1 CEU 1/2010 Simplified 4 step Algorithm Improves BP, .25 CEUs 1/2010 Give BP Drugs to All, 0.25 CEU 1/2010 DHHS New Guidelines for Antiretrovir, .5 CEUs 1/2010 Who Issues New HIV Recommendations, .5 CEUs	
Garry Johnson **Title:** **California License:** Number - **678689** Expires – 4/30/2016 **Board Approved:** **Classification:** I **Clinical Areas:**	8/2013 Full-time faculty	**DHSc**-**2013** A.T Still University, Kirksville, MO **MSN**-**2008** University of Phoenix, Northern Calif. Campus **BSN**-**2004**	**Employment** **2009- Present** Global Health Coordinator Nursing Service Mission: Laos **2007-Present** Adjunct Faculty	N001 Fundamentals Theory and Clinical

| Medical/Surgical Geriatrics | | University of British Columbia, Vancouver, BC

ADN-2002

Langara College, Vancouver, BC | Samuel Merritt University, San Mateo, CA.

Continuing Education
2015

Critical Care RN (CCRN-K)

January: CPR, ACLS Recertification: 8.25 CEU's

May: Medical Surgical Nursing Conference SSF: 16 CEU's

Men in Nursing Conference 6 CEU's

June: NCSBN Item Writing 32 CEU's

2014

Medical Surgical Certification (CMSRN)

6/2014: Medical Surgical Nursing Conference SSF: 16 CEU's

Men in Nursing Conference 6 CEU's

NCSBN Item Writing 32 CEU's

2013 | |

| | | | Doctoral Program 30 CEU's
AMSN Conference: 17 CEU's
QSEN Conference 6 CEU's

2012

Doctoral Program 45 CEU's
AMSN Conference 30 CEU's

2011

Doctoral Program: 45 CEU's
QSEN Conference: 12 CEU's

2010

Doctoral Program: 45 CEU's
QSEN Institute: 12 CEU's | |
| **Marta Leirer**
Title:

California License:
  Number - 476338
  Expires – 3/31/14

Board Approved:
Classification: AI | 8/2005
Part-time Faculty | **MA, 2001 –** California State University, Dominguez Hills
AD, 1992 – Evergreen Valley College, San Jose, CA
BS, 1980 – Teachers' College for the Handicapped, Budapest, Hungary | **Employment:**
SCVMC Medical/Surgical, 1992-present
Continuing Education:
2011
 11/11 PCI for Med/Surg Telemetry, 4 CEUs
 11/11 Med/Surg Telemetry, 21 CEUs | N004
Advanced Medical-Surgical
Clinical |

Clinical Areas:			10/11 Principles of Teaching Adult Learners: A Self Learning Module, 30 CEUs	
Medical/Surgical				
Geriatrics			8/11 Creating a Healthy Work Environment, 7 CEUs	
			3/11 Med/Surg Competency Day, 6 CEUs	
Nancy Lin	1/2008	**MSN – 2007,** San Jose State University, San Jose, CA	**Employment:**	N003
Title:	Full-time Faculty		Emergency Room**,** Kaiser San Jose, San Jose California 1/2000- Present	Advanced Pediatrics and Medical-Surgical Nursing
California License:		**BSN – 1996** San Francisco State University, San Francisco, CA		
Number - 530369			**Continuing Education:**	
Expires – 4/30/16			**2015**	Theory & Clinical
			February Preventable Adverse Events, 14 CEUs	
Board Approved:				
Classification: I			February The Basics of Pharmacology for Nurses, 12 CEUs	
Clinical Areas:				
Gerontology			February Women and Heart Disease, 12 CEUs	
Advanced Med/Surg				
Pediatrics			February Congestive Heart Disease, 10 CEUs	
			February Pediatric Diabetes, 8 CEUs	

			February Trauma Series: Polytrauma, 16 CEUs	
			February Lower Back Pain, 14 CEUs	
			February Depression and Anxiety, 4 CEUs	
			2014	
			9/1 Pharmacology Basics, 4 CEUs	
			July Healthy Aging, 10 CEUs	
			July Helping the Obese Patient Find Success, 20 CEUs	
			July Wound Management and Healing, 30 CEUs	
			4/3 Multi-modal Pain Management and Enhanced Recovery After Surgery, 2 CEUs	
			3/3 ATI Training: Custom Assessment Building and Reporting, 2 CEUs	
			1/10 Effective Teaching Strategies to Improve Student Success, 6.5 CEUs	
			2013	
			8/19 Med/Surg Nursing Practice and Certification Review Course, University of Washington, 50 CEUs	
			1/13 Creative Teaching Strategies Workshop,6CEus	
			2011	

