Comprehensive Instructional Program Review Criteria- 2017/2018

Note to Preparers:

Please complete this form that includes the Program Review criteria for the comprehensive instructional program review. One of the major functions of Program Review is to ensure that all work units of the Evergreen Valley College are aligned with its goals. The college's goals are set forth in its Mission and Strategic Initiatives, which are expressed in the narrative below.

Program relevant data sets are provided- via email- by the campus researcher or the Dean of Research, Planning and Institutional Effectiveness. Please see your Dean if you need additional help.

Additional information, including a submission timeline (**Due December 1st for feedback)** and samples of recent Program Reviews, are available on the college website http://www.evc.edu/discover-evc/institutional-effectiveness/program-review. If you have any questions, please feel free to contact any member of EVC's Institutional Effectiveness Committee (IEC).

After your submission to IEC, members of the committee will provide feedback to assist you in preparing a final version. The review committee will consist of IEC members and an optional external reader of your choice. The review committee will make a recommendation and your Program Review will precede to College Council and the EVC President for his/her final approval. Completed/approved Program Reviews will be eligible to participate in resource allocation through the College Budget Committee.

Evergreen Valley College's Mission:

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

Strategic Initiatives:

1. Student-Centered: We provide access to quality and efficient programs and services to ensure student success.
    Areas of focus are:
    - Access
    - Curriculum and programs
    - Services
2. Community Engagement: We will transform the college image and enhance partnerships with community, business and educational institutions.
    Areas of focus are:
    - Increase visibility
    - Develop strategic partnerships
    - Building campus community
3. Organizational Transformation: We create a trusting environment where everyone is valued and empowered.
    Areas of focus are:
    - Communication
    - Employee development
    - Transparent Infrastructure

Department/Program Name: Nurse Assistant/Home Health Aide

Year of Last Comprehensive Review: 2014

Year of Last Mini Review, if applicable: 2016

Preparers' Name(s): Elaine Amo Kafle, Ph.D., MS, RN

Area Dean: Lynette Apen, MS, RN (Acting Dean, 2017-2018); Antoinette N. Herrera, EdD, MSN, RN

Overview of the Department/Program

1. **Provide a brief summary of your program. Please include a brief history and discuss any factors that have been important to the program's development.**

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

   According to the United States Department of Labor, Bureau of Labor Statistics, employment of nursing assistants is projected to grow 17 percent from 2014 to 2024, much faster than the average for all occupations. (http://www.bls.gov/ooh/healthcare/nursing-assistants.htm).
   In addition, the job outlook for HHAs for the same time frame is expected to increase by an even higher percentage of 38% (https://www.bls.gov/ooh/healthcare/home-health-aides.htm).

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

   Requirements for the EVC course are: High School Diploma or GED, valid social security number, Physical Health Exam clearance, TB exam clearance, current CPR for Healthcare Provider, and Background Clearance. The course is open to all students with the aforementioned requirements and is based on open enrollment. The course is offered in the spring or fall semesters and can accommodate 30 (2 clinical sections with 15 students per section) students per semester. During the fall 2011 semester, a 3rd clinical section was added as a pilot to accommodate the many waitlisted students. The last semester to have 3 clinical sections was Spring 2017, due to sections not filling to capacity.

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

2. **Please provide an update on the program's progress in achieving the goals (3 years) set during the last comprehensive program review.**

One of the goals set during the last comprehensive program review was for state exam results to remain at or above 90%, with students successfully finding jobs upon completion of the course and passing the state exam. Based on results for initial (i.e. first-time test taking) pass rates, we have met the 90% benchmark 6 out of the 8 semesters assessed:

Fall 2013: 94% (increased to 100% with second-time testers)

Spring 2014: 85% (increased to 89% with second-time testers)

Fall 2014: 100%

Spring 2015: 96.8%

Fall 2015: 95%

Spring 2016: 98% (increased to 100% with second-time testers)

Fall 2016: 85% (increased to 91% with second-time testers)

Spring 2017: 97% (increased to 100% with second-time testers)

At least 63 students who have completed the course during the fall 2013 through spring 2017 semesters have gained employment in the healthcare field. It remains a challenge to obtain accurate data for employment rates, as it is voluntary for students to furnish such information upon course completion (either through direct communication with the program director, or via an employment survey on Survey Monkey). In addition, at least 47 other students have enrolled in an RN or LVN program.

Another goal was to secure grant funding from the Arthur N. Rupe foundation. The program has been awarded grant funding during the 2014-2015, 2015-2016, and 2016-2017 academic years. Funding helped cover instructional support (for open skills lab sessions), student scholarships (books, uniforms, gas cards), state exam fees, and equipment/supplies.