			11/11 Annual Stroke Education for ICU/ED 2011-STR	
			1/11 ACLS Refresher Course, 8 CEUs	
			2010	
			7/10 2010 Stroke Education for ED and ICU RNs, 8 CEUs	
			8/10 Emergency Nursing Skills Review, 8 CEUs	
			12/10 PALS Renewal Course, 6 CEUs	
Rozanne Lopez **Title:** **California License:** Number - 244798 Expires – 6/30/14 **Board Approved:** **Classification:** I **Clinical Areas:** Fundamentals Medical/Surgical Geriatrics	8/1981 Full-time Faculty	**MSN, 8/1981 –** San Jose State University, San Jose, CA **BSN, 5/1974 –** University of California, San Francisco, San Francisco, CA	**Continuing Education:** **2014** October, National Association of Hispanic Nurses Annual Retreat, 4 CEUs June, Healthy Aging, 10 CEUs June, Helping the Obese Patient Find Success, 20 CEUs May, Mandated Reporter Training, 2 CEUs April, COADN Asilomar Conference: Transforming the Future of Nursing Education, 8.25 CEUs January, Effective Teaching Strategies to Improve Student Success, 6.5 CEUs	N001 Fundamentals Theory & Clinical

			2013	
			January, Memory Aging and Sleep, 6 CEUs	
			2012	
			8/12 Photoshop, 3 semester units	
			5/12 Nursing in Transition for Student Success, 8 CEUs	
			2/12 Ebersole and Hess Gerontological Nursing and Healthy Aging Home Study Course , 28 CEUs	
			2011	
			8/11 SimChart Training	
			7/11 Emerging Technology in Nursing Education, 16 CEUs	
			7/11 Communication and Cultural Considerations, 1 CEU	
			5/11 ADN Faculty Conference, 8.5 CEUs	
			2010	
			9/10 Perspectives on Quality in Nursing Care, 8.75 CEUs	
			4/10 Back to Basics, 8.5 CEUs	
Susana Machado **Title:**	8/2009 Part-time Faculty 1/2013	**MSN, 2009** San Jose State University, San Jose, CA.	**Employment:** Santa Clara Valley Medical Center, OB RN, 2007-10/2010	N002B OB Nursing Theory and Clinical

California License: Number – 534591 Expires – 7/31/15 **Board Approved:** **Classification:** I **Clinical Areas:** Obstetrics	Full-time Faculty	**BSN, 2007** University of Phoenix, San Jose, CA. **ADN, 1997** Gavilan College, Gilroy, CA.	O'Connor Hospital, OB RN, 1/2012-1/2014 **Continuing Education:** **2015** 6/13-6/17 AWHONN 2015 Annual Convention, 19.5 CEUs **2014** 7/15 Revolutionizing Nursing Education: Facilitating Learning in a Connected Age, 13 CEUs 5/21 Legal Risks as a Nurse, 5 CEUs 5/21 Multigenerational Nursing Teams, 5 CEUs 5/20 Dealing with Disruptive People, 3 CEUs 5/19 Social Media for Health Care Providers, 5 CEUs 5/18 Mentoring and Orienting Faculty, 1.75 CEUs 5/18 Academic and Practice Partnerships, 2.75 CEUs 5/17 To Friend or Not to Friend: Implications of Social Media and Electronic Media in Nursing Education, 1.75 CEUs	Content Expert for OB Nursing (Has clinical experience in content area to equal 30 eight-hour shifts within the last 3 years.)