3. **Please state any recent accomplishments for your program and show how it contributes to the College's mission and success.**

A recent accomplishment was securing grant funding through the Arthur N. Rupe foundation, as noted above. Many students indicated they would not have been able to take the course if it were not for the funding of their textbooks, uniforms, state exam fees, etc. For a student working a part-time job that pays minimum wage, the student funding equates to approximately 40 hours of work. For some, these extra hours were spent studying. For others, the money saved was used towards tuition, groceries, or bills. Students of diverse backgrounds and with varying socioeconomic situations achieved their goals of gaining nurse assistant/home health aide training, either to work as CNAs/HHAs, or to prepare them for further training in the healthcare field. It is the intent of the program director to reapply for grant funding when the application becomes available. The tables below provide an overview of grant rewards for the 2015-2016 and the 2016-2017 academic years:

Rupe Grant Revised detailed project budget: 2015-2016

Item Description	Cost
Instructional Support: • Adjunct faculty member: 59 hrs./semester at ~$100/hr. = $5,900 X 2 semesters= $11,800	

	$ 11,800.00
Student Scholarships and Emergency Assistance: • Books: textbook= $45 X 45 students = $2,025 X 2 semesters= $4,050 • Uniform: $162.67 which includes pants, shirt/top, shoes, school patch, and watch with second hand (requirement for the state exam); $162.67 X 45 students/semester = $7,320.15 X 2 semesters = $14,640.30 (round-off to $14,640.00) • Gas Card: to assist in traveling to clinical site throughout the semester; $100/gas card X 45 students/semester = $4,500 X 2 semesters = $9,000	$ 4,050.00 $14,640.00 $9,000.00
Exam Fees: • CNA State Exam: $90/exam X 45 students/semester = $4,050. X 2 semesters = $8,100.	$8,100.00
Equipment/Supplies: • Fingerprinting: $50/student X 45 students/sem.+ $30 Adm. Fee= $2,280 X 2 semesters= • Gloves: 95 boxes per semester X $15/box = $1,425 X 2 semesters = 2,850	$4,560.00 $2,850.00
Total Project Budget	$55,000.00

Rupe Grant Revised detailed project budget: 2016-2017

Item Description	Cost

Instructional Support:
 • Adjunct faculty member:
    o Skills Lab:
       ▪ 30 hrs./semester at ~$100/hr. = $3,000 X 2 semesters= $6,000
	$6 ,000.00

Student Support: • Books: textbook= $50; $50 X 45 students = $2,250 X 2 semesters= $4,500 • Uniform: includes pants, shirt/top, shoes, school patch, and watch with second hand (requirement for the state exam); $149.11 X 45 students/semester = $6,709.95 X 2 semesters = $13,419.90 • Gas Card: to assist in traveling to clinical site throughout the semester; $50/gas card X 45 students/semester = $2,250 X 2 semesters = $4,500 • CPR certification course: $55/student X 45 students/semester= $2,475/semester X 2 semesters= $4,950	$4,500.00 $13,419.90 $4,500.00 $4,950.00
Exam Fees: • CNA State Exam: $100/exam X 45 students/semester = $4,500 X 2 semesters = $9,000. • Postage to send to state offices: $50.05/mailing X 2 semesters= $100.10	$9,000.00 $ 100.10
Equipment/Supplies: • Fingerprinting: $52/student X 45 students/sem.= $2,340 X 2 semesters= $4680 • Gloves: 95 boxes per semester X $15/box = $1,425 X 2 semesters = 2,850	$4,680.00 $2,850.00
Total Project Budget	$50,000.00

In addition, the program director has submitted proposals on CurricUNET for 2 new non-credit courses and a non-credit certificate of completion. <mark>The courses have been approved and the certificate of completion is still pending approval.</mark>

4. **Please describe where you would like your program to be three years from now (program goals) and how these support the college mission, strategic initiatives and student success.** With collaboration of the dean for Non-Credit Education & Basic Skills, we hope to build a non-credit guided pathway in health professions which incorporates both credit and non-credit courses. This opportunity opens more doors for adults of disadvantaged backgrounds, <mark>which ties into the college's mission to empower and prepare students from diverse backgrounds. The new programs will also support the college's strategic initiative of student-centeredness through the development of accessible curriculum and programs.</mark> We are also exploring the possibility of other CNA certificate programs for the future (Acute Care CNA; Restorative Nurse Assistant/RNA). We hope to continue collaboration with the Arthur N. Rupe foundation, who has generously assisted many of the students in our program over the last few years. <mark>Grant funding helps economically disadvantaged students to access the program; this also supports our mission to empower and prepare students from diverse backgrounds. Grant funding also ties in with the strategic initiative that focuses on access to programs and services.</mark>

PART A: Program Effectiveness and student success- please note that the Excel data workbook you received from the Research Office will be needed to complete this section. With each of the data elements, the underlined header corresponds with the name of the tab on the data spreadsheet to indicate where you will locate the data.

1. **Program Set Standards (<u>Summary Tab</u>)**

Overall, EVC's Institution Set Standard for success rate is **64%**, and the aspirational goal for student success is **71%**

Success Rate (completion with "C" or better)	Program	EVC	Program Set Standard (established during last comprehensive PR)	Program Success Goal (new)
F'11-F'16 average	89.48%	71.23%	89.48x0.9= 81%	90%

Program Set Standard: It is recommended that programs identify a success standard. This standard should reflect the *baseline* success rate.

Recommendation: 90% of the 5 year average success rate could be your program standard (average x 0.9).

Program Success Goal: It is recommended that programs identify a success goal. This goal should reflect the success rate to which your program *aspires*.

a) **Is your program success rate higher or lower than the campus?**	Higher
b) **Is your success rate is higher than the campus, how are you helping students succeed in and outside the classroom? If your program success rate is lower, what are some strategies your program is implementing to improve?** Through grant funding, we have been able to set aside open skills lab hours for students to practice their skills. Although the students' grades are based on the theoretical component of the course, practicing the skills also helps the students to understand some of the theoretical components better. We also employ the use of educational group games in the classroom; this stimulates critical thinking and makes learning fun.	

c)	**Is the current program success rate higher than the program set standard?** We did not establish a set standard during the last comprehensive PR. However, for our SLO assessments, we have set the standard that at least 90% of students will receive a 75% or better on assessment tools. We have consistently met this standard. Based on our current program success rate and the recommendation of 90% of the 5 year average success rate, we have set our program standard to 81%.	
d)	**How close is the program to meeting the program success goal?** Based on the most recent data sets, the program is less than 1% away of meeting a program success goal of 90%.	
e)	**Are these measures (program set standard and program success goal) still current/accurate? If not, please describe here and reset the standards.** These measures are new measures established with this current comprehensive review.	

2. Success Rate ("C" or better)-average F11- F16

Success Rates: **Measures by IPEDs**	Program (average total enrolled students/Success Rate)	EVC
American Indian	1/**0%**	110/**75.6%**
Asian	114/**93.68%**	9,599/**77.2%**
Black or African American	15/**74.4%**	661/**60.4%**
Hawaiian/Pacific Islander	1/**100%**	131/**65.4%**
Hispanic	90/**87.54%**	8,890/**64.6%**
Two or More Races	11/**85.71%**	562/**67.5%**
Unknown	19/**92.86%**	2,210/**74%**
White	18/**93.75%**	1,623/**74.4%**
Success Rates: **Measures by Gender**	Program (average total enrolled students/Success Rate)	EVC
Female	214/**89.18%**	12,535/**72.9%**
Male	55/**90.09%**	11,195/**69.4%**
No Value Entered	n/a	60/**78.9%**
Success Rates: **Measures by Age**	Program (total enrolled students/Success Rate)	EVC
17 & Below	n/a	512/**79.6%**
18-24	146/**89.74%**	15,569/**68%**
25-39	88/**92.95%**	5,012/**74.7%**
40 & Over	35/**79.46%**	2670/**82%**
Unknown	n/a	12/**74.6%**

a. **With respect to success rates, how are your program success rates similar to or different from the rest of the campus? What equity gaps have you identified?** Except for the age group of 40 & over, which is 2.18% lower in success rate compared with the rest of campus, and the ethnicity of American Indian (which had 0% success rate for the one student in the program as compared with a 75.6% success rate for the college), the program success rates are considerably higher (at least 14% higher) than the college success rates. The group with the lowest success rates for both the program and the college is the African American group. Interestingly, this is the group with the closest parallel (i.e. smallest percentage gap, at 14%) between the program and overall college.

b. **If equity gaps for success are identified, what interventions will be implemented in the program to address these equity gaps? Please include a timeline of implementation and reassessment.** The African-American group has the lowest success rate out of any other ethnic group. Some interventions include: Referring students to the nursing division's student success coordinator; encouraging study groups and/or tutoring; referring students to attend Professor Garry Johnson's workshop on test-taking strategies. Interventions will be assessed at the end of each semester that they were implemented.

c. **With respect to disaggregated success rates (ethnicity/race, gender and age), how did the students do in reaching your program set standard for student success? How about reaching the program success goal?** Except for the American Indian and African American ethnic groups and the 40 & Over age group, all groups exceeded the program set standard of 81%. The following ethnic groups did not meet the program success goal of 90%: African American (74.4%); Hispanic (87.54%); Two or More Races (85.71%). In addition, the 40 & Over age group also did not meet the program success goal. Finally, the female gender group missed program success goal by less the than 1%. For these groups, some interventions include: Referring students to the nursing division's student success coordinator; encouraging study groups and/or tutoring; referring students to attend Professor Garry Johnson's workshop on test-taking strategies (as mentioned above in section b.).

d. If your program offers course sections fully online, please contact the EVC Dean of Research, Planning and Institutional Effectiveness to get a student success report on the online sections. Then discuss the success of fully online sections verses face to face sections. **N/A**

3. Program Awards- if applicable

If the classes in your program lead to a degree or certificate, please visit DataMart and indicate how many degrees/certificates were awarded in your program: http://datamart.cccco.edu/Outcomes/Program_Awards.aspx You will need to select drop down menus as shown below and then "select program type by major of study" (for example, select Legal for paralegal studies).

Then at the bottom of the report, select the box "program type- four digits TOP", then update report to get program specific information.