		5/17 Nuts & Bolts of Clinical Education/Clinical Reasoning Paperwork, 1 CEUs	
		5/17 Transforming Nursing Curricula and Nursing Education Research, 2 CEUs	
		5/17 Shoulder Dystocia, 1.25 CEUs	
		5/17 Safe Infant Sleep, 1.25 CEUs	
		5/17 Perinatal Staffing and Oxytocin Administration, 1.25 CEUs	
		5/17 Perinatal Risk Management, 1.25 CEUs	
		5/17 Opioid Use in Pregnancy, 1.25 CEUs	
		5/17 Obstetric Hemorrhage, 1.25 CEUs	
		5/17 Obesity in Pregnancy, 1.25 CEUs	
		5/17 Nursing Interventions that Prevent Newborn Death and Injuries, 1.25 CEUs	
		5/17 Nursing Care & Management of the 2nd Stage of Labor, 1 CEU	
		5/17 Newborn CCHD Screening Using Pulse Oximetry, 1.25 CEUs	
		5/17 New Research & Strategies to Promote & Support Breastfeeding, 1.25 CEUs	

			5/17 Making Sense of Preeclampsia Lab Values, 1.25 CEUs	
			5/17 Electronic Fetal Heart Monitoring, 1.25 CEUs	
			5/17 Cesarean Surgical Complications, 1.25 CEUs	
			5/17 Care of Newborns Prenatally Exposed to Opiates, 1.25 CEUs	
			5/16 Management of Neonatal Pain and Discomfort, 1.25 CEUs	
			5/16 Hogs or Kisses: Capitalize on the Key Issue of Learning, 1.75 CEUs	
			5/16 Hit the Learning Jackpot, 1.75 CEUs	
			5/16 The Neuroprotective Role of Magnesium Sulfate, 1.25 CEUs	
			5/16 Advanced Maternal Age: Perinatal Challenges for the Mature Gravida, 1.25 CEUs	
			5/15 Treatment of Maternal Depression, 1.25 CEUs	
			5/15 The Fetus and Steroid, 1.25 CEUs	
			5/15 Perinatal Trends, 1.50 CEUs	
			5/15 Obesity and Pregnancy, 1.25 CEUs	

			5/14 Strategies to Infuse the QSEN Competencies into Classroom and Clinical Teaching, 1.75 CEUs	
			5/14 Leading Nursing Education During Challenging Transformations, 1.75 CEUs	
			5/13 Tips and Strategies for Integrating Informatics Into an Undergraduate Program, 1.75 CEUs	
			5/13 Conquering Conceptual Based Teaching in the Classroom and Clinical Area, 1.75 CEUs	
			5/11 Teaching Thinking, 1.75 CEUS	
			5/11 Teaching Students to Manage Difficult Interactions and Resolve Conflict, 1.75 CEUs	
			5/8 Flipping the Classroom, 1.75 CEUs	
			5/8 Curriculum Evaluation, 1.75 CEUs	
			5/8 Creating Civility to Promote Healthy Academic Work Environments, 1.75 CEUs	
			5/8 Bringing the Classroom to Life, 1.75 CEUs	
			5/8 Faculty-to-Faculty Incivility, 1.75 CEUs	
			5/7 The Professional's Role in Perinatal Bereavement, 1.25 CEUs	

			5/6 Medication Treatment Recommendations for Preeclampsia, 1.25 CEUs	
			5/6 Enhancing Management of Preeclampsia, 1.25 CEUs	
			5/5 Demystifying DIC, 1.25 CEUs	
			5/4 Magnesium Sulfate: Emerging Research, 1.25 CEUs	
			4/17 New Evidence-Based Neonatal Skin Care of the High Risk Newborn, 1.25 CEUs	
			2013	
			12/27/13 Issues in Breastfeeding, 15 contact hrs	
			12/25/13 Dysfunctional labor, 15 contact hrs	
			12/24/13 The Post Partum Woman with Complications, 15 contact hrs	
			12/24/13 Common Newborn Dermatomes, 5 contact hrs	
			12/24/13 Routine newborn care, 10 Contact hrs	
			12/23/13 Nitrous Oxide as Labor analgesia, 5contact hrs	
			12/22/13 Neuraxial Analgesia and Anesthesia in Obstetrics,5 contact hrs	

			6/1/13 Terminology and management of EFM Tracings,15CEU's	
			5/30/13 Issues in Professional Licensing, 5 CEUs	
			5/28/13 Infant Bonding, 5 CEUs	
			3/13 AWHONN, Myths & truths of Amniotic Fluid Embolism/Anaphylactoid Syndrome of Pregnancy, 1.25 CEUs	
			2011	
			8/15/11 Spilt Second Rapport 1 CEU	
			2010	
			9/10 Simulation Training, 6.75 CEUs	
Sheila Mecwan **Title:** **California License** Number – 566431 Expires – 12/31/15 **Board Approved:** **Classification:** I **Clinical Areas:** Med/Surg	1/2015 Part-time Faculty	**MSN, 2007** San Jose State University, San Jose, CA **BSN, 1993** **ADN, 1990**	**Employment** **Endoscopy RN,** VA Hospital,12/10-present **Faculty,** Mission College 2011-2014 **Continuing Education** **2015** June Medical Marijuana: Ischemic Stroke & Chronic Pain Syndromes, 30 CEUs **2013**	N001 Fundamentals Clinical