Report Format Selection Area - Check field to include in the report

Row Options

- [ ] District Name
- [x] College Name
- [x] Award Type
- [ ] Program CDCP Status
- [ ] Program Type - Two Digits TOP
- [x] Program Type - Four Digits TOP
- [ ] Program Type - Six Digits TOP

Update Report

Degree Type:	Number of Awards (2015-2016)
AA	n/a
AS	n/a
AS-T	n/a
AA-T	n/a
Certificate 12-18 units	n/a
Discussion: We are hoping to the offer the course as a Certificate of Achievement, since students are eligible to receive state certification through the CA Department of Public Health. Currently the process is pending individual course revisions. Once the revisions have been approved, the course will be re-submitted as a program/Certificate of Achievement.	

4. Student Enrollment Types (average F11-F16)

Day or Evening Student	Program average Headcount	Pct of Total	EVC- average Headcount/Pct Total
Day	821	**89%**	4,106/**46.3%**
Day & Evening	101	**11%**	3,486/**39.2%**
Evening	n/a		1,116/**12.6%**
Unknown	n/a		171/**1.9%**

| Academic Load	Program average Headcount	Pct of Total	EVC average Headcount/Pct Total*
Full Time	31	**3.36%**	3,102/**34.6%**
Half Time or less than half time	890	**96.5%**	5,797/ **64.8%**

*Note: Not reported here are overload/withdrawn to equal 100%

5. Student Demographics- Headcount (average F11-F16)

Program Total Headcount	269	Pct change year to year	
Gender	**Headcount**	**Pct of Total**	**EVC Headcount/Pct Total**
Female	214	**79.6%**	4,776/**53.8%**
Male	55	**20.4%**	4,082/**46%**
No Value Entered	n/a	n/a	24/**0.3%**
Age	**Headcount**	**Pct of Total**	**EVC Headcount/Pct Total**
17 & Below	n/a	n/a	436/**4.9%**
18-24	146	**54.3%**	5,358/**60.3%**
25-39	88	**32.7%**	2,091/**23.5%**
40 & Over	35	**13%**	994/**11.2%**
Unknown	n/a	n/a	9/**0.10%**
IPEDs (Race Ethnic Classification)	**Headcount**	**Pct of Total**	**EVC Headcount/Pct Total**
American Indian	1	**0.37%**	42/**0.47%**
Asian	114	**42.4%**	3,546/**40%**
Black or African American	15	**5.57%**	260/**2.9%**
Hawaiian/Pacific Islander	1	**0.37%**	50/**0.56%**
Hispanic	90	**33.46%**	3,413/**38.4%**
Two or More Races	11	**4.09%**	207/**2.3%**
Unknown	19	**7.06%**	741/**8.4%**
White	18	**6.69%**	622/**7%**

The 3 graphs below depict the data over the 5 years based on gender, age, and ethnicity:

Headcount by Gender

Headcount by Ethnicity

Headcount by Age
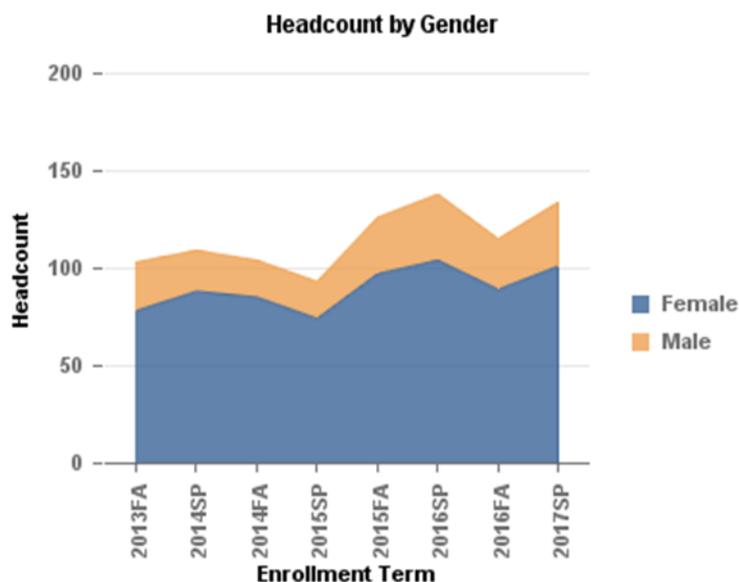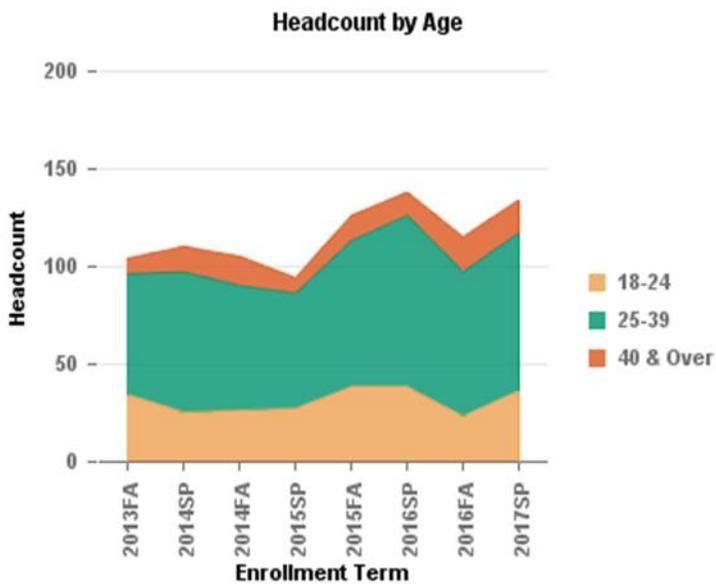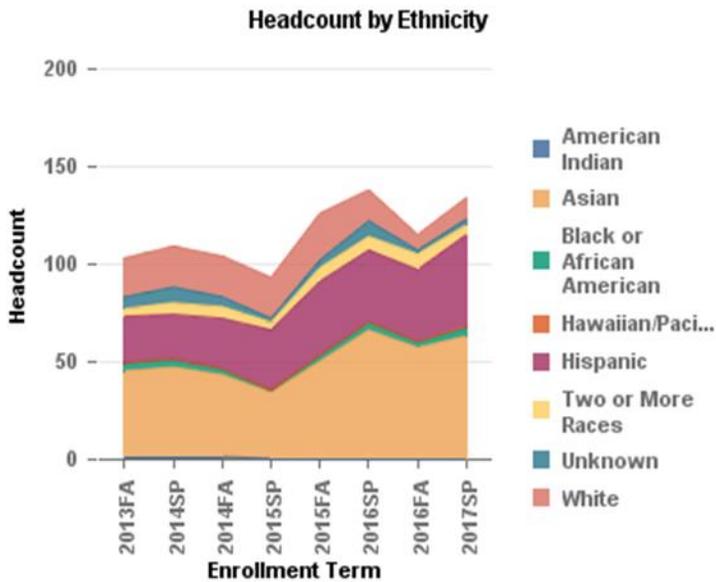
e. **Did you notice any changes in *program enrollment types* (day vs evening, full-time vs part-time) since your last program review?** The last comprehensive program review did not depict enrollment types related to day vs. evening, or part time vs. full-time. This is due mainly to the fact that at the time, data for the nurse assistant program was incorporated into data for the overall nursing program. Enrollment data was depicted only by gender, age, and ethnicity based on a general demographics survey given to students by the instructor at the beginning of each semester. **How do your program enrollments (Pct of total) compare to EVC?** Overall, there is a higher percentage of females in the program compared to EVC. This is due mainly to the fact that the discipline of nursing and nursing care has historically been a predominantly female career (although this is changing, due to changes in gender attitude). The percentage of age groups within the program align similarly with the overall college, with the majority of students falling in the 18-24 age group. However, unlike the college, there were no students in the

program ages 17 and below. While the minimum age requirement to enroll in a nurse assistant training program (based on the CA Health & Safety Code, section 1337.2) is 16 years old, because the training entails hand-on interaction with frail elderly, it is not one commonly sought out by those younger than 18. Finally, there is close parallel between the program and the college across the board in terms of race/ethnicity, with the majority of students coming from Asian or Hispanic backgrounds. **Based on the data, would you recommend any changes?** Perhaps depicting males in uniform on the EVC website and/or other forms of advertisement (pamphlets, flyers) to attract more males into the program; having workshops surrounding "Men in Nursing."

f. **Based on the *program total headcount* and Pct change year to year, is the program growing or declining? If so, what do you attribute these changes in enrollment to and what changes will the program implement to address them?** The headcount has not been consistent from one semester to another, with a recent trend in decline in numbers. Reasons for attrition include family emergencies, personal or family health issues, and inability to successfully manage scheduling in relation to work and other obligations. While full wait lists prompted us to add a 3rd section beginning in the Spring 2015 semester, the inability to maintain all sections at capacity (particularly the 3rd one, most likely due to the timing of clinical as compared with the other two sections) has brought us back to two sections as of the Spring 2017 semester. To prevent attrition related to scheduling issues, workshops are held a few times each semester to review course expectations so that interested students could make an informed decision regarding whether the course would be suitable for them, given their current obligations and circumstances.

g. **What gaps have you identified in your program?** There is the gender equity gap, as we typically have more females than males enroll in the program. **How is your program enrollment similar or different from the campus? Which gender, age, and/or ethnic group are proportionally smaller than campus make up?** Except for female and the age groups of 25 to 39, which are considerably higher in percentage within the program compared to the college, the groups within the program are overall similar (i.e. only slightly higher or slightly lower) in comparison to the campus make-up.

h. **Based on your findings, what interventions can the program implement to address any gaps in enrollment?** Perhaps depicting males in uniform on the EVC website and/or other forms of advertisement (pamphlets, flyers) to attract more males into the program; having workshops surrounding "Men in Nursing" (as mentioned in section e. above).

6. Institutional Effectiveness (5 year average, see <u>Summary Tab</u>)

	Program	EVC
Capacity	47.79%	77.6%
Productivity (goal 16)	8.33%	15.65

Is your capacity rate higher or lower than the campus?	Lower
Is your productivity goal higher or lower than the campus?	Lower
If the program capacity and/or productivity is lower than the campus, please provide rationale:	

Because the CA Dept. of Public Health mandates a ratio of 15:1 for instruction in the clinical and laboratory settings, the productivity goal is lower than that of the campus. However, to enhance course efficiency, clinical cohorts are combined into one lecture class.