			November Caring for the Poisoned Patient, 5 CEUs	
			November Diabetes: An Opportunity to Prevent Diabetes, 15 CEUS	
			November Sleep Disorders, 10 CEUs	
Felicia Mesa **Title:** Assistant Director **California License:** Number - 535572 Expires – 7/31/17 **Board Approved:** **Classification:** I **Clinical Areas:** Gerontology Advanced Med/Surg Mental Health	8/2003 Full-time Faculty	**Post-Master's Nursing Education, 2007** San Jose State University, San Jose, CA **MS, 2002,** University of California, San Francisco, CA **BSN, 1999 –** San Jose State University, San Jose, CA **AS, 1997,** Evergreen Valley College, San Jose CA	**Medical-Surgical**, St Louise Hospital, Gilroy, CA 12/1982-7/2014 **Continuing Education:** **2015** 4/3 & 5/1 CCRN Review Course 12 CEUs 2/26 Antisocial, Borderline, Narcissist, & Histrionic Effective Tx for Cluster B Personality Disorders, 6 CEUs **2014** 8/13 Multidisciplinary Team Assault Crisis Training, SCVMC, 7 CEUs 8/12 Psychiatric Trends; Current Trends in Dx & Tx, 30 CEUs 8/6 Nursing Care of the Older Adult, 25 CEUs 3/25 Diabetic Hypoglycemia, 5 CEUs 3/25 Diabetes and Renal Disease, 5 CEUs	N004 Advanced Medical-Surgical/ Geriatric/ Mental Health/ Leadership & Management Nursing Theory & Clinical

			3/25 Hyperglycemia and Wound Management, 5 CEUs	
			3/25 Pressure Ulcers and Skin Care, 5 CEUs	
			3/25 Treating Pressure Ulcers and Chronic Wounds, 5 CEUs	
			2013	
			6/18-6/19 PALS, 14 CEUs	
			3/21-22/13 ACLS Provider, 14 CEU's	
			1/24/13 Cardiovascular Nursing: A comprehensive Overview, 30 CEUs	
			2012	
			Academic Courses	
			EDIT-024 Women in Technology 3 Units	
			ETH -030 Chicana/o Culture 3 Units	
			ETH-042 Asian American Culture 3 units	
			ETH-040 Vietnamese American Culture 3units	
			SOC-011 Social problems 3 units	
			2/12Autoimmune Diseases, 5 CEUs	
			2/12 Clostridium Difficile: superbug 5 CEUS	

			6/6/12 applied EKG Interpretation, 6.3 CEUs	
			2012Cardiovascular Nursing: Comprehensive Review, 30 CEUs	
			2011	
			7/11 Emerging Technologies in Nurse Education, 13.5 CHs	
			7/11 Medical Surgical Skills Day, 4 CHs	
			6/11 Pediatric Advanced Life Support ,14 CEUs	
			6/11SFBA QSEN Faculty Development,6.5 CEUs	
			5/11 Advanced Cardiac Life Support, 14 CHs	
			2010	
			6/10 Medical Surgical Skills Day 4 CHs	
			6/10 Educare Wound and Skin Care, 8 CHs	
			4/10 ADN Faculty Conferend4e: Back to Basics, 8.5 CH	
Onyi Nwogu **Title:** **California License:**	8/2011 Part-time Faculty	**MSN, 2010**-San Jose State University, San Jose, CA. **BA,1986**	**Employment** Utilization Review Coordinator RN May 2014-present	N002B Maternity Nursing Clinical

Number – 660855 Expires – 8/31/15 **Board Approved:** **Classification:** AI **Clinical Areas:** Obstetrics		**Chemistry/Biochemistry,**- San Jose State University, San Jose, CA. **ADN, 2003**-DeAnza College, Cupertino, CA.	SCVMC, Labor & Delivery,2005-April 2014 **Continuing Education:** **2015** 04/2015 Leadership and Management for Every Nurse, 2nd Edition/30 contact hours 03/2015 S.T.A.B.L.E/7.5 contact hours **2014** 5/16/14-Medical Screening and Treatment of eating Disorder, 2 CE units **2013** 11/12-13/13- Inpatient Ob Course- 14 CE units 11/6/13- L&D OB Update,7.5 CE units 11/11/13-OB Emergency,7.5 CE units 7/9/13- Quality Assessment and Performance improvement (QAPI) Seminar,6.0 CE units	

			6/4/13-**"**Electronic Documentation 2013:Legal, Clear &Concise" "Taking Charge: The role of Professional Charge nurse",8.0 CE units	
			2012	
			7/11/12-Creative Teaching Strategies for the Nurse Educator,6 CE Units	
			6/29/12-PESI OB Emergencies,6.3 CE units	
			6/22/12- ACLS Renewal Course,6 CE units	
			4/3/12- L&D OB Update,7.5 CE units	
			2011	
			9/16-17/11 OB ultrasound Certification-1st, 2nd & 3rd Trimester, 16 CEUs	
			7/11/11 Arthritis, Backache, & Bone Disease, 6 CEUs	
			6/11/11 SCVMC Charge Nurse Class, 7 CEUs	
			5/31/11 Labor and Delivery OB Update, 7.5 CEUs	

			2010	
			11/10 In-Patient OB Class, 14 CEUs	
			3/10 SCVMC OB Update, 7 CEUs	
			1/10 Neonatal Resuscitation Program, 8 CEUs	
Rachel Rivera **Title:** **California License:** Number – 595375 Expires – 2/28/14 **Board Approved:** **Classification:** AI **Clinical Areas:** Medical/Surgical	10/2004- Part-time Faculty	**BSN-2003,** San Jose State University, San Jose, CA. **ADN-2001,** Evergreen Valley College, San Jose, CA.	**Employment:** SCVMC, Medical/Surgical, 2002-present, staff RN **Continuing Education:** **2011** 12/11 Pediatric Advanced Life Support Renewal, 6 CEUs 9/11 Road to Excellence: Shared Governance, 6 CEUs 3/11 Women and Stress, Pain Management, 2 CEUs **2010** 10/10 Western Region Burn Conference, 10 CEUs 2/10 Light of the Body Workshop, 11 CEUs	N003,N001 Medical/Surgical Nursing-Clinical Fundamentals of Nursing Clinical Pediatric Nursing

Zenebu Tegegne
Title:
 	
California License:
  Number – 646680
  Expires – 3/30/16
 	
Board Approved:
Classification: AI
Clinical Areas:
Medical/Surgical
	12/24/14
	Part-Time Faculty
		BSN, 2004	**Employment:**
			SCVMC, Medical/Surgical 2004 – present, staff RN
			Continuing Education:
			2014
			November ACLS/BLS, 6 CEUs
			September Sepsis: A Race Against Time, 7 CEUs
			August End of Life, 12 CEUs
			February Pressure Ulcers, 5 CEUs
			2013
			September Taking the Shock Out of Sepsis, 7 CEUs
				N002A
				Medical/ Surgical Nursing
				Clinical

Barbara Tisdale
Title:
 	
California License:
  Number - 358665
  Expires - 1/31/15
 	
 Board Approved:
Classification: I
Clinical Areas:
  Gerontology
	8/2006
	Full-time Faculty
		MSN, 1987 - University of California, San Francisco, CA
		BA, 1977 – Dickinson College
		AA, 1982 – DeAnza College, San Jose**,** CA
			Continuing Education:
			2015
			4/30-5/1 CCRN Review Course, 12 CEUs
			3/7 Management of the Patient with Stroke, 6 CEUs
			2/26 Cluster B Personality Disorders, 6 CEUs
			2014
			1/7 Stroke: Making the Transition to Chronic Care Management, 1 CEU
				N004
				Advanced Medical-Surgical/ Geriatric/ Mental Health/ Leadership & Management Nursing
				
				Theory & Clinical

Advanced Med/Surg Mental Health			1/7 Veteran Suicide-Addressing the Intensifying Battle, 1 CEU	Content Expert for Mental Health Nursing
			1/7 Case Challenges in Early Alzheimer's Disease, 2.25 CEUs	(Has course work in content area equivalent to 30 hours of continuing education and clinical experience teaching in the content area for 6 years.)
			1/10 Effective Teaching Strategies to Improve Student Success, 6.5 CEUs	
			3/10 The Two Sides of Stroke, 1 CEU	
			3/28 Alarm Fatigue Can Endanger Patients	
			5/9 CBT: Cognitive Behavioral Therapy Techniques for Everyday Clinical Practice, 6 CEUs	
			5/30 Teaching Students How to Think Like a Nurse, 1 CEU	
			6/5 Fostering Civility in Nursing Education, 1 CEU	
			6/23 Adolescent Drinking, 1 CEU	
			6/23 Obsessive Compulsive Disorder, 1 CEU	
			6/23 Factitious Disorder, 1 CEU	
			6/24 Successful Strategies in Teaching Pharmacology, 1 CEU	
			6/27 Transition into Practice, 1 CEU	
			7/11 Resuscitating Your Class: Strategies to Engage Students, 1 CEU	

			7/30 Psychopharmacology Update, 1.25 CEU
			2013
			12/13/13 Updates In Stroke Detection and Treatment, 1 CEU
			7/20/13 Effective Communications with Patients,1 CEU
			7/19/13 Concept Based Teaching-Six Strategies To Enhance Learning, 1.25 CEUs
			7/1/13 Compulsive Hoarding, 1 CEU
			7/1/13 Stroke Alert 1 CEU
			5/20/13 Personality Disorders- The Challenges of the Hidden Agenda,6 CEU
			5/20/13 The Nursing Profession- The Unconditional Surrender Conference, 7.75 CEUs
			1/2013 Domestic Violence 2011, 2 CEUs
			1/2013 Wound Management and Healing 30 CEUs
			2012
			7/12 Psychopharmacology: What you need to know about Psychiatric Medications, 6 CEUs

			7/12 Gerontological Nursing and Healthy Aging, 28 CEUs	
			6/12 QSEN Faculty Development Institute and Two Year Follow-up Meeting, 10.25 CEUs	
			5/12 Nursing in Transition for Student Success, 8 CEUs	
			1/12 Crisis Intervention, 1 CEU	
			1/12 Psychiatric Emergencies in the ED, 1 CEU	
			1/12 Mental Health in Older Adults, Part 1 and 2, 2 CEUs	
			1/12 Clearing up Confusion About Delerium 1 CEU	
			1/12 Co-Occurring Mental and Substance Use Disorders, 1 CEU	
			1/12 Interventional Rescue for Stroke, 1CEU	
			1/12 Parkinson's Disease, 1 CEU	
			2011	
			7/11 Calming the Cognitively Impaired, 1 CEU	
			7/11 Emerging Technology in Nursing Education, 16 CEUs	
			7/11 Social Anxiety Disorder Restricts Lives 1 CEU	

			7/11 Tourette's Syndrome, 1 CEU	
			6/11 PTSD, Part 1 & 2, 2 CEUS	
			6/11 QSEN Followup, 12.5 CEUs	
			5/11 ADN Faculty Conference, 8.75 CEUs	
			2010	
			11/10 Glaucoma, 1 CEU	
			11/10 Outlook Positive for Today's Cataract Patients, 1 CEU	
			6/10 Brain Attack part 2, 1 CEU	
			6/10 Brain Attack part 1, 1 CEU	
			6/10 Autoimmune Disease, 1 CEU	
			6/10 ADHD, 1 CEU	
			4/10 Back to Basics, 8.5 CEUs	
			1/10 Anxiety Disorders, 1 CEU	
Lien Tran **Title:** **California License:** Number- 755420 Expires- 11/30/2014 **Board Approved** **Classification: AI** **Clinical Areas:** Medical/surgical	1/2013 Part-time Faculty	**BSN,2009** San Jose State University, San Jose, CA	**Employment:** Santa Clara Valley Medical Center (SCVMC), Medical Surgical,2009-present Clinical Nurse II **Continuing Education:** **2015** 5/6 SCVMC Med/Surg Competency, 6 CEUs	N004 Advanced Medical-surgical Clinical

Geriatrics			2/25 Orthopedic Nursing: Caring for Patients with Musculoskeletal Disorders, Western Schools, 30 CEUs	
			2014	
			2/18 SCVMC Charge Nurse Class, 7.5 CEUs	
			2013	
			2/6 Nursing Care of the Older Adult, 25 CEUs	
			2012	
			10/24Charge Nurse Class,7 CEUs	
			8/31-10/29 Critical Care Orientation Class, 5 CEUs	
			6/7 Clinical Partner Class, 8 CEUs	
			2010	
			11/16 The Ins and Outs of Patients Teaching, 6 CEUs	
			10/15 RN Practice: Neuro Class for MED/SURG New- Grad, 6.5 CEUs	
Susan Wetzel **Title:** **California License:** Number - 411657 Expires – 3/31/15	8/2006 Full-time Faculty	**MS, 1994** California State University, San Jose, CA **BSN, 1987** – California State University, Sacramento, CA	**Continuing Education:** **2015** 6/19 Advanced Debriefing Workshop, CINHC, 6.5 CEUs 3/19/15 Mandated Reporter Trainer VMC, 2 CEU	N004 Advanced Medical-Surgical/ Geriatric/ Mental Health/ Leadership & Management Nursing

Board Approved:			6/1/15 Med/surg competency VMC, 6 CEU	Theory & Clinical Content Expert for Geriatric Nursing
Classification: I			**2014**	
Clinical Areas:			8/15/14	(Has course work in content area
Gerontology			Maternal-Neonatal Nursing	equivalent to 30
Medical/Surgical			Homestead Schools, Inc	hours of continuing
Mental Health			30 CEU	education and clinical
			(provider #9515)	experience teaching
				in the content area
			8/1/14	for 6 years.)
			Understanding the needs of The Dying	
			PESI, speaker David Kessler	
			6 CEU	
			(Provider #13305)	
			6/25/-6/26/14-Human Patient Simulation 2.0, No Calif. Clinical Simulation Center, 13 CEUs	
			6/10-6/11/14- ACLS Provider Course, Heartshare Training Services, 12 CEUs	
			6/5/14-CCRN Review Course, Enloe Hospital, Chico,Ca 11 CEUs	
			5/9/14- Cognitive Behavioral Therapy Techniques for Everyday Clinical Practice, PESI, 6 CEUs	
			4/3-4/4/14- COADN Asilomar Conference. Transforming the Future of Nursing Education, 8.25 CEUs	

			3/3/14-Custom assessment builder and Reporting, ATI 2CEUs	
			2013	
			10/13/13- Med Surg Competency day, Santa Clara Valley Medical Center,4 CEU	
			8/19/13 Using the DSM-5 for revolutionizing Diagnosis and Treatment, CMI Education Institute 6CEU's	
			6/10/13-8/19/13-Medical-Surgical Nursing Practice& Certification Review Course, University of Washington School of Nursing,50CEU's	
			GERI Content	
			4/21/13 Alzheimer Disease Diagnosis: Long-term Care FacilityPerspectives,ANCC,1.50 Hours	
			4/21/13 Can Stress Increase Stroke Risk?, ANCC, 0.25hrs	
			4/21/13 Treatment of Diabetes in Older Patients, ANCC, 0.25Hrs	
			4/21/13 New USPSTF Recommendations for Prevention of falls in Elderly patients, ANCC, 0.25Hrs	
			4/21/13 The Nurse View: Implementing Solutions for older	

			Patients with Multiple Myeloma, ANCC ,0.50Hrs	
			4/21/13 Guidelines issued for care of Elderly Surgical Patients, ANCC, 0.25Hrs	
			4/21/13 Depression and Risk for Dementia in Oldest Old, ANCC, 0.25Hrs	
			4/13,Gerontological Nursing and Healthy Aging, Anderson Cont. Education,28 CEUs	
			2012	
			8/12 Prevention of Medical Errors, 2 CEUs	
			7/12 Debriefing Class, Rural Northern California Clinical Simulation Center, 6 CEUs	
			7/12 Scenario Class, Rural Northern California Clinical Simulation Center, 6 CEUs	
			7/12 Moulage Training Class, Rural Northern California Clinical Simulation Center, 3 CEUs	
			5/12 Nursing in Transition for Student Success, 8 CEUs	
			3/12 Rash, Pain and Dyspnea progressing to Respiratiory Failure, .5 CEU	

			3/12 Tamoxifen Reduces Death Risk in ER+ Breast Cancer Patients,.25 CEU	
			3/12 A Patient-Centered Approach to Successful Management of Chronic Gout, .5 CEU	
			3/12 Rheumatoid Arthritis: A Practical Guide for the Primary Care Provider, 1.25 CEU	
			2/12 Ethics: A Nursing Perspective, 1 CEU	
			1/12 ACLS Certification Course, 12 CEUS	
			2011	
			5/11 ADN Faculty Conference, 8.75 CEUs	
			2010	
			8/10 Santa Clara Valley Medical Center, Perspective on Quality in Patient Care, 1 CEU	
			8/9/10 Homestead Schools Inc: Breast Cancer, 30 CEUs	
			6/10 Evergreen Valley College: Moodle Bootcamp, 30 CEUs	

Appendix D – Nursing Program Productivity

Note: unable to isolate courses for nursing program only (N001, N002A, N002B, N003, N004) as filtered CROA results on 11/30/16 include supplemental nursing courses (N131A, N131B, N132, N119) and allied health CNA/HHA program (N109)

1. Number of sections and courses for all nursing courses by term

Enrollment Term	Subject	Number of Active Sections	Number of Courses
2012SP	NURS	27	9
2012SP	**Total:**	**27**	**9**

Enrollment Term	Subject	Number of Active Sections	Number of Courses
2012FA	NURS	26	9
2012FA	**Total:**	**26**	**9**

Enrollment Term	Subject	Number of Active Sections	Number of Courses
2013SP	NURS	27	9
2013SP	**Total:**	**27**	**9**

Enrollment Term	Subject	Number of Active Sections	Number of Courses
2013FA	NURS	26	9
2013FA	**Total:**	**26**	**9**

Enrollment Term	Subject	Number of Active Sections	Number of Courses
2014SP	NURS	26	9
2014SP	**Total:**	**26**	**9**

Enrollment Term	Subject	Number of Active Sections	Number of Courses
2014FA	NURS	26	9
2014FA	**Total:**	**26**	**9**

Enrollment Term	Subject	Number of Active Sections	Number of Courses
2015SP	NURS	27	9
2015SP	**Total:**	**27**	**9**

Enrollment Term	Subject	Number of Active Sections	Number of Courses
2015FA	NURS	28	10
2015FA	**Total:**	**28**	**10**
	Total:	**213**	**16**

2. Measures for nursing courses by term

	2012SP		2012FA		2013SP		2013FA		2014SP		2014FA		2015SP		2015FA	
	Measure	Pct Change from Previous Yr	Measure	Pct Change from Previous Yr	Measure	Pct Change from Previous Yr	Measure	Pct Change from Previous Yr	Measure	Pct Change from Previous Yr	Measure	Pct Change from Previous Yr	Measure	Pct Change from Previous Yr	Measure	Pct Change from Previous Yr
Capacity Pct	73.41%		65.26%		66.34%	-9.63%	67.32%	3.15%	70.24%	5.88%	69.51%	3.26%	65.37%	-6.94%	62.68%	-9.82%
Completion Rate	95.41%		88.39%		90.91%	-4.72%	93.03%	5.25%	93.60%	2.96%	92.43%	-0.64%	94.56%	1.02%	92.26%	-0.19%
Success Rate	88.52%		83.87%		84.85%	-4.15%	87.11%	3.86%	87.54%	3.17%	88.82%	1.96%	89.12%	1.80%	88.10%	-0.81%
WSCH	1725.69137		1553.31285		1583.56439	-8.24%	1635.42083	5.29%	1679.62696	6.07%	1666.0331	1.87%	1585.33923	-5.61%	1536.11409	-7.80%
FTES	53.578519		48.226606		49.165833	-8.24%	50.77584	5.29%	52.148352	6.07%	51.726272	1.87%	49.220934	-5.61%	47.692623	-7.80%
FTEF	6.8174		6.6674		6.593	-3.29%	6.816	2.23%	6.9835	5.92%	6.818	0.03%	6.8164	-2.39%	5.8584	-14.07%
Productivity	253.130427		232.971301		240.188744	-5.11%	239.938502	2.99%	240.513633	0.14%	244.358037	1.84%	232.5772	-3.30%	262.207103	7.30%
Student Faculty Ratio	7.85908396		7.23319525		7.45727787	-5.11%	7.44950704	2.99%	7.46736622	0.14%	7.58672221	1.84%	7.2209574	-3.30%	8.14089564	7.30%

Productivity

FTES

Capacity Pct

Capacity Percentage @ Census

Enrollment Term

● Capacity Percentage @ Census

Course Completion and Success

Completion Rate & Success Rate

Enrollment Term

● Completion Rate
● Success Rate