PART B: Curriculum

1. **Identify any updates to curriculum since the last comprehensive program review, including any new programs and indicate the 6 year timeline for scheduled course outline revision.** The program uses the most current model curriculum for both CNA training and HHA training, as put forth by the California Community College Health Care Initiative and the Butte College Regional Health Occupations Resource Center. We have recently submitted a course revision proposal through CurricUNET to change the course from a program to a certificate, and to change the number of times the course is repeatable.

2. **Identify all the courses offered in the program and describe how these courses remain relevant in the discipline and real life experiences for students. Please include the list or diagram (program major sheet) of the courses reflecting course sequencing in the major and how often the courses within the program have been offered.** NURS109 (Nurse Assistant/Home Health Aide Training) is currently the only course offered in the program. The course meets current state (CA Department of Public Health) approval, valid until the next renewal date of May 2019.

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?** In class, the instructor has incorporated the games of Jeopardy, Family Feud, and Question Bee; these games foster collaborative learning. According to Allery (2004), educational games "provide participants with opportunities to learn from their involvement with the structured experience....gaming can aid self-awareness through peer interaction and feedback…the use of gaming can also aid skill development in a relatively risk-free environment, for example, decision-making, negotiation, problem solving, creativity, and initiative….there are high levels of participation amongst learners who will generate data that can then be discussed, analyzed and synthesized, usually within a group setting" (p. 504). The instructor also allows in-class group work wherein students, within their small groups of 3 to 4, prepare mini-presentations to be shared the same day. Henry (2006) asserted that assigning group work to students allows them to work with peers on a task in a relatively safe environment. Van Blankenstein, Dolmans, Van Der Vleuten, and Schmidt (2011) noted that several studies have shown that working together in small groups has a positive effect on learning performance. The authors remarked that providing explanations during small group discussions stimulates elaboration, which in turn is expected to foster learning, benefit short-term recall, and increase retention of knowledge. In addition, students have shared in class their previous life experiences related to health care. Sousa (2006) pointed out that "using examples from students' experiences will allow students to bring previous knowledge into working memory to accelerate making sense and attaching meaning to new learning" (p. 68). Finally, the students also share their current clinical experiences during post conference; this approach includes stories of success or crisis to provide valuable learning experiences for students and teachers, thus promoting empathy and understanding (Brown, Kirkpatrick, Mangum, & Avery, 2008). These teaching strategies significantly enhance interest and learning versus the use of solely conventional straight lectures.

References: Allery, L. (2004). Educational games and structured experiences. *Medical Teacher, 26*(6), 504-505.

Brown, S. T., Kirkpatrick, M. K., Mangum, D., & Avery, J. (2008). A review of narrative pedagogy strategies to transform traditional nursing education. *Journal of Nursing Education, 47*(6), 283-286.

Henry, P. R. (2006). Making groups work in the classroom. *Nurse Educator, 31*(1), 26-30.

Sousa, D. A. (2006). *How the brain learns, 3rd. Ed.* Thousand Oaks, CA: Corwin Press.

Van Blankenstein, F. M., Dolmans, D. H., Van Der Vleuten, C. P., & Schmidt, H. G. (2011). Which cognitive processes support learning during small-group discussion? The role of providing explanations and listening to others. *Instructional Science, 39,* 189-204.

4. **Discuss plans for future curricular development and/or program (degrees & certificates included) modification.** We are hoping to the offer the course as a Certificate of Achievement, since students are eligible to receive state certification through the CA Department of Public Health. Currently the process is pending individual course revisions. Once the revisions have been approved, the course will be re-submitted as a program/Certificate of Achievement. In addition, a stand-alone, non-credit HHA course has been proposed as part of a non-credit HHA certificate of completion. Two other non-credit courses (Introduction to Healthcare and Healthcare Careers; Communication for Healthcare Providers) were also developed. These two courses are part of another proposed certificate of completion, Introduction to Health Professions. Other future plans include re-applying for grant funding through the Arthur N. Rupe Foundation.

5. **Describe how your program is articulated with High School Districts, and/or other four year institutions. (Include articulation agreements, CID, ADTs…).** The program currently does not have any articulation agreements with High School Districts and/or other 4-year institutions.

6. **If external accreditation or certification is required, please state the certifying agency and status of the program.** The program was approved by the California Department of Public Health (CDPH) in January of 2010; a renewal application is required for submission to the CDPH every 2 years in order for the program to remain in good standing. The program was last renewed on May 10, 2017 and expires (i.e. is due for renewal) on May 31, 2019.

PART C: Student Learning Outcomes and Assessment

1. On the program level, defined as a course of study leading to degree or certificate, list the Program Learning Outcomes (PLOs), and how they relate to the GE/ILOs (http://www.evc.edu/discover-evc/student-learning-outcomes-%28slos%29). Please also indicate how the course SLOs have been mapped to the PLOs.
   If you are completing this program review as a department or discipline and do not offer any degrees or certificates, please write N/A in this space. **N/A**

2. **Since your last program review, summarize SLO assessment activities and results at the course and program level. 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…).** Program (i.e. course) SLOs have been religiously assessed at the end of every semester since the last comprehensive program review. Assessment is based on exam and quiz questions that align to SLOs. In addition, for the skills component of the course, a state-approved clinical checklist is used to assess competency in several nurse assistant skills. Many of these skills are also on the state certification exam. The most recent SLO assessment was added to the previous assessments and emailed to the SLO coordinator in August; feedback was promptly provided, with revisions made based on the feedback. Dialogue surrounding SLO work during division meetings has been limited to information provided by Dean Herrera to the team (for example: January 27, 2017- discussion re: the adoption of the CurricUNET SLO Module and the shortened required timeframe to complete assessment cycle for all SLOs from 6 years to 2 years; November 7, 2016- the need, as a division, to look at how to address the disaggregation of SLO data). Copies of these pages from the division meeting minutes are included.

3. **What plans for improvement have been implemented to your courses or program as a result of SLO assessment? Please share one or two success stories about the impacts of SLO assessment on student learning.** There have not been major changes in course curriculum since the last comprehensive review, due to consistently achieving the program success goal that at least 90% of students will receive a 75% or better on assessment tools. In addition, state certification exam pass rates were at 94% or greater 6 out of the 8 semesters assessed since the last comprehensive program review. The 85% pass rate that was achieved during the other 2 semesters still far exceeds the state minimum passing requirement of 65%. Minor modifications include revisions of exam questions based on assessment data and the addition of open lab sessions to support student preparation for the state certification exam. In the case of the latter, the program would benefit from additional funding to pay adjunct faculty to hold the open lab sessions.

PART D: Faculty and Staff

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

Elaine Kafle, Ph.D., MS, PHN, RN

Coordinator and Instructor, CNA/HHA Program

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

Elaine has had her Director of Staff Development Certificate since 2002, a former requirement of the CDPH to teach in a nursing assistant training program. She has a Master of Science in Nursing degree from UCSF, with a focus on Gerontology/Nursing Education. Both have contributed to the success of the program. Elaine also has her Public Health Nurse (PHN) certificate, a requirement by the CDPH to obtain approval for the HHA program. Elaine later went back to school at Capella University and obtained her Ph.D. degree in Adult & Postsecondary Education.

Elaine's main focus at EVC since she began teaching the program in Spring 2010 has been to prepare the students to successfully pass the state certification exam and to provide compassionate, competent care to others. Elaine has completed continuing education courses specific to gerontology and the care of geriatric clients.

Anna-Marie Regalado, MSN, FNP, RN, MA, PHN

Anna-Marie joined EVC in Fall 2015, when the CNA/HHA program was in its second semester of adding a 3rd clinical cohort. She has previous teaching experience in private post-secondary vocational nursing programs. Anna-Marie has a Master's Degree in nursing (Family Nurse Practitioner) from CA State University, Fresno; a Master's Degree in Health Care Administration from San Jose State University; and a Certificate of Applied Social Gerontology from San Jose State University. She has worked as a nurse practitioner and has several years of experience in both long-term care and home health. Anna-Marie is currently pursuing her doctoral degree (Doctor of Nursing Practice). Anna-Marie has taught in the open lab sessions and will continue to assist in this area when grant funding allows us to resume the sessions.

Maria Machado, RN

Adjunct Instructor, CNA/HHA Program

Maria received her Associate's Degree in Nursing from Gavilan College and has 25 years of teaching experience. Prior to joining EVC in January 2017, Maria was the CNA/HHA program coordinator and faculty at Gavilan. Maria's previous

teaching experience, her experience as a nurse in long-term care and home health, and her experience as a CNA home care provider are all invaluable to her role as a clinical/open lab instructor in our CNA/HHA program. Maria currently teaches a few clinical days per semester.

2. **List major professional development activities completed by faculty and staff over the last six years. In particular with regards to student success, equity, distance education, SLO assessment, guided pathways and/or innovative teaching/learning strategies. Please also discuss department orientation/mentoring of new and adjunct faculty.**

Elaine has attended three CNA Director's Conferences since 2014, which has afforded her the opportunity to network with other CNA/HHA program directors from the state of CA, as well as with experts in the field of long-term care/gerontology. Elaine was a speaker at two of these annual conferences; in June 2015, she offered a presentation on her doctoral dissertation surrounding nursing students with learning disabilities; in June 2017, she presented her CDPH (CA Dept. of Public Health)-approved policy & procedure manual that she developed based on updated CDPH guidelines. Through attendance at the conferences, Elaine has learned valuable information on topics such as trends in long-term care and the labor market (thus impacting employability of CNAs); navigating regulation barriers to CNA training.

Since Spring 2015, Elaine has provided orientation for four new faculty in the CNA/HHA program; two of the faculty still teach as open lab instructors. One of the faculty also assists as a clinical instructor. Through the AFT-6157 (Faculty Association), Elaine has also mentored two new non-nursing faculty (an English faculty and a music faculty).

In October 2016, Elaine gave a presentation at EVC (through the EVC Professional Development Center) on nursing students with learning disabilities, based on her dissertation.

During the 2016-2017 academic year, Elaine served on the Distance Education committee and collaborated with other faculty in updating the Distance Education manual, critiquing a rubric for evaluating the effectiveness of faculty-student contact hours, and creating a clearer definition of what constitutes regular and effective faculty-student contact hours. Because of scheduling conflicts, Elaine currently serves on the SLO Assessment Committee.

In August 2017, Elaine participated in the Guided Pathways training at EVC.

Elaine recently developed three non-credit courses; these courses are part of two proposed non-credit certificate of completion programs in healthcare. Currently the courses and programs are pending approval.

While Maria recently retired from her previous employment and currently assists us with teaching a few days of clinical each semester, she has kept up-do-date with continuing education courses for license renewal. Anna-Marie is currently pursuing her doctorate in nursing practice.

New hires attend a department orientation that includes meetings with the Dean and then the program director; they are also invited to participate with the campus-wide new adjunct faculty orientation. The program director is the assigned mentor for the new hires.

PART E: Budget Planning

1. **With your Dean, review the department Fund 10 budget and discuss the adequacy of the budget in meeting the program's needs.** The fund 10 budget for CNA is included in the overall Nursing Fund 10 budget and covers the cost of the faculty and limited supplies. The program needs additional funds to cover the finger printing cost for students enrolled in NURS 109, approximately $4,000 annually. Based on the California Code of Regulations (section 71828) and the Health and Safety Code (section 1338.5), students are not to incur any cost of the mandatory fingerprinting.
2. **Identify an external (fund 17) funding the department/program receives, and describe its primary use.** The program has previously received grant funding from the Rupe foundation to support student success through open lab instruction and coverage of student supplies (textbooks, uniforms, etc.). We do not have an award for the 2017-2018 academic year, but our intent is to re-apply for grant funding when the next application period becomes available.

PART F: Technology and Equipment

1. **Review the current department technology and equipment needed and access program adequacy. List any changes to technology or equipment since the last program review.** Since the last comprehensive program, we have acquired a standing scale since measuring of weight on a standing scale is one of the state exam skills. The skills lab typically has sufficient supplies to allow the students to perform and practice their skills. However, at times equipment may need to be repaired or replaced, especially training stethoscopes and blood pressure cuffs. The cost of latex and exam gloves and live-scan fingerprinting will also need to be incorporated into the budget. Testing is conducted through computerized online testing (ExamView), based on Computer Lab availability; new screen covers and/or dividers between the computers need to be purchased.

PART G: Additional Information

Please provide any other pertinent information about the program that these questions did not give you an opportunity to address. Elaine finds it an absolute joy to teach in the program. The long-term care facility residents and staff are enjoying having the students. Students are enjoying the course and finding jobs afterwards (and those who go on to pursue nursing have been reported to be better prepared than those who have not taken prior nurse assistant training).

PART H: Future Needs and Resource Allocation Request:

Based on the areas noted below, please indicate any unmet needs for the program to maintain or build over the next two years. Please provide rationale on how the request connects back to SLO/PLO assessment, strategic initiatives or student success. If no additional requests are needed in any of the areas, put N/A.

Faculty and staffing requests	Ongoing Budget Needs: Adjunct faculty to hold open lab sessions for students	Request linked to: SLO/PLO #: *Demonstrate skills necessary to perform nursing assistant and home health aide procedures safely and effectively, including accurate measurement of vital signs, transfer techniques,*
	One-time Expenditure:	

		bathing/grooming principles, feeding techniques, and accurate documentation of skills.
		Strategic Initiatives (student centered, organizational transformation, community engagement): Student-centered
		Improving Student success rates:
		Achievement of program set standard for student success:
Facilities	Ongoing Budget Needs: One-time Expenditure:	Request linked to: SLO/PLO #: Strategic Initiatives (student centered, organizational transformation, community engagement): Improving Student success rates: Achievement of program set standard for student success:
Technology	Ongoing Budget Needs: One-time Expenditure:	Request linked to: SLO/PLO #: Strategic Initiatives (student centered, organizational transformation, community engagement): Improving Student success rates: Achievement of program set standard for student success:
Equipment/Supplies -Latex exam gloves for student/instructor use during clinical -Extra Teaching stethoscopes -Alcohol wipes to clean stethoscopes -Fingerprinting costs	Ongoing Budget Needs: -Latex exam gloves for student/instructor use during clinical -Extra Teaching stethoscopes -Alcohol wipes to clean stethoscopes -Fingerprinting costs One-time Expenditure:	**Request linked to:** **SLO/PLO #3: *Demonstrate skills necessary to perform nursing assistant and home health aide procedures safely and effectively, including accurate measurement of vital signs, transfer techniques, bathing/grooming principles, feeding techniques, and accurate documentation of skills.*** Strategic Initiatives (student centered, organizational transformation, community engagement): Improving Student success rates: Achievement of program set standard for student success: