Self-Study Report
College of the Sequoias
ID #4202

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ACEN SELF STUDY REPORT

COLLEGE OF THE SEQUOIAS CANDIDATE ID # 4202

https://www.cos.edu/en-us/academics/nursing-allied-health/registered-nursing

SECTION 1: Program Information

Governing Organization	Nursing Education Unit
College of the Sequoias 915 S. Mooney Blvd, Visalia, CA. 93277	Nursing Department Hospital Rock Room101 915 S. Mooney Blvd, Visalia, CA. 93277
Chief Executive Officer Name: Dr. Brent Calvin, Ed.D. Title: President and Superintendent Credentials A.A. College of the Sequoias B.A., California State University, Fullerton M.B.A., California State University, Dominguez Hills M.Ed., Ed.D., Northcentral University Telephone: (559) 730-3745 Email: brentc@cos.edu	**Nurse Administrator** Belen Kersten, MSN, RN, CNOR(E) Director of Nursing Telephone: (559)730-3794 Email: belenk@cos.edu
Governing Organization Accreditation Accrediting Commission for community and Junior Colleges (ACCJC), Western Association of Schools and Colleges (WASC) Accreditation Status: Reaffirmed Date of Next Review: Fall 2025	**State Regulatory Status** Regulatory Agency: California Board of Registered Nursing Last Visit: 11/2022; Current Status: Approved

ACEN Standards and Criteria Used: 2023
Program Start Date: **January 1970**
First Graduating Cohort: **December 1972**

Enrollment/Students

Program Option	Nursing Student Enrollment
Generic Associate Degree Nursing Program Option	• Fall: Full Time Cohort of 80 generic RN students • Spring: Full-time Cohort of 80 generic RN students • Summer: Cohort of 20 year-round full-time generic RN students (alternate years)
Advanced Placement LVN to RN Program Option	• Fall:10 LVN to RN Students admitted into second semester as advanced placement students. • Spring: 10 LVN to RN admitted into second semester as advanced placement students.
Number of weeks in an Academic Term:	Fall and Spring: 17.5 Week semester calendar. Summer Year-Round Cohort is continuous across the academic year with hours consistent with a 17.5-week semester calendar. Full time hours are divided between the courses and students take the courses back-to-back without any break in between.
Total Number	**Full Time 370 per academic year**
Type of Academic Term:	Traditional: Semester based 17.5-week terms. Year-Round Program: Cross-Semester based terms (year-round- Sequentially completed courses)

Program Location, Program Options

Program Location: College of the Sequoias Visalia Campus 915 S. Mooney Blvd., Visalia, CA. 93277	Generic Associate Degree Nursing	LVN to RN Advanced Placement	Year-Round Generic Associate Degree Nursing
Does the Program Offer Distance Ed?	No	No	No
Official Published Program of Study	Full-time	Full-Time	Full-Time
Academic Term Type	Semester	Semester	Semester

Program Length Table

Program Option	Total Number of Academic terms to Complete Program	Total Credit/Clock Hours Required to Complete Program	Total Nursing Credit/Clock Hours Required to Complete Program	Total Credit/Clock Hours Awarded for Prior Learning (if applicable)
Traditional RN Program (Full-Time Regular Program + Year-Round Program)	Three semesters full-time to complete pre-nursing requirements. + Four semesters of nursing courses	General Education (COS-GE) Total is 25 Units. Nursing is exempt from the Information competency (1 unit) and PE (2 units) Remaining units =22 12 units of prerequisite and corequisite courses are counted toward these 22 units of GE requirements leaving an additional 10 units of GE requirements. 16 units of prerequisite courses (3 units double count as mentioned above) 9 units of corequisite (all double count toward the GE requirement as noted above) 40 units nursing core courses **Total Program Units is 75 ** See repository Program Information COS RN Program Units for Completion.**	40 semester units	Policy B-15 Transfer Credit states that candidates applying from other nursing programs will be evaluated on an individual basis for equivalence to COS courses (See repository item Policy and Procedure Manual)
Advanced placement LVN to RN Program	Three semesters full-time to complete pre-nursing requirements. + Three semesters in nursing program	General Education (COS-GE) 22 units. Nursing is exempt from the literacy competency and PE which is 3 units. Remaining units =22 12 units of prerequisite and corequisite courses are counted toward these 22 units of GE requirements leaving an additional 10 units of GE requirements. 16 units of prerequisite courses (3 units double count as mentioned above) 9 units of corequisite (all double count toward the GE requirement as noted above) 25 units of core nursing courses **Total Program units is 60 ** See repository Program Information COS RN Program Units for Completion.**	28 semester units	12 semester units awarded for completion of fundamentals, pediatrics, and obstetrics course completions.

See Repository Item for Introduction/Program Demographic Information (a) and (b):

(a) Total Curriculum Plan

Department of consumer Affairs, Board of Registered Nursing, State of California

EDP-P-05

(b) Required Curriculum Content Required for Licensure

Department of Consumer Affairs, Board of Registered Nursing

EDP-P-06

SECTION II: NARRATIVE REPORT

Introduction:

- College of the Sequoias opened a registered nursing program in 1970 with the first graduating cohort in December 1972.

- The associate degree nursing program offered at the College of the Sequoias (COS) is offered in a full-time program option at a single location. The program admits 80 students into the generic RN program option in the fall and spring semesters while LVN-to-RN advanced placement students are admitted into second semester in both fall and spring semesters. COS also offers a bi-annual, year-round, generic RN associate degree program which admits 20 students. These students attend full-time, year-round, one class at a time, on a semester basis and is considered part of the generic RN program.

- The program has enrolled 120 students annually but with recent increased enrollment will admit 90 students per semester plus 20 students in the year-round program in alternate summers.

- Current attrition rate of 5.5%

- The RN program maintains strong community ties, relationships, and partnerships that support the program in several ways including clinical site placements. The College of the Sequoias nursing program serves an underserved rural area of California in Tulare County. A large majority of our students are Hispanic. Many are first generation college students.

- In a fall 2024 report by College Futures Foundation: California College Programs That Pay, the College of the Sequoias Registered Nursing Program was number one on the price-to-earnings premium for California college programs. See the report at this link. Page 19. https://collegefutures.org/download/8378/?tmstv=1727920962. This means that return for investment for our students was best overall in any program for any credential (certificates, associates, bachelors) across the state.

- The last California Board of Registered Nursing continuing approval visit (Nov. 2022) resulted in compliance in all areas and a zero-recommendation report.

- The last major curriculum revision was completed during 2017-2019 and implemented in fall of 2020 and has realized a strong success rate. The new curriculum is concept-based, competency levelled, and includes a simulation component which was recommended during our 2017 BRN CAV (Continuing Approval Visit).

- New facilities were created including a simulation room and a pre-brief/de-brief area and control room. A simulation coordinator and simulation technician were hired into these roles to facilitate the successful incorporation of simulation into the nursing program. At the initiation of the concept-based curriculum simulation was incorporated into and levelled (increasing difficulty, analysis, and practice components) to meet the SLOs and competencies in the curriculum throughout the program. After substantial growth of the program, which occurred in Fall 2023 this has been a challenge related to use of the simulation lab as part of the fourth NURS 175 Transition to Registered Nursing Practice course. This limits the availability of the simulation lab to the remaining semesters. Substantial growth of the program (doubled) has had the unforeseen consequence of limiting space and availability of the simulation lab. In fourth semester there is a dedicated "Transition to Registered Nursing Practice" course which has both lecture and a simulation-based lab component targeting weak areas of nursing practice as identified by standardized testing (ATI comprehensive predictor).

- The increased enrollment in the program also requires the addition of many new faculty and adjunct which is a challenge. Several faculty members have retired in the last couple of years requiring the hiring of new faculty. Recruitment efforts were implemented, and the positions were successfully filled. This will be an ongoing challenge for the program.

- COS Nursing has a strong financial foothold, receiving grants from the Song Brown Capitation Grant, the Nursing Support Grant from the Chancellor's office, and Perkins funding, as well as, receiving funding through the college general fund. The COS Foundation would maintain any donated funds to the nursing program-such as endowments and would control how they were spent according to the endowment specifications and limitations.

SECTION III: EVALUATION OF THE STANDARDS AND CRITERIA

Standard 1: Administrative Capacity and Resources

The mission and/or philosophy of the nursing program reflects the governing organization's mission, goals, and/or values. The governing organization and nursing program have administrative capacity and resources that support effective delivery of the program and facilitate the achievement of the end-of-program student learning outcomes and program outcomes for each nursing program type, and additionally for graduate programs the role-specific nursing competencies.

Criteria 1.1: ***The mission, goals and/or values of the governing organization are evident in the mission, goals, values, and/or philosophy of the nursing program.***

**Repository Item: Table 1.1 Mission and Vision Statement of GO and COS Nursing Alignment

The table will highlight the similarities and overlap between the governing organization and the nursing program at College of the Sequoias. In summarizing repository item Table 1.1, the COS nursing program and the College of the Sequoias are dedicated to providing students with an excellent education leading to successful employment, advanced education, and improved community resources regardless of ethnicity, diversity, culture etc., in a collegial, collaborative, student centered environment that fosters sharing of various perspectives and lifelong learning.

Registered Nursing Program Philosophy:

The philosophy of the Division of Nursing and Allied Health endorses and supports the mission statement of the College of the Sequoias. The curriculum prepares students who complete the program with the knowledge and skill necessary to "function at a level that meets or exceeds the standards of competent performance."

The Nursing Program supports the College of the Sequoias mission statement in providing excellent higher education that allows our diverse student population to achieve their full educational potential. Additionally, in the spirit of equity, we appreciate variations in cultural, racial, and socioeconomic differences among our students. The nursing program directly

supports developing a critical, questioning, and informed citizenry. Fulfillment of this philosophical statement requires educating nursing students to be critical thinkers able to engage in clinical judgment required of the Registered Nurse. The nursing program includes a specific nursing course that provides a foundation for critical thinking/clinical judgment in nursing then builds on critical thinking and questioning throughout the nursing courses.

The Unifying Theme of the Nursing Program:

In summary the unifying theme of the nursing program addresses the overall goal of all components of the nursing program as being student achievement of the end-of-program learning outcomes and competencies which are based on evidence from the nursing and healthcare literature and validates the importance of each learning outcome. It speaks to gaining competency and completion of objectives that serve as defined points for evaluation of student achievement.

The unifying theme addresses the need to have a program centered on, and organized around, current nursing practice and that it is accomplished through constant research and updating related to what is needed to provide safe care in a variety of healthcare environments.

The faculty maintain program currency by discussing new trends and data that influence nursing care. Updates are made based on new literature and practice guidelines in nursing in California.

**Repository item: Handbooks and Manuals: Policy and Procedure Manual, Policy A-01: Registered Nursing Program Philosophy; Policy A-03 Conceptual (Organizing) Framework for a Concept-Based Curriculum

Criteria 1.2 a: *The nurse administrator and nursing faculty have formal representation in governing organization and nursing program governance activities.*
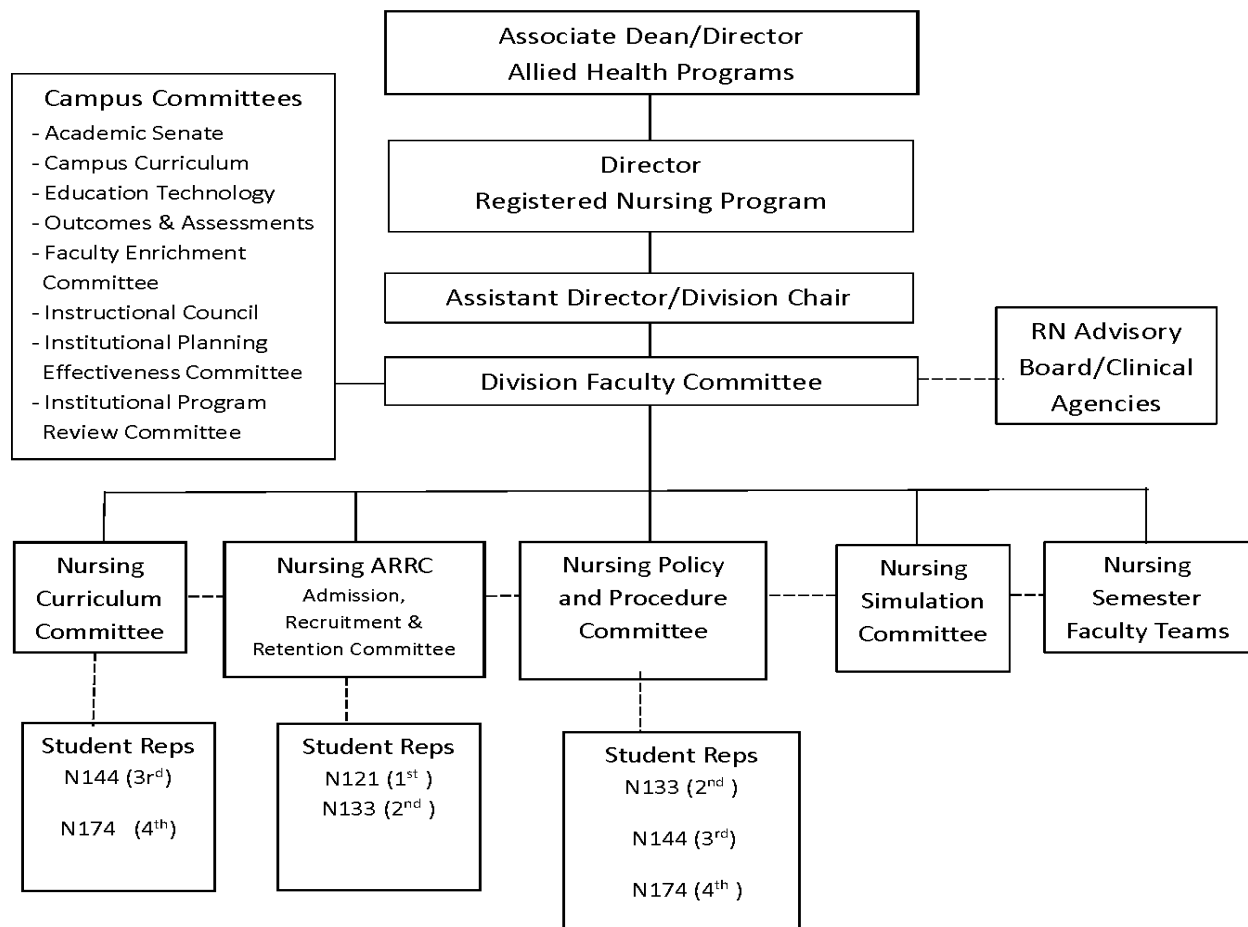
The College of the Sequoias has a "shared governance" structure. Faculty and administrators are encouraged to participate in campus wide committees that influence decision making at each level of governance. The College of the Sequoias participatory governance structure, along with the manuals of governance and decision making, resource allocation, and

integrated planning can be viewed at this website: https://www.cos.edu/en-us/administration/governance and governance structure charts are located in the repository

Repository items: COS Participatory Governance Structure; Org Chart-Academic Services; Org Chart-Admin; Org Chart Administrative Services; Student Services-Org-Chart;

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College of the Sequoias
Division of Nursing and Allied Health
Organizational Chart

| Associate Dean/Director Allied Health Programs |

| Campus Committees |
| - Academic Senate |
| - Campus Curriculum |
| - Education Technology |
| - Outcomes & Assessments |
| - Faculty Enrichment Committee |
| - Instructional Council |
| - Institutional Planning Effectiveness Committee |
| - Institutional Program Review Committee |

Director Registered Nursing Program

Assistant Director/Division Chair

Division Faculty Committee

RN Advisory Board/Clinical Agencies

Nursing Curriculum Committee

Nursing ARRC Admission, Recruitment & Retention Committee

Nursing Policy and Procedure Committee

Nursing Simulation Committee

Nursing Semester Faculty Teams

Student Reps
N144 (3rd)
N174 (4th)

Student Reps
N121 (1st)
N133 (2nd)

Student Reps
N133 (2nd)
N144 (3rd)
N174 (4th)

————————— Lines of Authority   - - - - - - - - - - - - - - Lines of Communication

Reference A-6
Policy & Procedure Manual

The nursing program encourages faculty involvement in nursing program and campus committees:

Table 1.2

Organizational Governance/State/Regulatory	Nursing Program Governance
Belen Kersten (Nursing Program Director) • Institutional Planning and Effectiveness Committee (IPEC)/Master Planning • Instructional Council • Curriculum (advisory member) • COADN (California Organization of Associate Degree Nursing) member • OADN (Organization of Associate Degree Nursing) member • Attends CA Board of Registered Nursing meetings. Faculty Representation Tina Toth (Assistant Director, Division Chair) • Master Plan Task Force • Instructional Council • Curriculum Committee Rob Morris (FT tenured faculty) • FEC (Faculty Enrichment committee) • NLC/ASP (Nursing Leadership Coalition-Academic Service Partnership of the Central San Joaquin Valley) Keri Cochran Ward (FT tenured faculty) • IPRC (Institutional Program Review Committee) (Program Review Committee) Amy Smith (FT tenured Faculty) • Education Technology Committee Mary Denise Escobar (FT non-tenured faculty) • Academic Senate Heather De La Cruz • General Education Committee **All faculty are members of COADN and OADN	Belen Kersten (Nursing Program Director) Administrator and Advisor for: • Policy and Procedures Committee • Nursing Curriculum Committee • Simulation Committee • Academic Recruitment and Retention Committee • Division Meetings • ACEN Task Force Nursing Program Committees 1. Policy and Procedures Chair: Amy Smith Members: Tina Toth, Heather Vails, Keri Cochran Ward, Cathy Glasgow, Carolyn Childers, Mary Denise Escobar, Kim Felsted, Anne Morris, Erica Ramos, Christine Chavez, Heather Carlsen. + 1 student representative 2. Curriculum Committee Chair: Tina Toth Members: Anne Morris, Heather Vails, Keri Cochran Ward, Cathy Glasgow, Carolyn Childers, Amy Smith, Elizabeth Dilbeck, Heather De La Cruz, Vicente Tinoco Puga, Erica Ramos, Kim Felsted +1 student representative 3. ACEN Task Force Chair: Tina Toth Members: Anne Morris, Heather Vails, Amy Smith, Elizabeth Dilbeck, Carolyn Childers 4. Simulation Committee Chair: Rob Morris Members: Anne Morris, Tina Toth, Keri Cochran Ward, Cathy Glasgow, Carolyn Childers, Elizabeth Dilbeck, Mary Denise Escobar, Kim Felsted, Erica Ramos, Amy Smith 5. Admissions, Recruitment, and Retention Committee Chair: Belen Kersten Members: Tina Toth, Amelia Sweeney (nursing counsellor), Elizabeth Dilbeck + 1 student representative 6. Division Meetings Chair: Tina Toth Members: All faculty in all programs of the Division of Nursing and Allied Health

Criteria 1.2 b: *Students have opportunities to participate in governance activities for the governing organization and the nursing program.*

Students participating in the nursing program governance committees share the student voice and opinions of the student perspective; their fellow classmates. Their opinions and decisions are given weight in decision making. They are, however, non-voting members. See Table 1.2 on the previous page.

Students at the College of the Sequoias can participate in student governance/council/senate in the governing organization. A student representative sits on the Board of Trustees, the District Governance Committee, the Academic Senate, the Student Senate for California Community Colleges (SSCCC region V), the Budget Committee, the Equity, Diversity and Action Committee (EDAC), the Ag Council, Educational Technology Committee, the campus Institutional Planning and Effectiveness Committee (IPEC), Institutional Program Review Committee (IPRC), the Curriculum Committee, and the Master Plan Task Force.

**Repository Items: Meeting minutes (Curriculum, ARRC and P&P); Policy and Procedure Manual policy A-6

Criteria 1.3: *Communities of interest have opportunities to provide input into nursing program processes and/or decision-making*

The College of the Sequoias Nursing Program does have an advisory committee that meets annually. If needed additional meetings are held for decision making and advisory issues. Advisory members are provided opportunity during each meeting to share their thoughts, and opinions. They are also sent a survey monkey in advance of the meeting where they can document any comments and feedback for the nursing program.

The COS community and the nursing program work collaboratively with our community partners to develop plans addressing current community needs including the need for additional nurses in the workforce. To this end COS Nursing has doubled its enrollment of students and created an evening year-round program for working individuals interested in becoming nurses.

The COS nursing program is a member of the California San Joaquin Valley Consortium and uses the Central California Clinical Placement System (CCCPS) in partnership with other

regional institutions (hospitals and nursing schools). This allows for communication and collaboration in terms of clinical placement.

As the regulatory body for nursing in California, the California Board of Registered Nursing also has input into the program's decision-making and provides feedback during continuing approval visits.

As a community of interest, students are given the opportunity to provide feedback. They complete course evaluations, graduate surveys and participate in nursing program committees.

Repository Items: 1.3 Nursing Advisory Board Meeting minutes, agendas X 3 years, course and clinical evals, BRN reports/visits, Graduate Surveys

Criteria 1.4: *The nurse administrator is a nurse who:*
A) Holds educational qualifications as required by the
- *Governing organization*
- *Regulatory Agencies*

B) Holds nursing licensure, and certifications as applicable, consistent with the assigned roles and responsibilities; and
C) Is experiential qualified for the assigned roles and responsibilities

Table 1.4a Minimal Qualifications for the Nursing Program Director

Governing Organization	Regulatory Agencies	California Board of Registered Nursing
-Licensure in California as a Registered Nurse -Master's degree or higher degree from an accredited college or university which includes course work in nursing, education, or administration. -A minimum of two years teaching in pre or post licensure nursing programs -A minimum of one year's experience in an administrative position.	**CCC Chancellor's Office** Master's in nursing OR -Bachelor's in nursing AND -Master's in health education or health science OR the equivalent OR the minimum qualifications as set by the Board of Registered Nursing whichever is higher. Reference: https://www.cccco.edu/-/media/CCCCO-Website/docs/minimum-qualifications/CCCCOReport-Minimum-Qualifications-2023_.pdf Page 46.	California Nurse Practice Act (2024) pg. 99, Section 1420 (h):" Director" means the registered nurse administrator or faculty member who meets the qualifications of section 1425(a)pg. 104, and has the authority and responsibility to administer the program. The director coordinates and directs all activities in developing, implementing, and managing a nursing program, including its fiscal planning. Section 1425(a): The director of the program shall meet the following minimum qualifications: • A master's or higher degree from an accredited college or

-At least one year of experience as a Registered Nurse providing patient care (PolicyA-8; Director Job Description, Policy and Procedure Manual)	**Accrediting Commission for Community and Junior Colleges (ACCJC)** https://accjc.org/wp-content/uploads/Accreditation-Standards-2014-with-BA-degree-highlights.pdf#:~:text=The%20instituti on%20ensures%20that%20minimum %20degree%20requirements%20are% 2060%20semester&text=Faculty%20qu alifications%20include%20knowledge %20of%20the%20subject%20matter %20and%20requisite. **Administrative Capacity** -The institution has sufficient staff, with appropriate preparation and experience to provide the administrative services necessary to support its mission and purpose. (Standard III.A.9 and III.A.10) https://accjc.org/wp-content/uploads/Accreditation-Standards_-Adopted-June-2014.pdf (page 9) Standard III. A. 3, III.A. 4. "Administrators and other employees responsible for educational programs and services possess qualifications necessary to perform duties required to sustain institutional effectiveness and academic quality." Degrees are from accredited institutions by US accrediting bodies.	university which includes course work in nursing, education, or administration. • One (1) years' experience as an administrator with validated performance of administrative responsibilities consistent with section 1420(h). • Two (2) years' experience teaching in pre-or post-licensure registered nursing programs; and • One (1) year's continuous, full-time or its equivalent experience direct patient care as a registered nurse; or • Equivalent experience and/or education, as determined by the board. 5(b) the Assistant Director shall meet the education requirements set forth in subsection (a)(1) above and the experience requirements set forth in subsections (a)(3) and (a)(4) above, or such experience as the board determines to be equivalent.

** Repository Items: Belen Kersten CNOR(E); Belen Kersten PHN; Belen Kersten resume 2023; Director Profile Table (Transcripts available on site.)

The director of the program, Belen Kersten, has been an RN for over 49 years. She spent most of her career in nursing in the operating room providing bedside care. She holds emeritus status certification as an operating room nurse (CNOR[E]). Besides being the current director, since joining the educational community at College of the Sequoias in 2007 Belen has been a professor and taught med/surg, pediatrics and obstetrics for the nursing program, served as the Division Chair, and the program's Interim Director (11/2013-1/2015) until accepting the position of Director in January of 2015.

Belen achieved her Associate of Arts (Mathematics) in 1969 from College of the Sequoias. She furthered her career with a diploma in nursing from Samuel Merritt Hospital

School of Nursing, and then her bachelor's degree from California State University-Dominguez Hills. She completed her master's degree in nursing administration in 2006.

Table 1.4b Belen Kersten Work Experience and Education

AGENCY NAME AND CITY/STATE	POSITION/TITLE	SPECIFIC CLINICAL AREA(S)	FROM MONTH/YR	TO MONTH/YR
College of the Sequoias Visalia, CA	Director of nursing		01/01/2015	Present
College of the Sequoias Visalia, CA	Interim Director of Nursing		11/01/2013	12/31/2014
College of the Sequoias Visalia, CA	Faculty (Remediated to Specialty)	Perinatal	01/2013	10/2013
College of the Sequoias Visalia, CA	Faculty (Remediated to specialty)	Pediatrics	8/2009	12/2012
College of the Sequoias Visalia, CA	Faculty	Medical-Surgical	8/2007	5/2009

College/University	Degree & Month/Year Completed	Area of Preparation
California State University—Dominguez Hills	Master of Science; Dec.2006	Nursing-Nurse Administrator
California State University—Dominguez Hills	Bachelor of Science; Dec 2004	Nursing
Samuel Merritt Hospital School of Nursing-Oakland, CA	Diploma in Nursing; June 1975	Nursing
College of the Sequoias-Visalia, CA	Associate of Arts; June 1969	Mathematics

Criteria 1.5 *The nurse administrator:*

a) *Is oriented and mentored in the assigned roles and responsibilities;*
b) *Develops and maintains expertise in the assigned responsibilities, including administration and leadership of the nursing program; and*
c) *Has sufficient time for the assigned roles and responsibilities*

Criteria 1.5a

The current director served as Interim Director for over a year before accepting the role. During that time, she received guidance and mentoring from the previous director who had stepped down to assume her previous faculty role as professor. The director also receives support from the program Dean. In the Division Chair/Assistant Director role (currently a combined role) the individual receives guidance, training, and mentoring from the director in preparation for the

director's prolonged absence or vacancy of the position (retirement etc.). The director and assistant director/division chair participate in important campus committees (Curriculum, Instructional Council). The director is a member of the California Organization of Associate Degree Nurses-North (COADN).

Criteria 1.5b

The director remains current in the role by attending COADN meetings and conferences biannually, attends CA BRN meetings monthly and completes professional development activities. She is a member of the Instructional Council (campus) and the Campus Curriculum Committee as an advisory member. She attends all manager meetings as required and contributes to planning and development of the G.O. Master Plan. College of the Sequoias offers a multitude of professional development opportunities through the Faculty Enrichment Committee (FEC), online training opportunities, and classes (Staff fee waiver) etc. https://www.cos.edu/en-us/administration/human-resources/employee-resources#development.

Criteria 1.5c

The role of director is a full-time administrative position with 100% of the time being designated to the role. In summary, the Director coordinates and directs the development of the RN program for the COS Division of Nursing and Allied Health. The Director is responsible (a) to the students to facilitate an atmosphere of learning which encourages each student to succeed at his or her maximum potential, (b) to the faculty to promote an atmosphere which encourages academic freedom and development of the full potential of each instructor, (c) to the college to develop and maintain policies harmonious with college policies and philosophy, and (d) to the community to best utilize district resources for the education of RNs who are prepared to give safe and effective nursing care. (Ref: Policy A-8 Director Job Description; repository 1.4).

Repository Items: Criteria 1.4, 1.5: Director Profile for Belen Kersten, Belen Kersten Education Table & Work, Handbooks and Manuals: California Nurse Practice Act, 2024.

Criteria 1.6 The nurse administrator has the authority to:

a) Administer and lead the nursing program;
b) Prepare the nursing program budget with faculty input; and

c) Administer fiscal resources allocated to the nursing program.

Criteria 1.6(a)

The job description for the position of director in the nursing program specifically delegates the specific duties of promoting and coordinating the development and implementation of the nursing program, and curriculum that meets the CA BRN requirements and meets the needs of students, faculty, and community. She is responsible for completing nursing course and program evaluations, adjunct/ part-time instructor evaluations and providing opportunities for professional growth of all faculty. The Director oversees the development and implementation of program policies and procedures, student recruitment, and orientation of new staff members.

**Repository Item: Criteria 1.4: A-08 Job Description-Director

Criteria 1.6(b and c)

The Director of the nursing program at COS, per their job description (see repository item criteria 1.4 as listed above), directs the preparation, implementation, and supervision of the division budget; assists in the development, location, and assignment of classroom facilities and equipment; prepares nursing program research and reports, including grant applications.

The Director of the Nursing Program is fully responsible for all nursing budget decisions. (Ref: Policy A-8 Director Job Description; repository item criteria 1.4).

Criteria 1.7 *When present, faculty and/or staff who assist or support nursing program administration:*

a) Hold the educational qualifications as required by the governing organization and the regulatory agencies;
b) Are experientially qualified for their assigned roles and responsibilities;
c) Are sufficient in number; and
d) Have sufficient time for their assigned roles and responsibilities.

The College of the Sequoias nursing program is led by the program Director with help from the Assistant Director/Division Chair, faculty, Administrative Assistant and Senior Secretary for the nursing program, the Simulation Coordinator and technician, and a skills lab instructor.

The **Division Chair** holds a dual role as the **Assistant Director (if qualified)**. There can be more than one Assistant Director. The Assistant Director is a voluntary position (candidates must meet all the qualifications) but is also included in the role of the Division Chair so that there is always at least one Assistant Director who meets the requirements of the CA BRN. Having the Division Chair also act as Assistant Director provides the individual with the administrative experience necessary to assume the role of Director should the need arise due to the Director's prolonged absence or vacancy of the position.

*The Division Chair's roles and responsibilities are located in the **repository (Standard 1 Criteria 1.7) the job description is located in the repository in the "Policies and Procedures Manual", Policy A-10.**

The Assistant Director meets all qualifications as set forth by the CA BRN, and the GO (Table 1.7(a): Minimal Qualifications for the Assistant Nursing Program Director).

Table 1.7(a) Minimal Qualifications for the Assistant Nursing Program Director

Governing Organization	CA Community Colleges Chancellor's Office	California Board of Registered Nursing
A Master's degree or higher degree from an accredited college or university which includes course work in nursing, education, or administration, at least one year's experience as a registered nurse providing direct patient care or such experience as the BRN deems to be equivalent, and be a faculty member within the RN program for a minimum of two years.	-Masters in nursing OR -Bachelors in nursing AND -Masters in health education or health science OR the equivalent OR the minimum qualifications as set by the Board of Registered Nursing, whichever is higher. Reference: https://www.cccco.edu/-/media/CCCCO-Website/docs/minimum-qualifications/CCCCOReport-Minimum-Qualifications-2023_.pdf

Page 46. | Section 1425 Faculty Qualifications and Changes 5(b) page 105: -The assistant director shall meet the education requirements set forth in subsection (a)(1) above and the experience requirements set forth in subsections (a)(3) and (a) (4) above, or such experience as the board determines to be equivalent.

Section (a)(1): A Masters or higher degree from an accredited college or university which includes course work in nursing, education or administration; (a)(3): Two (2) years' experience teaching in pre-or post-licensure registered nursing programs; and (a)(4): One (1) year's continuous, full-time or its equivalent experience direct patient care as a registered nurse |

** **Repository Item:** Table 1.7 (b) Assistant Personnel Status and Qualifications

The Director also has assistance from the **Administrative Assistant to the Director of Nursing** and the **Senior Nursing Secretary**. Their roles are many and include collection of important demographic and other data for grant input, review of and enforcing enrollment criteria, review of applications, Complio compliance for clinical placements, scheduling of classes and rooms, etc.

Job duties of the Administrative Assistant include:

- Organize and manage the day–to–day activities of an assigned office to assure efficient and effective office operations; coordinate communications; relieve the administrator of administrative detail.
- Perform a variety of duties independently in support of functions delegated to assigned administrator; interpret and apply rules and regulations as appropriate.
- Prepare correspondence and memoranda independently or from oral instructions.
- Prepare and edit a wide variety of materials such as correspondence, reports, forms, applications, memoranda, flyers, brochures and other documents.
- Perform a variety of duties in support of assigned function such as maintaining credential, payroll and sick leave records of employees assigned to function, assisting at special events and performing research and other special projects.
- Coordinate communication between the administrator and staff, students, the public or other District or campus officials; obtain and provide information, coordinate activities and resolve issues.
- Greet office visitors and initiate and answer telephone calls; screen and direct calls and visitors to appropriate personnel; take message as necessary.
- Respond to requests for information from students, staff and the general public regarding
- District programs, policies, procedures and regulations.
- Maintain a variety of records, logs and files including information of a confidential nature;
- Maintain confidentiality of information and records.
- Maintain and compile new and modified curriculum data for input into computer terminal for the production of the annual college catalog as assigned.
- Compile information and data for reports and assist in the preparation of reports as required.

- Review, check, correct and compile a variety of information; verify data for accuracy, completeness and compliance with established procedures; input and retrieve computerized data in computer systems as required.
- Schedule meetings, conferences and appointments for assigned administrator; maintain administrator's calendar.
- Prepare agenda items for meetings as required; take and transcribe minutes and distribute to appropriate personnel as required; maintain records for meetings as required.
- Receive, open and route mail; order, issue and maintain department supplies, forms and equipment.
- Coordinate communication and activities with other educational institutions, vendors, other outside organizations and the public.
- Operate a variety of office equipment such as typewriters, word processors, computer terminals, calculators, copy machines, and dictation equipment.
- Assist in the gathering, preparation and record-keeping of division class schedules to include maintenance record-keeping for all curriculum masters within the District throughout the year.
- Utilize the District's integrated software in performing the required duties of the position.
- Perform related duties as assigned

Job Duties of the Senior Secretary Include:

Perform secretarial duties and relieve the administrator of a variety of clerical, technical and routine administrative duties; serve frequently as a liaison between the administrator and staff, public and other campus personnel

- Review and proof documents, records and forms for accuracy, completeness and conformance to applicable rules and regulations.
- Train and provide work direction to others as assigned; recommend new and revised office procedures as appropriate.
- Collect and compile statistical and financial data and other information for inclusion into special and periodic reports.

- Assist in monitoring budget expenditures and maintaining expenditure records; order and maintain office supplies; maintain a variety of records and files.
- Order and receive library books, supplies, and materials as assigned; type purchase orders according to established guidelines and procedures; process invoices
- Communicate information in person or by telephone where judgment, common knowledge and interpretation of policies and regulations are necessary.
- Coordinate activities of assigned office between the administrator and staff, the public or other District or campus officials.
- Operate a computer terminal for the preparation and maintenance of a variety of complex documents, correspondence, reports and related materials.
- Edit and prepare a variety of correspondence, memoranda, reports, flyers, brochures and other materials; record and transcribe minutes; compose routine correspondence as assigned.
- Receive, open and distribute mail; receive visitors, arrange travel, schedule appointments, screen visitors and telephone calls and refer to appropriate staff members.
- Establish and maintain positive staff and public relations.
- Arrange and schedule a variety of meetings and conferences.
- Operate a variety of office machines and equipment, including typewriter, copier and calculator.
- Utilize the District's integrated software in performing the required duties of the position.
- Perform related duties as assigned.

Repository items: Criteria 1.7 Job bulletin for Administrative Assistant, and Senior Secretary

When developing our new concept-based curriculum, it was necessary to hire a simulation coordinator to manage and maintain the new simulation lab and develop the policies and procedures for its use.

The duties and responsibilities of the simulation coordinator include:

- Leads the design, development, and delivery of simulation initiatives for the simulation laboratory program.
- Leads the development of required operational processes and procedures for the simulation laboratory

- Promotes simulation services
- Collaborates on the integration, development, and implementation of simulation

Included in each job responsibility are several specific competencies.

Repository Items: Simulation Coordinator Job Description "Policies and Procedures Manual," Policy A 26 for a comprehensive list of roles, competencies, and responsibilities

A simulation technician was hired initially part time and later converted to a full-time position and assists in all simulation from moulage, to assisting during simulations (patient voice), prep, clean up, mannequin maintenance and repair/troubleshooting.

The roles and responsibilities of the simulation lab technician include:

- Maintains the Nursing Simulation lab in support of instructional programs; install, relocate, and provide connectivity to existing networks as appropriate.
- Programs patient care simulators, prepares scenario props, and creates scenario moulage to model physiological responses to the clinical and skill objectives and specifications identified by instructional staff.
- Assists faculty & Sim Lab Educator with scenarios and operation of simulators as needed.
- Immediately after each scenario, restores the laboratory to pre-scenario condition.
- Install, operate, maintain, update, and repair equipment and apparatus as it relates to computer technology and the simulation lab.
- Operates instructional media equipment such as video cameras, multimedia computer systems, and audio and video distribution systems used in the simulation lab.
- Inventory, order, maintain, and stock supplies, materials, and equipment in the simulation lab.
- Provide support to students and nursing faculty to improve competencies and skills related to human patient simulators.
- Maintain a variety of records related to simulation lab operations and equipment.
- Maintain laboratory schedule, attendance records, and tracks laboratory usage.
- Maintain clean well-equipped lab and facilitates a supportive student learning environment. Seeks ways to improve or enhance student learning and instruction through

technology.

- Assist in ordering, maintaining, distributing virtual simulation products as needed.

** **Repository Items:** Standard 1, Criteria 1.7: Nursing Simulation Technician job description; Catalogs, Handbooks and Manuals: "Policies and Procedures Manual," Policy A 27 for a comprehensive list of roles, competencies, and responsibilities.

The **Skills Lab Instructor** is an RN who meets the GO and CA BRN qualifications for the position as adjunct faculty. They are experientially qualified to instruct in the skills lab with the equivalent qualifications of an adjunct faculty. She is present during open skills lab hours and facilitates practice and procedures completion by students, oversees the skills lab and monitors supplies, and completes remediation skills check offs for students as needed. The skills lab instructor can work one-on-one with students, work with students in small groups, or oversee many students utilizing the skills lab independently for practice.

Criteria 1.8: The nursing program has sufficient and sustainable fiscal resources to support the program at the locations and for all delivery methods.

Grant funding opportunities became available to the RN program on July 1, 2018. The RN Program received the California Nursing Support Grant from the Chancellor's office that year and has received the same amount every academic year beginning in 2018 to current. This grant was given to the RN program as a nursing support grant to increase enrollment, from the state of California. The Board of Registered Nursing approved our request for increased enrollment, and we added ten LVN to RN students. This grant is used for TEAS (Test of Essential Academic Skills) and for a review course for the graduates after the four semesters. The RN program purchases the assessment, for first time test takers, who are students at the College of the Sequoias. The grant also pays for TEAS workshops that cover the four areas of the TEAS. The trainers are experts in their field.

For the academic years 2019-2020, and 2022-2023, the RN program sought funding from the Song Brown Special Projects Grant and the Capitation grant. The RN program was awarded both Song Brown grants. This funding has allowed the RN program to hire a part-time nursing counsellor (later becoming a full-time position). The nursing counselor can counsel each RN student and counsels pre-nursing students. In addition to the above-mentioned grants, the RN program also sought out VTEA funds (Vocational and Technical Education Act) to enhance

student learning and success. Initially VTEA funding paid for the curriculum consultant over a three-year period. The VTEA funding helped with hiring a student worker for a couple of years. VTEA is now referenced Perkins funding and supports professional development in 2023-2024.

The RN program also has dedicated funds from the college in the form of a base budget. The base budget for nursing was increased in 2023 to support the doubled enrollment of RN students.

Increases to the base budget will be made following a program review which is completed by the Division Chair and the case presented to Instructional Council for consideration in the fall of each academic year.

The total program cost for each student is approximately $6000.00 for the nursing program.

Repository items: Standard 1, Criteria 1.8, Table 1.8: Nursing Budget and Funding Sources, 2023-07-05 Intent to Award, 2023-2024 RN Awards

Criteria 1.9: The nursing program has sufficient and sustainable physical resources to support the program at all locations and for all methods of delivery.

The majority of nursing program theory courses are delivered in Hospital Rock; a building dedicated to Nursing and Allied Health. In addition to Hospital Rock classes may be held in large class rooms in the Ponderosa Building or in the Live Oak Building. Classes are held on Mondays and are all face-to-face. In the event the student enrollment in any given course exceeds the capacity of the planned room, the instructor requests a large capacity room in another building. We often use the Ponderosa building, which can seat all our students comfortably. Rooms are also reserved by faculty/clinical educators for post-conferences, simulation experiences, and testing. The skills lab is open with an instructor present Monday through Thursdays 12:00-4:00. It is otherwise available to instructors if reserved for clinical instruction.   The skills lab is equipped with multiple mannequins, and every kind of clinical equipment that the student would be expected to be able to use and demonstrate competence in the clinical setting.

The simulation lab includes the sim room which models an actual hospital room, complete with monitors, gurney etc.; a pre-brief/debrief room and control room. These rooms are used by students for scheduled simulation experiences.

All classrooms are "SMART" classrooms with overhead projection, and casting from the computer to the classroom screens. All classrooms can deliver content in a hybrid situation if needed (such as during the Covid pandemic). Two monitors are located on each teaching podium, with a hard drive and available disc player, along with the doc cam. Internet connection is available to each classroom.

The nursing program at COS has space available to them in the following buildings and rooms:

Table 1.9(a) Nursing Program Rooms and Capacity

Hospital Rock Room	Capacity
108A Simulation Debriefing Room	7
108 B Simulation Room	8
108 Skills Lab	48
110 Computer Lab	48
113 (Used by Pharmacy Tech but available to nursing when not in use)	48
126 Classroom (often used by PTA program)	54
127 Classroom	54
128 Classroom	54
129 Classroom	54
133 Classroom/Conference room	65 (38 chairs)
134 Classroom	72
103-106 and 115-125 (16) Faculty Offices	Dedicated office space for each faculty
101-102 (1) Nursing Office/Director	4 (Two admin assist, one student worker when needed, and the Director)

Table 1.9(b) Additional Rooms Used by Nursing Program and Capacity

Additional Rooms/Buildings Available to Nursing	Capacity
Ponderosa Room 350	244
Live Oak Room 110	51
Live Oak Room 113, 114	52
Live Oak Room 117	51
Learning Resource Center and Library	Computer availability, study spaces, meeting rooms, Librarian resource etc.
Giant Forest Faculty Offices (2)	Dedicated office space for one faculty member each.
Giant Forest Room 204	20 Used as post-conference space and occasional skills practice.

NOTE: All classrooms and the computer lab are "SMART" classrooms and are equipped with a faculty podium/desk, chair; faculty use computers, a monitor, smart use equipment for using the overhead projection, DVD player, Blue Ray player, Hyflex capable set up, mouse(s) student desks. Each room has several white boards for instruction purposes. The computer lab is equipped with linear tables with a computer for each student to use (48). The skills lab is equipped with mannequins, and medical equipment as would be expected and meets the needs of every instructor and student in the program (VS equipment, IV pumps, poles, bags, demo meds, arms for IV insertion, chest mannequins etc.); high fidelity mannequins are located in the simulation room which is also equipped with patient monitors, a gurney, hand hygiene equipment, a white board etc.

*Repository Items: Standard 1, Criteria 1.9 Visalia Campus Map; Virtual Tour of Hospital Rock

All students at COS are encouraged to use the Learning Resource Center/Library in Lodgepole building, which offers many resources to our students. Nursing has a dedicated Librarian to assist nursing students with research. They have models that can be signed out and used by students, computers, and available room space for group work. The learning resource center will also assist students who lack internet access or computer access with getting a computer and a hot spot.

Students additionally have access to the campus quad, a campus cafeteria, and the Grind coffee shop for common spaces. The Giant Marketplace is available to students in need of food, clothing, and other necessities. The mission of the Giant Marketplace "recognizes that secure access to food and housing is essential to academic success in higher education and must, therefore, be treated as a top educational priority. As such, we advance a campus culture of caring that recognizes that students are humans first. We exemplify this commitment in our public statements and in our daily work by addressing the structural poverty that created these basic needs security crisis often provided at no cost to the student." Students are able to self-refer to this program. The following services are offered through the Marketplace: childcare, physical health and hygiene support, emergency housing contacts, food assistance/food pantry, technology support, mental health services, transportation support, and some other services as appropriate. Giant Threads, the clothing assistance program at College of the Sequoias provides business

attire for students attending job interviews, and professional gatherings. These are new clothes that the students get to keep. Students may get one new outfit each academic year.

If the computer lab is being used the nursing office houses two lap top carts loaded with laptops for use by professors and students for testing purposes and an additional cart is located in the computer lab. In this way, students can access a computer for testing even in the general classrooms when needed.

Students who require the services of the Access and Abilities Center are encouraged to seek out assistance there in the Learning Resource Center. The Access and Ability Center will help students identify learning difficulties and attempt to make accommodations for testing, reading assistance, etc., to support student success.

Pinning ceremonies for nursing students are held in the Theater at the end of each semester and in the summer for the year-round RN students.

The COS nursing program is only offered on the Visalia campus.

STANDARD II: Faculty

Faculty are educationally and experientially qualified for their assigned roles and responsibilities, maintain expertise, and are regularly evaluated to support the achievement of the end-of-program student learning outcomes and program outcomes for each nursing program type, and additionally for graduate programs the role-specific competencies.

Criterion 2.1:

Full-time faculty are nurses who:

a) **Hold the educational qualifications as required by the:**
- **governing organization**

The College of the Sequoias (COS) minimum qualifications for faculty in the discipline of nursing follow the current state mandates in determining the minimal qualifications required for the position. See repository item Faculty Hiring Procedures, pg. 4. The minimal qualifications for a nursing instructor (Policy A-12 Job Description-Instructor, 2024) are in

congruence with the California Board of Registered Nursing (CBRN) requirements addressed below under regulatory agencies.

If nursing faculty do not have direct patient care experience (1 year of bedside in last 5 years) that meets the CBRN faculty qualifications for a designated nursing area which they are assigned, the nursing program has designated content experts who will provide remediation to ensure that all faculty are prepared and qualified for their assigned teaching duties. The CBRN defines a "content expert" as an instructor who has the responsibility to review and monitor the program's entire curricular content for a designated nursing area and who must meet minimum qualifications including a master's degree in the designated nursing area, and have completed thirty (30) hours of continuing education or two (2) semester units or three (3) quarter units of nursing education related to the designated nursing area; or have national certification in the designated nursing area from an accrediting organization, such as ANCC; and have a minimum of 240 hours of clinical experiences within the previous three years in the designated nursing area; or 1 academic year of registered nurse level clinical teaching experience in the designated nursing area within the previous five years.

Ref. California Nursing Practice Act with Regulations and Related Statutes (2024), Section 1420 (f) "Content expert". p. 99)

Repository Item: Catalogs, Handbooks and Manuals: California Nursing Practice Act, 2024; Standard 2, Criteria 2.1 Faculty Hiring Procedures

- **regulatory agencies**

The California Community Colleges Chancellor's office (CCCCO) requires that faculty in the discipline of nursing have a master's degree in nursing or a baccalaureate degree in nursing and a master's degree in health education or health science or equivalent or meet the minimal qualifications as set by the Board of Registered Nursing, whichever is higher.

Ref: California Community Colleges Chancellor's Office: Minimum Qualifications for Faculty and Administrators in California Community Colleges, 2023, p. 46.

Repository Item: Standard 2, Criteria 2.1: California Community Colleges Chancellor's Office: Minimum Qualifications for Faculty and Administrators in California Community Colleges, 2023.

The California Board of Registered Nursing (CBRN) requires that full-time faculty are approved by the board. Each faculty must possess a clear and active nursing license and a master's degree or higher that includes incorporates coursework in nursing, education or administration. Faculty are also required to have direct-patient care experience within the last five years in the nursing area to which the faculty member is assigned. The requirements for direct-patient care can be met by having one year's continuous, full-time experience providing direct patient care as a registered nurse in the designated nursing area or one academic year of registered nurse level clinical teaching experience or its equivalent that demonstrates clinical competence. Lastly, the faculty member must have completed a minimum of one year's experience in teaching courses related to registered nursing or completion of a post-baccalaureate course which includes practice in teaching registered nursing.

Ref: California Nursing Practice Act with Regulations and Related Statutes (2024). § 1425 Faculty Qualifications and Changes. pp. 104-105).

** **Repository Item**: Catalogs, Handbooks, and Manuals: California Nursing Practice Act 2024.

Hold nursing licensure, and certification as applicable, consistent with their assigned roles and responsibilities.

All full-time nursing faculty hold current active CBRN licensure. As addressed Table 2.1a educational qualifications, certification in areas of nursing related to assigned duties is not a requirement to function as a nursing instructor in California. A portion of the full-time nursing faculty hold certifications in areas of nursing that are consistent with their designated nursing area of instruction.

**Repository Item: Standard 2, Criteria 2.1 Faculty Certifications;

*Faculty transcripts will be available to reviewers on site, both in the LMS (CANVAS Shell) and hard copies in the Director's office.

Table 2.1a Full-time Faculty Degrees, Licensure, Areas of Expertise and Certifications.

Table 2.1a Full-Time Faculty Degrees, Licensure, Areas of Expertise, and Certifications					
Name	**Nursing License #**	**Expiration Date**	**Area(s) of expertise**	**Degree**	**Certifications**
Carlson, Heather	95241989	1/31/25	• Medical Surgical • Geriatrics	MSN-Nursing Education	

Chavez, Christine	95111004	5/31/26	• Medical Surgical • OB	MSN-Nursing Education	RNC-OB 2020 C-EFM 2023
Childers, Carolyn	477331	03/31/26	• Medical Surgical (Content Expert) • Geriatrics	MSN - Nursing Education	
De La Cruz, Heather	836144	01/31/25	• Psych/Mental Health • Medical Surgical • Geriatrics	MSN – Nursing Psychiatric Mental Health Nurse Practitioner	Psychiatric Mental Health Nurse Practitioner Across the Lifespan (PMHNP-BC) / 02/2022
Dilbeck, Elizabeth	719801	03/31/25	• Medical Surgical • Geriatrics	MSN - Leadership and Management	
Escobar, Mary	530510	08/31/26	• Medical Surgical • Geriatrics	Family Nurse Practitioner	
Felsted, Kimberly	681613	01/31/26	• Medical Surgical • Geriatrics	MSN-Nursing Education	CTE Teaching Credential
Glasgow, Catherine	673275	03/31/25	• Medical Surgical • Geriatrics (Content Expert)	MSN - Family Nurse Practitioner	
Morris, Anne	463797	05/31/26	• Simulation • Medical Surgical • Pediatrics • Geriatrics	MSN - Nurse Educator	
Morris, Robert	494691	07/31/25	• Simulation • Medical Surgical • Geriatrics	MSN - Nurse Educator	
Ramos, Erica	628581	02/28/25	• Medical Surgical • Geriatrics	MSN-Nursing Education	
Smith, Amy	95153791	04/30/25	• Medical Surgical • Geriatrics	MSN - Nursing Education	
Tinoco, Vicente	9519719	3/31/25	• Peds • Medical Surgical	MSN, Leadership and Management DNP	NCC Credential in Neonatal Intensive Care Nursing 02/2023 RNC-NIC
Toth, Tina	634908	05/31/25	• Obstetrics (Content Expert)	MSN - Nursing Education	NCC Credential in Inpatient Obstetric Nursing (RNC-OB): 10/22/2009
Vails (McNabb), Heather	661074	09/30/26	• Pediatrics (Content Expert)	MSN - Nursing Education	Neonatal Intensive Care Certification 01/2012

b) Are experientially qualified for their assigned roles and responsibilities; and

All core courses in the nursing program are currently being facilitated by full-time faculty that have expertise in the nursing area to which they are assigned and have been approved by the

CBRN to teach. Full-time faculty teach all course lectures and a portion of the associated clinical rotations. Remaining clinical rotations are taught by adjunct/part-time faculty members under the guidance of the course full-time faculty (Faculty Profile Table, A-12 Job Description-Instructor 2020, A-22 Course Selection Process 2023). See in the following links:

-Load Selection https://www.dropbox.com/scl/fi/zminz9qcx1w4582crfzbs/A-22-Course-Selection-Process-10-2023.docx?rlkey=svr47bd28rnl5xygd51a89cba&dl=0

-Faculty Job Description: https://www.dropbox.com/s/lelx3msusdoln86/A-12%20Job%20Description%20-%20Instructor%2002-2020.pdf?dl=0

-Faculty Roles and Responsibilities:
 https://www.dropbox.com/s/87883hm12gp2gxo/A-14%20Faculty%20Role%20and%20Responsibilites%2005-2023.pdf?dl=0

> ### c) Are sufficient in number.

The COS nursing program currently has fifteen full-time tenured or tenure-track faculty members and one full-time temporary faculty member. Table 2.1b demonstrates full-time faculty-to-student ratios in the classroom, clinical, skills lab, and simulation (following page). The CBRN does not dictate specific full-time faculty-to-student ratios for nursing faculty but does provide six criteria to base the ratios on [Nurse Practice Act, 2024 Article 3, section 1424 (k)]. The COS Nursing Program identifies faculty-to-student ratios in the classroom and in clinical rotations, simulation, or skills lab. Clinical facilities additionally add restrictions on the number of students allowed on a given unit at a given time. The generally accepted number of students being approximately ten. Some will allow even less (example: Kaweah Health OB Labor and Delivery 4-5, Postpartum 4).

** Repository Items: Standard 2, Criteria 2.1: Costa master agreement for 2021-2024; California Nursing Practice Act, 2024; Policy and Procedure Manual, Policy A-17: Student-Faculty Ratios in the Clinical Setting.

Table 2.1b Full-Time Faculty-to-Student Ratios

Table 2.1b Full-time Faculty-to-Student Ratios			
Setting	**Agency Ratio Regulations**	**COS Ratios**	**COS Nursing Program Ratios**
Classroom:	Not Applicable	1:40(41+ students are considered large class and is voluntary on the part of the faculty)	1:40-50(41+ students are considered large class and is voluntary on the part of the faculty)
Skills Laboratory:	Not Applicable	Not specified by governing body	The number of students seen by the skills lab instructor depends on the

			activity being reviewed and can be 1:1if necessary (skills check off) or a group demonstration approx..1:4-5
Clinical:	CBRN-Ratios based on criteria 1-6, Art 3, section 1424	Not specified by governing body	1:10 (exceptions may be made in third and fourth semester when the instructor has LVN students working on RN degrees, the ratio may increase to 1:11-1:12). The instructor must approve.
Simulation:	Not Applicable	Not Specified by governing body	1:10 with 10 students broken into smaller groups of 3-4.

Ref: Master Agreement Large Class Size Factors and Overload section 8.6.1, 8.6.3 pp. 24-25 & 8.8 Base Class Size p.25;

As stated in the COSTA Master Agreement, Full-time faculty workload is 15 LHE per semester or 30 LHE per academic year. The nursing policy A-22 Course Selection Process for the Division of Nursing, in accordance with the COSTA Master Agreement, requires full-time nursing faculty to choose 15 LHE per semester. Faculty may choose overload in their content areas approved by the CA BRN as per the process identified in A-22. Table 2.1c shows the full-time faculty workload assignments from fall 2021-spring 2025. Full-time faculty-to student ratios per course/section for 2021-2022, 2022-2023, 2023-2024 and 2024-2025 are listed in Table 2.1d below and historical data is available in the document repository.

A review of all College of the Sequoias full-time faculty load reveals that full-time faculty load across all divisions looks very similar to that of nursing faculty load. All divisions allow for voluntary acceptance of overload after load selection is complete. See the submitted full-time faculty load across all divisions in the repository.

**Repository Item: Standard 1, Criteria 2.1: Faculty Verification Forms, Full Time Faculty Load for All Divisions

Full-time faculty non-teaching responsibilities include two 4-hour mandatory staff development days, 12 hours of additional faculty development activities that comply with Title 5 Section 55724, five (college hour) office hours/week addressed in Article VIII of the COSTA Master Agreement. Article XXIII of the COSTA Master Agreement identifies additional faculty professional responsibilities (Master Agreement in repository). Additional nursing faculty responsibilities including curriculum development/revision, attending and participating in team, division, and nursing committee meetings (of which the faculty is a member), participation in

pinning ceremonies, and others are addressed in the nursing policy A-12 Nursing Professor Job Description.

** **Repository Items**: Standard 2, Criteria 2.1- COSTA Master Agreement 2024-2027; Catalogs, Handbooks and Manuals: Policy and Procedure Manual; Standard 2, Criteria 2.1: Table 2.1c Full-Time Faculty Workload Assignments 3-Year View

Excerpt from Table 2.1c for Fall 2024 and Spring 2025 Current Full-Time Faculty

Faculty	Fall 2024 Workload LHE	Spring 2025 Workload LHE
Heather Carlson	19.5	27.9
Christine Chavez	19.5	22.668
Carolyn Childers	23.4	18.7
Heather De La Cruz	24.6	24.6
Elizabeth Dilbeck	23.4	27.9
Mary Denise Escobar	23.2	21.4
Kim Felsted	24.0	17.4
Cathy Glasgow	19.9	24.6
Anne Morris	15.00	19.2
Rob Morris	16.60	21.4
Erica Ramos	17.4	17.4
Amy Smith	6.3	21.4
Vicente Tinoco	19.2	15.9
Tina Toth	18.324	15.432
Heather Vails (McNabb)	18.9	15.9

Table 2.1d Full-time Faculty-to-Student Ratios for Courses/Sections 2024-2025						
Course	**Sections**	**Fall 2023**	**Spring 2024**	**Fall 2024**	**Spring 2025**
NURS 121 3 Units of lecture	1	1:39	1:40	1:40	1:40
	2	1:38	1:40	1:40	1:40
NURS 124 1.5 Units lecture	1	1:39	1:40	1:40	1:40
	2	1:39	1:40	1:40	1:38
NURS 123 2 Units lecture	1	1:44	1:40	1:40	1:40
	2	1:44	1:50	1:50	1:37
NURS 133 1.5 Unit lecture	1	1:48	1:40	1:40	1:36
	2	N/A	1:46	1:39	1:48
NURS 134 2 Units lecture	1	1:48	1:44	1:40	1:36
	2	N/A	1:45	1:39	1:48
NURS 135 1.5 Units lecture	1	1:38	1:40	1:40	1:36
	2	N/A	1:38	1:39	1:38
NURS 143 1.5 Units lecture	1	1:39	1:36	1:40	1:40
	2	N/A	N/A	1:39	1:39
NURS 144 3 Units lecture	1	1:49	1:46	1:40	1:40
	2	N/A	N/A	1:49	1:49

NURS 174 3 Units lecture	1	1:49	1:48	1:48	1:44
	2	N/A	N/A	N/A	1:44
NURS 175 1 Unit lecture	1	1:49	1:47	1:48	1:44
	2	N/A	N/A	N/A	1:44

**N/A= Increased enrollment began in semester 1 Fall 2023. Progression of this new cohort can be seen as noted in section 2 of each course through the semesters. The second cohort of students won't reach 4th semester until Spring 2025.

Standard 2, Criteria 2.2

Part-time faculty are nurses who:

  a. **Hold the educational qualifications as required by the:**

   - **Governing body**
   - **Regulatory agencies**

There are currently 26 adjunct faculty members teaching in the Spring 2025 semester, who provide clinical instruction in the nursing program. Two are clinical teaching assistants and the remainder are Assistant Instructors. Following all full-time load selection remaining clinical rotations are filled with qualified adjunct faculty in the role of clinical instruction. Minimal qualifications are dictated per the school's requirements as shown in the assistant instructor job=-uyhyh; description (repository) and by the Board of Registered Nursing (California Nursing Practice Act 2024, Assistant Instructor and Clinical teaching assistant: Section 1425c and 1425e page 105). New hires are screened for current licensure and ability to meet the minimal qualifications for their teaching role. The College of the Sequoias Nursing Program uses the guidelines presented by the CCCCO as they require an elevated level of experience and education as compared to the CA BRN. We hold ourselves to the higher standard.

Assistant Instructor Job Description: https://www.dropbox.com/s/83wr7apd4zbvxtq/A-13%20Job%20Description%20-%20Assistant%20Instructor%2012-2020.pdf?e=1&dl=0

Adjunct (Part-time) Faculty Role & Responsibilities:

https://www.dropbox.com/s/h5dz96irrj409d7/A-21%20Adjunct%20Faculty%20Role%20and%20Responsibilities%2012-2020.pdf?e=1&dl=0

Repository Items: Standard 2, Criteria 2.2: Part-Time Faculty Licenses Standard 2, Criteria 2.2 Policy A-13 Job Description-Assistant Instructor, Part-time Faculty Certifications, Policy A 21: Adjunct Faculty Role and Responsibilities, Adjunct Faculty Verification Forms

Adjunct faculty who teach in the clinical setting for the COS nursing program have an instructor to student ratio of 1:10. Adjunct accompany students to the clinical site, provide direct observation of student activities and assist with procedures or delegate to the nurse mentors on the units as appropriate.

Table 2.2a Adjunct Faculty Minimum Qualifications

Adjunct Faculty Minimum Qualifications	
College of the Sequoias	CA Board of Registered Nursing
Minimum qualifications as set forth by the California Community Colleges Chancellor's Office. The CCCO minimum qualifications for "disciplines on the list of disciplines requiring any degree and professional experience" page 58 of the Minimum Qualifications for Faculty and Administrators in California Community Colleges states "any bachelor's degree or higher and two years of professional experience, OR any associate degree and six years of professional experience directly related to the faculty member's teaching assignment.	**An Assistant instructor** Shall meet the following qualifications: (1)A baccalaureate degree from an accredited college which shall include courses in nursing, or in natural behavioral or social sciences relevant to nursing practice; (2) Direct patient care experience within the previous five years in the nursing area to which he or she will be assigned, which can be met by: (A) One year's continuous, full-time or its equivalent experience providing direct patient care as a RN in the designated nursing area; or (B) One academic year of RN level clinical teaching experience in the designated nursing area or its equivalent that demonstrates clinical competency CA Nursing Practice Ace Section 1425 (d) page 105 **A clinical teaching assistant** shall have at least one (1) year continuous full-time or its equivalent experience in the designated nursing area within the previous five (5) years as a registered nurse providing direct patient care. Section 1425(e)-page 105 California Nursing Practice Act, 2024.

CCCCO Link: https://www.cccco.edu/-/media/CCCCO-Website/About-Us/Divisions/Educational-Services-and-Support/Academic-Affairs/What-we-do/Curriculum-and-Instruction-Unit/Minimum-Qualifications/cccco-2022-report-min-qualifications-a11y.pdf?la=en&hash=C250C473024B24162799C9E64C787EF7E50DC5C6

The COS Nursing Program follows the CCCCO Minimum Qualifications guidelines for hiring adjunct faculty. All candidates for hire must prove that they meet this minimum qualification before being considered for an interview and hire. In this way we are assured that all faculty including our adjunct meet the requirements set forth in these guidelines.

b. **Hold nursing licensure, and certification as applicable, consistent with their assigned roles and responsibilities**;

c. **Are experientially qualified for their assigned roles and responsibilities; and**

Adjunct faculty are encouraged to participate fully in division meetings and activities though this is not mandatory. Professional development is offered and encouraged. Maintaining licensure is required which requires that Registered Nurses in the state of California complete 30 contact hours of continuing education every two years. For information related to professional development and CEU attainment please refer to the faculty profile table. All adjunct faculty have been encouraged to engage in educational opportunities that reflect both ongoing education in clinical instruction and in maintaining professional competence as a nurse.

The nursing faculty and program director do acknowledge that some fulltime and adjunct faculty have not in the past engaged in professional development specifically designed to improve instructional and clinical teaching practice as this was not a requirement dictated by the CA BRN. With our application for accreditation the program is initiating policy changes that reflect the need for adjunct and full- time faculty to engage in this specific type of professional development and the director of the nursing program is working with "Keith RN" to supply all fulltime and adjunct faculty with a specific course on instructional methods and clinical teaching strategies. In the future this will be a program specific request for all faculty. We must also acknowledge that the programs' ability to enforce mandatory professional development activities is very limited due to the Master Agreements with faculty and the college.

d. **Are sufficient in number**

There are sufficient number of adjunct faculty to fill all open clinical rotations in the nursing program. All faculty and adjunct faculty maintain an instructor to student ratio of 1:10. Rotations are between 5.5 weeks and 8 weeks long depending on the course. Adjunct faculty are allowed to pick up 0.67 FTE only. Adjunct are not allowed to pick up overload without specific approval from the Vice President of Academic Affairs.

The ratios used to determine the adequacy of number of faculty and adjunct is derived from the CA BRN Nursing Practice Act section 1424 (h) that states: "The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing required by section 1426(d) who will be the content expert in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in

the areas to which they are assigned". In addition, the nursing practice act section 1424 (k) outlines six criteria that should be used to base the student/teacher ratios on which include:

1. Acuity of patient needs
2. Objectives of the learning experience
3. Class level of the students
4. Geographic placement of students
5. Teaching methods; and
6. Requirements established by the clinical agency.

Our clinical partners generally accept no more than 10 students per unit at any given time. We have found that 10 students are a very acceptable number of students per faculty to optimize learning and to give the faculty member enough time to provide direct supervision, evaluation, feedback, and assessment of individual students. This number of students per faculty member also optimizes the number of hands-on experiences and opportunities available to students without overcrowding the clinical units or overwhelming the nurse mentors we are working with.

The roles and responsibilities of the adjunct faculty (Assistant Instructors/Clinical Teaching Assistants) can be viewed in Policy A-21: Policy and Procedure Manual in the repository but to summarize, will be held to the same level of accountability as full-time instructors, follow policy and procedure of the nursing program and the college, participate in self -evaluation and the campus wide evaluation process, and perform the following duties:

- Grading of care plans and assignments
- Planning pre and post-conference activities
- Completing student evaluation records (SERs)
- Skills lab activities
- Simulation if applicable
- And other duties as further directed by the course full-time faculty mentor (lead)

Adjunct instructors are mentored by their respective full-time faculty mentor and will meet with their mentors on a regular basis.

The rules governing full-time and part-time workload are the same across the campus. Full-time faculty are not required to pick up overload but may do so if desired. Adjunct can only work

.67% of a full load except in rare circumstances where district administrative authorization is required.

The COSAFA Master Agreement, article IV, page 5 outlines the workload, class assignment and duties of part time (adjunct) faculty. In summary section IV states that adjunct will normally be assigned 67% of a regular faculty full-time assignment or less. Percentages greater than 67% need to be approved by district administration and in no event shall an adjunct faculty member be assigned greater than 67% of a full load for more than two semesters within any period of six consecutive semesters. For reference a full time (100%) faculty member works 30 lecture hour equivalents (LHE) per year; (15 per semester). So, for part time faculty 67% of 30 lecture hour equivalents is 20.1 LHE per year or 10.5 LHE per semester. Class selection and assignment is completed using seniority rights. This is the same for both full-time and adjunct faculty.

Repository Item: Handbooks and Manuals: Policy and Procedure Manual, Policy A-21, COSAFA Master Agreement, Table 2.2 C Adjunct Faculty Workload Allocation

*See Sample Section of Current Adjunct from Table 2.2c Adjunct Faculty Workload Allocation (following Table 2.2b in pagination) Full Historical table 2021-2025 in repository.

Table 2.2b Adjunct Faculty (Currently Teaching S25) Licensure, Degree, Certifications and Areas of Expertise.

Name/Title	Nursing License	Area of expertise	Degree	Certified	Experience in years
Alcantar, Janessa (CTA)	CA 748579	Medical Surgical	ADN		15
Armas, Kaitlyn (AI)	CA 95125243	Mental Health	BSN		7
Bluth Michelle (AI)	CA777959	Medical Surgical	MSN		14
Burg, Anna (AI)	CA 563487	Obstetrics	BSN		24
Casiano, Adriana (AI)	CA 825645	Medical Surgical/Geriatrics	BSN		12
England, Martha (AI)	CA 710882	Obstetrics	BSN		17
Foucht, Gregory (AI)	CA 751751	Medical Surgical/Geriatrics	BSN	AACN	15
Glasgow, Stephanie (AI)	CA95137323	Medical Surgical/Geriatrics	BSN		8
Hernandez, Carolina (AI)	CA 95221178	Medical Surgical/Geriatrics	BSN		4
Hunt, Jessica (AI)	CA 718998	Obstetrics	BSN		12
Jeffries, Kara (AI)	CA 95142515	Medical Surgical/Geriatrics	BSN		7
Kassel, Dora (AI)	CA 95043863	Medical Surgical/Geriatrics	MSN		10
Logson, Larry (AI)	CA 752081	Medical Surgical/Geriatrics	BSN	RNC-NIC, CLC	25
Martins, Breanna	CA 95289695	Medical Surgical/Geriatrics	BSN		2
Moons, Victoria (AI)	CA 95227950	Medical Surgical/Geriatrics	MSN		4
Ojo, Damilola (AI)	CA95247230	Medical Surgical/Geriatrics	BSN		4
Pozar, Agi (AI)	CA 672775	Medical Surgical/Geriatrics	MSN		18
Raley, Danielle	CA 95053489	Medical Surgical/Geriatrics	BSN		10

Servin, Jacqueline	CA660324	Medical Surgical/Geriatrics	MSN/ FNP		20
Smith, Lucas (AI)	CA95224215	Medical surgical/Geriatrics	BSN		5
Suggs, Lisa (AI)	CA743120	Medical Surgical/Geriatrics	BSN	CMSRN/ CRRN	17
Swaim, Darcy	CA95364135	Medical Surgical/Geriatrics	BSN		11
Tanner, Stacie	CA707247	Medical Surgical/Geriatrics	MSN		14
Tovar, Samantha	CA 95288058	Medical Surgical/Geriatrics	BSN		2
West, Jennifer (AI)	CA 608548	Obstetrics/ Medical Surgical	MSN		22
Williams, Katelyn (AI)	CA 95096720	Medical Surgical	MSN		8

Key for table 2.2b Adjunct Faculty Licensure, Degree, Certifications and Areas of Expertise.
AI= Assistant Instructor
I= Instructor
CTA= Clinical Teaching Assistant

Sample Section of Table 2.2c For Currently Teaching (Spring 25) Adjunct Faculty Workload Allocation Using Clinical Units and Lab/Clinical Rotations

Instructor to Student Ratio 1:10 ea. Lab/Clinical Rotation

Name and Current Employee Status	Fall 2023	Spring 24	Fall 24	Spring 25
Alcantar, Janessa (CTA)	N/A	N/A	3 Units 1 Lab	3 units 1 lab
Armas, Kaitlyn (AI)	3 Units 1 Lab	4.5 Units 3 Lab	4.5 Units 3 Lab	4.5 units 3 lab
Berg, Anna (AI)	N/A	3 Units 1 Lab	4.5 Units 3 Lab	1.5 units 1 lab
Bluth Michelle (AI)	N/A	N/A	4 Units 1 Lab	8 units 2 labs
Casiano, Adriana (AI)	4 Units 2 Lab	6 Units 3 Lab	4 Units 2 Lab	8 units 4 labs
England, Martha (AI)	3 Units 2 Lab	4.5 Units 3 Lab	3 Units 2 Lab	3 units 2 labs
Foucht, Gregory (AI)	N/A	4 Units 1 Lab	4 Units 1 Lab	8 units 2 labs
Glasgow, Stephanie (AI)	3 units 1 lab	N/A	N/A	8 units 2 labs
Hernandez, Carolina (AI)	N/A	N/A	N/A	3 units 1 lab
Hunt, Jessica (AI)	1.5 Units 1 lab	4.5 Units 3 Lab	3 Units 2 Lab	3 units 2 labs
Jeffries, Kara (AI)	N/A	6 Units 2 Lab	8 Units 2 Lab	8 units 2 labs
Kassel, Dora (AI)	3 Units 1 Lab	16 hrs./week skills lab	16 hrs./week skills lab	16 hours wk./skills lab
Logson, Larry (AI)	N/A	N/A	N/A	4 units 2 labs
Martins, Breanna	N/A	N/A	N/A	3 units 1 lab
Moons, Victoria (AI)	N/A	N/A	6 Units 2 Lab	3 units 1 lab
Ojo, Damilola	N/A	N/A	N/A	8 units 2 lab
Pozar, Agi (AI)	N/A	N/A	3 Units 2 Lab	3 units 2 lab
Raley, Danielle	N/A	N/A	N/A	3 units 1 lab
Servin, Jacqueline (AI)	N/A	4 Units 1 Lab	N/A	4 units 1 lab
Smith, Luca (AI)	N/A	N/A	N/A	8 units 2 labs
Suggs, Lisa (AI)	N/A	N/A	N/A	9 units 3 labs
Swaim, Darcy	N/A	N/A	N/A	3 units 1 lab
Tanner, Stacie	N/A	N/A	N/A	1.5 units 1 lab
Tovar, Samantha	N/A	N/A	N/A	18 units 4 labs
West, Jennifer (AI)	1.5 Units 1 Lab	1.5 Units 1 Lab	8 Units 2 Lab	8 units 2 labs

Name and Current Employee Status	Fall 2023	Spring 24	Fall 24	Spring 25
Williams, Katelyn (AI)	N/A	4 Units 1 Lab	3 Units 1 Lab	8 units 2 labs

* When viewing the related adjunct faculty verification forms, note that entries are related to dates, times and classes so may appear to reflect varying units and lab sections than what is viewed here. This difference is related to way in which the information must be entered into our system (Banner Web) and can be explained in person if needed during our visit.

*All faculty and adjunct faculty transcripts will be available to reviewers on site in the learning management system or in the Director's office (hard copies).

*Adjunct faculty evaluations are available for review in Human Resources.

Repository items: Standard 2, Criteria 2.2 Adjunct Faculty Certifications, Standard 2, Criteria 2.2 Adjunct Faculty Licenses, Table 2.2b Adjunct Faculty Workload Allocation Using Clinical Units and Lab/Clinical Rotations, Standard 2, Criteria 2.2 Faculty Verification Forms

Standard 2, Criteria 2.3 N/A

**COS Nursing programs do not use non-nursing faculty

Standard 2; Criteria 2.4

Criteria 2.4: Policies for nursing faculty are comprehensive and consistent with those of the governing organization; justification is provided for any policy differences.

College of the Sequoias has a web pages dedicated to governance. The Board Policies and Administrative Procedures are located at the following link:

https://www.cos.edu/en-us/administration/governance/board/board-policies

Chapter 7 of the governance Administrative Procedures and Board Procedures (APs and BPs) outlines, 60 human resources policies and procedures which represent all human resource information pertaining to everything including diversity, delegation of authority, compensation, collective bargaining, evaluations, and much more.

The nursing policy and procedure manual contains everything pertinent to nursing in particular and outlines policy and procedure for the nursing program (mission, vision,

philosophy, conceptual framework, ANA code of ethics, Orientation of new faculty, job descriptions, faculty absences etc. The nursing policy and procedure manual differs from that of the governing organization in that it specifically lays out the nursing program whereas the governing organization policy and procedure address all faculty and all the policies apply to everyone including nursing. The nursing program follows the governing organizations policies and procedures first as the top authority and then implements nursing related policy and procedure based on regulation as outlined in the California Nursing Practice Act. We do not disagree with the G.O. policies and procedures but rather compliment them and add "unique to nursing" specific information in our policies and procedures. Our policies address nursing's unique curriculum requirements, dress code, clinical practice standards, professional conduct etc. These are policies that other divisions would not need or require. Hiring, rank, salary schedule placement and tenure procedures are dictated by the G.O. and nursing following those policies just like all other divisions on campus. Policies of the G.O and the nursing program are comprehensive and nursing policy aligns with the G.O except where additional nursing specific policy is required by the nature of the program (need for vaccinations, uniform and dress code and others already mentioned).

Policies for hiring faculty are consistent between the governing organization and the nursing program. Compensation for new faculty is determined by following a specific guideline (salary schedules) as outlined in the Master Agreement. The COSTA and COSAFA Master Agreements also outlines all teaching and non-teaching responsibilities for faculty.

The governing organization hiring procedures are located in the Master Agreement Article VII page 7, and follows the joint agreement on hiring policy between the College of the Sequoias Faculty Senate, Management and the Board of Trustees. Nursing follows the hiring policy and procedures as outlined by the governing organization and the Master Agreement.

Workload for faculty is outlined in the Master Agreement in Article VIII page 8-25. The Nursing program utilized the Master Agreement to assign workload and follows all the governing organizations policy as written in the Master Agreement.

Nursing does have policies that specifically outline the roles and responsibilities of faculty in clinical facilities. The governing organization would not need such a policy and this is unique to nursing and other health care related programs. The policy summarizes use of the

nursing process in assisting students in the clinical field, developing a clinical syllabus, remaining current in practice, acting as liaison between clinical sites and students and nursing administration, and oversite of the students. Nursing **policy A-12:** Nursing Professor Job Description outlines the specific duties and responsibilities of the Nursing Division Instructor including supervision of students in lab settings, remaining competent in skills and knowledge, attending team meetings, participation in self-evaluation, supporting adjunct instructors, participation in pinning ceremonies and coordinating and planning activities regarding assessments and outcomes in TracDat/ Nuventive Improve. **Nursing policyA-17:** Student-Faculty Ratio describes the rationale and general guidelines for student-instructor ratios maintained during clinical laboratory classes and delineates the differences between first through fourth semester student/client assignment. This again would not be needed by campus faculty outside of the nursing program (except perhaps in allied health programs which would have their own policies).

Nursing faculty are required to meet the requirements of our community partners that serve as clinical sites for students. Faculty are required to be current in their vaccinations, CPR certifications, and some facilities require background checks and orientation. This would not apply to the general faculty of other divisions and is not addressed by the governing organization.

The nursing program and the G.O. policies and procedures surrounding recruitment, hiring, compensation verification of eligibility for employment, rank or placement on the compensation table and evaluation procedure are the same, are comprehensive, and apply to all faculty. Policies in the G.O. follow the COSTA and COSAFA (full time and part time) Master Agreements as negotiated by the two unions.

The nursing program does have some additional policies that must be followed:

A-01 through A-06: Outline the program's philosophy, curriculum design, conceptual framework, nursing code of ethics, and the organizational chart of the nursing division. These are different from but align with the G. O. as outlined in Standard 1.

A-7: Orientation of New Nursing Faculty outlines the process of mentoring and orienting new faculty to the nursing program. No such AP or BP exists. The G.O. leaves orientation and

training procedures and processes up the various divisions. There is a Human Resources link created and maintained by the Instructional Council addressing faculty onboarding.

The policy also refers to the pertinent college-wide policies, college-wide orientation practices and offered training, along with requirements for evaluation as regulated by the G.O.

A-8-A14, A-21, A-26, A-27 Outline job descriptions and roles and responsibilities of fulltime and adjunct faculty, the director, the division chair and assistant director. The G.O. does not specifically address individual job descriptions in their policies but do refer to the master agreement for details that outline job responsibilities in the various roles. The nursing program adheres to the Master Agreement and policies are comprehensive and align with the Master Agreement and role definitions as set forth by the CA BRN.

A-28 Outlines Testing Guidelines and test blueprinting. The G.O. does not have policy regarding testing guidelines and blueprinting but would refer to ed code. Nursing uses blueprinting to describe the evidence-based practice guidelines addressed in testing and curriculum specific to nursing (NLN, Blooms taxonomy, CJMM, NCLEX client needs, QSEN competencies).

**Repository items 2.4: Catalogs, Handbooks, and Manuals: College of the Sequoias COSTA Master Agreement, College of the Sequoias COSAFA Master Agreement, and the Nursing Policy and Procedure Manual (located in Handbooks and Manuals in the repository)

Ref. Website: https://www.cos.edu/en-us/administration/human-resources/employee-resources#agreements

Standard 2, Criteria 2.5

   a. **Full-time faculty are oriented and mentored in their assigned responsibilities**
   b. **Part-time faculty are oriented and mentored in their assigned responsibilities**

New faculty, both full-time and part-time members participate in an organized COS general orientation process. In addition to the general COS orientation, new full-time nursing faculty are assigned a "faculty friend" who will act as their mentor throughout the orientation process. The role of the mentor is to assist the new instructor in accomplishing the orientation activities listed in the "New Nursing Faculty Orientation Checklist".

Policy A-7: Orientation of the New Nursing Faculty, outlines the process for orientation of new nursing faculty members. This policy notes the list of activities that should be accomplished by each new faculty member. Additionally, the policy provides some guidance to the mentor in that it outlines what the new faculty member should be learning and well versed in before being checked off.

New nursing faculty are provided faculty and student handbooks for reference of program policy, advised of course hours, faculty evaluation processes, division and program meeting schedules, clinical rotation schedules, information about the current curriculum and curriculum change processes, nursing program policies and procedures, pertinent college-wide policies etc.

The nursing department implemented a new full-time faculty orientation day on campus prior to the beginning of the academic year which was very well received by new faculty. The orientation covered the program mission, vision, philosophy, use of the LMS, where to find mailboxes, a campus tour, many "HOW TOs" etc. and an introduction to the campus wide onboarding website that answers many of the most common new faculty questions.

The G.O. (COS), offers new faculty a week of onboarding training sessions that count toward faculty flex (staff development) hours. The trainings include an introduction to CANVAS which is the college's learning management system (LMS), FLEX (faculty development and enrichment) credit: what it is and how to get it, diversity, equity and inclusion (DEI): the college's commitment and what it means for faculty, courses in distance education, course about faculty evaluations. An agenda for the convocation training will be available for peer evaluators to view in the accreditation CANVAS shell on site.

New full-time teaching faculty are encouraged to participate in a class for CTE professors with Lauren Kelly. The course is called CTE Instructor Training. The course covers andragogy; adult learning theory and teaching/learning methods, learning theory, student centered approaches to learning, equity and equality, identifying "at risk" students, advisory boards and why we have them, course objectives vs. course student learning outcomes, creating a syllabus, planning curriculum, building using grading rubrics, using canvas, and building a course in canvas. It is a very valuable class for new faculty who haven't taught before and a great refresher for those who have or perhaps haven't used canvas before.

Repository Item: Standard 2, Criteria 2.5 CTE Training Agenda

The Vice President of Academic Services, Jennifer Vega La Serna, also contacts all new faculty and arranges an introductory luncheon meet and greet. She advised the new faculty which course offerings would be beneficial and which she strongly suggests the new faculty participate in. New faculty are advised of the convocation week offerings and which ones they need to participate in and which are voluntary.

The human resources website links to a faculty onboarding resources page that has links to most everything a new faculty member would need to know including a faculty directory, how evaluations are conducted, taking leaves, attending conferences, how to build a syllabus and much more. The Instructional Council subcommittee worked very hard on this website and linking all the valuable new faculty information to the site this past academic year. Website: https://cos.instructure.com/courses/22291. This is a CANVAS linked course and so may need to be viewed by peer reviewers on site during our visit.

Part-time (Adjunct) nursing faculty are interviewed and hired through a nursing hiring committee and are generally hired to fill vacant clinical rotations. The team coordinator, the course leads, and the Division Chair share in the responsibility of mentoring and training new adjunct. The Master Agreement Article XXIV between COSTA and COS outlines the job duties of the Division Chair which include assisting faculty and staff with their respective continuing professional growth, and provide orientation for new staff members in division related matters. Policy A-12: Nursing professor job description, item 16 states that professors will support the adjunct faculty for the course by providing a calendar of events, course syllabus, clinical information packet, clinical rotation list, dates and times of the semester faculty and team meetings, and any other pertinent information needed. Though it is not written specifically in policy the professor of record for the course generally reserves room for adjunct as well, attend orientations with adjunct, and provide a general outline of the expectations for course completion and success.

The nursing program implemented a new adjunct faculty orientation day this summer prior to the start of the new academic year which was received very well by the oncoming new adjunct faculty.

Criteria 2.6

Full-time faculty develop and maintain current expertise in their teaching responsibilities, including (but not limited to):

a. *Evidence-based teaching/instructional strategies that are relevant for all methods of delivery;*
b. *Standards of clinical practice;*
c. *Assessment and evaluation methods; and*
d. *Principles of diversity, equity, and/or inclusion*

Full-time faculty members of the COS Nursing program have access to and continue to participate in educational opportunities that allow them to maintain current expertise in their teaching responsibilities.

a. Evidence-based teaching/instructional strategies that are relevant for all methods of delivery include but are not limited to:

Faculty are encouraged to utilize the Faculty Enrichment Committee (FEC) at COS and access the many classes and activities that are offered. Full-time faculty members are required to participate in 20 Flexible Calendar (FLEX) hours per the COSTA Master Agreement.

All full time and part time (adjunct) faculty receive books from the director that include "The New Faculty Teaching Guide", "Fast Facts for the Clinical Nursing Instructor", "Think Like a Nurse: A Handbook", and others.

The director of the program has purchased an "Elite Learning Package" which enables faculty to take as many CEUs as are offered by that program.

" The Faculty Enrichment Committee (FEC) coordinates the Flexible Calendar (FLEX) Program and strives to enhance institutional programs and services for student learning and success by offering a variety of activities designed to encourage and support professional

excellence among staff and faculty in their endeavors. FEC is comprised of faculty and staff from across the college." (https://www.cos.edu/en-us/administration/governance/academic-senate/faculty-enrichment-committee/flex-information)

Faculty can enroll in Career Technical Education (CTE) Instructor Training, where faculty can learn best practices for equitable and engaging CTE instruction. This is a 4-day educational opportunity which helps industry professionals' transition to the classroom.

Faculty interested in teaching online must complete the mandatory Online Teaching Certification Program (OTCP) prior to begin teaching any courses that are online. This training covers basics of Canvas (the learning management system of COS), legal considerations and equity in online instruction, interacting with students regularly and substantively (RSI), and online course design. This 4-week program runs 3-times annually and exists to prepare instructors to meet the minimum qualification requirements for online teaching at COS. The OTCP covers regulations and pedagogical approaches related to online teaching. Developed under the direction of the Academic Senate sub-committee Distance Education at COS (DECOS), the OTCP is regularly revised to reflect federal guidelines like those in Title 5 as well as emerging online teaching standards developed by the Online Education Initiative (OEI). To see a full list of online-certified faculty, visit the Human Resources: Employee Resources webpage and select Faculty Seniority Lists. (https://www.cos.edu/en-us/Distance-Education/Pages/Faculty-Support-Teaching-Online.aspx). The College of the Sequoias also has a Distance Education Coordinator on staff who oversees the distance education courses offered by COS, creates learning opportunities for faculty who teach online, reviews online courses for regular, substantive interaction with students, and facilitates the continued faculty development needed to remain current in distance education teaching methodologies.

Additionally, staff are encouraged to enroll in other opportunities for growth and development of their instructional strategies, and can utilize the funding from nursing grants (Song Brown, Perkins, and Nova) as approved by the nursing department. Examples of conventions or webinars that have been attended include but are not limited to Organization for Associate Degree Nursing (OADN), Simulation Conferences, California Organization for Associate Degree Nursing (COADN), Conferences for new faculty in pedagogy, teaching

strategy, content and expertise currency related conferences, and application of critical thinking exercises in clinical.

b. **Standards of clinical practice are maintained by the full-time faculty staff of the COS Nursing Program in many ways such as:**

- Earning CEUs as required by the CA BRN.
- Maintaining current certifications in specialty areas to meet requirements of content expertise.
- Utilizing current textbooks that are published within the last five years, including the clinical skills book.
- Completing mandatory on-boarding and/or ongoing training per the clinical site's requirements.
- Attending conventions and/or webinars where the latest standards of clinical practice can be found, as mentioned above in Criterion 2.6 A.

c. **Assessment and evaluation methods are also kept current by full-time faculty staff.**

- Faculty can utilize the many conferences, conventions, and professional development opportunities as listed in Criterion 2.6 A, as well as webinars that are made available by reputable sources (such as ATI, Pearson, Keith RN, F.A. Davis, Lippincott, etc...) to inform their assessment and evaluation practices. They can engage in courses that teach them how to develop new and different evaluation methods such as online gaming platforms (Kahoot, Jeopardy etc.), and test writing consistent with the new NGN.
- In preparation for the recently implemented Next Gen Style NCLEX questions that were initiated in Spring 2023, many faculty were able to participate in educational development to be prepared to test students in this new question style.
- All faculty who teach a course at College of the Sequoias participate in outcomes and assessment as part of their faculty roles and responsibilities. They must enter assessment data in the outcomes and assessment data management system "Nuventive/Improve". In this platform professors outline that assessment methods and add outcomes data for their individual courses. The course student learning outcomes can be viewed as a whole, evaluated by the faculty of the division and the

division chair. Course outcomes and program evaluation also occur in this same platform.

- Faculty of the nursing program engage in regular discussions during our annual curriculum review which occurs each spring. We provide examples to our colleagues about our evaluation methods, student success in meeting objectives and suggested changes to these methods, and/or to the course as a whole.

d. **Full-time faculty at the COS Nursing Program also maintain current practice in regards to principles of diversity, equity, and/or inclusion in many aspects.**

- To uphold the COS mission statement that "Sequoias Community College District provides excellent higher education in a spirit of equity for our diverse student population," all faculty strive to uphold equitable values in the nursing program.

- Starting in January 2023, the CA BRN mandated that all registered nurses be competent in implicit bias training, therefore all registered nurse faculty must have completed this training to be compliant with the CA BRN.

- With the recently developed Concept Based Curriculum that was initiated in the fall of 2020, diversity, equity, and inclusion were purposefully integrated into this curriculum, as well as into the corresponding textbooks, case studies utilized in class, and in the mannequins used in both the skills lab and simulation lab.

- The Ability and Access Center (AAC) at the COS campus is utilized and encouraged for students whenever applicable and needed.

Per the website, these are the primary objectives of the AAC: (https://www.cos.edu/en-us/student-support/access-ability)

1. VISION: The AAC envisions a college experience that is supportive, engaging, and barrier-free.

2. MISSION: The AAC advocates for equal access to opportunities for student success.

3. *CORE VALUES:*

➢ ACCESS: We believe that educators who know and understand how to support our diverse student population will provide barrier-free opportunities in the classroom and on our campus.

- POTENTIAL: We believe that all students can motivate themselves to use individualized and interactive services to maximize their potential.

  - Equal Employment Opportunity (EEO) Training is provided for faculty and is a requirement for faculty to participate in the hiring process. The title of the course is: Hiring the Best While Developing Diversity in the Workplace: Legal Requirements and Best Practices for Screening Committees

**Repository Items: Faculty Profile Table, Standard 2, Criteria 2.1 Faculty Certifications; Catalogs, Handbooks and Manuals: COSTA Master Agreement, California Nursing Practice Act, 2024; Standard 2, Criteria 2.1: Table 2.1a Full Time faculty degrees, licensure, areas of expertise and certifications;

Standard 2, Criteria 2.7

Part-time faculty develop and maintain current expertise in their teaching responsibilities, including, but not limited to:

  a. ***Evidence-based teaching/instructional strategies that are relevant for all methods of delivery;***
  b. ***Standards of clinical practice***
  c. ***Assessment and evaluation methods; and***
  d. ***Principles of diversity, equity, and/or inclusion***

Part-time (adjunct) faculty members of the COS nursing program teach clinical rotations face-to-face in the clinical setting and conduct pre and/or post conferences as part of the clinical rotation expectation. They supervise and assist students with clinical procedures and skills, review concepts relevant to clinical practice, organize post conference materials including demonstrations, skills assessment, care planning and assessment of care plans, and are responsible for documenting student learning outcomes assessments in the student evaluation record after engaging in a face-to-face student evaluation process. The roles and responsibilities of adjunct faculty are explained in Policy A-21: Adjunct (Part-Time) Faculty Role & Responsibilities.

**See repository: Standard 2, Criteria 2.7 Policy A-21: Adjunct (Part-Time) Faculty Role & Responsibilities.

Adjunct faculty receive a lot of support, materials and oversight from the course leaders. The professors for a given course mentors the adjunct, provides their clinical schedules, and assignments, reviews expectation for assignment completion and grading, and support adjunct clinical practice through mentorship and guidance. The curriculum is reviewed with adjunct and teaching strategies and methods are shared. Policy A-12: Nursing Professor Job Description outlines the responsibilities of the course professor and #15 specifically addresses the role of professor in supporting the adjunct/assistant faculty for the course by providing a calendar of events, course syllabus, clinical information packet, clinical rotation list, dates and times of the semester faculty and team meetings, and any other pertinent information needed. In their role as professor they will design and implement and supervise all curriculum being delivered to assure that it is current, evidence based and meets standard of care.

See repository: Standard 2, Criteria 2.7 Policy A-12

All adjunct faculty are provided keys to the classrooms, and shown how to use all the classroom technology available to them which includes the computer, blue ray disk player, overhead projection using the ELMO, overhead projection of their screen using the smart cart technology. Adjunct have access to the skills lab and all the equipment in it for skills demonstration and practice with students. Access to the course and LMS is provided to adjunct as observers (most of the time), and if requested may participate in the clinical module development and assignment submission links if approved by the course professor.

Adjunct faculty (who are always part-time) are nurses who are actively working in the field of their expertise at accredited hospitals. They complete education for the hospitals at which they serve as part of their employment requirements which keeps them current in evidence-based practice and standards of care. They must also provide documented CEUs to the CA BRN to maintain their licensure.

Adjunct faculty members of the COS Nursing program have access to and continue to participate in educational opportunities that allow them to maintain current expertise in their teaching responsibilities. The nursing program does encourage attending conferences and seeking out webinars and other educational materials which the program will pay for when requested. The College of the Sequoias does not insist that adjunct faculty obtain a certain number of CEUS to maintain employment, but does encourage life-long learning. The nursing

program strongly encourages our adjunct faculty to remain current through practice and education and we provide many opportunities for adjunct faculty to participate in these activities. With the expansion of the nursing program as a whole, hiring and maintaining part-time faculty is essential to ensure that clinical rotations and other classroom settings are adequately staffed. At this time, we are utilizing 33 part-time (adjunct) faculty members in our nursing program of which 26 are teaching this spring 2025 semester. Not all our adjunct faculty teach each semester. It is based on their availability.

A. **Evidence-based teaching/instructional strategies that are relevant for all methods of delivery include but are not limited to:**
    a. Utilizing the Faculty Enrichment Committee (FEC) at COS and utilizing the many classes and activities that are offered. Part-time faculty members are able to, but not required, to participate in Flexible Calendar (FLEX) hours provided by the college.
    b. All staff are encouraged to enroll in other opportunities for growth and development of their instructional strategies, with part-time faculty also included. They can utilize the nurse grant funding to support educational endeavors as approved by the nursing department.

** See repository item: Faculty Profile Table, Standard 2, Criteria 2.2 Adjunct Faculty Certifications

B. **Standards of clinical practice are maintained by the part-time faculty staff of the COS Nursing Program in many ways such as:**
    a. Earning CEUs as required by the BRN.
    b. Maintaining current certifications in specialty areas to meet requirements of content expertise.
    c. Utilizing current textbooks that are published within the last five years, including the clinical skills book.
    d. Completing mandatory on-boarding and/or ongoing training per the clinical site's requirements.
    e. Attending conventions and/or webinars where the latest standards of clinical practice can be found, as mentioned above in Criterion 2.7 A.

f. Furthermore, many part-time faculty members are concurrently working bedside/direct patient-care positions, thereby providing them with extremely current clinical practice skills and knowledge.

C. **Assessment and evaluation methods are also kept current by part-time faculty staff.**

Faculty can utilize the many conventions as listed in Criterion 2.6 A, as well as webinars that are made available by reputable sources (such as ATI, Pearson, Keith RN, F.A. Davis, Lippincott, etc...).

Adjunct faculty are coached and mentored by their primary course professors who generally set up the clinical assignments and assessment methods, the schedules and provide a syllabus and outline for managing the clinical rotations, assessment of outcomes measurement, and methods to be used to assess objectives attainment.

The director of the program (Belen Kersten) also provides adjunct faculty many books on teaching, being a clinical instructor etc.

D. **Part-time faculty at the COS Nursing Program also maintain current practice in regard to principles of diversity, equity, and/or inclusion in many aspects.**
   a. To uphold the COS mission statement that "Sequoias Community College District provides excellent higher education in a spirit of equity for our diverse student population," all faculty strive to uphold equitable values in the nursing program.
   b. Starting in January 2023, the BRN mandated that all registered nurses be competent in implicit bias training (section 2786, (f)(1) page 49), therefore all registered nurse faculty must have completed this training to be compliant with the BRN. This training is provided to all new adjunct faculty.
   c. With the recently developed Concept Based Curriculum that was initiated in Fall 2020 diversity, equity, and inclusion were purposefully integrated into this curriculum, as well as into the corresponding textbooks, case studies utilized in class, and in the mannequins used in both the skills lab and simulation lab.
   d. The Ability and Access Center (AAC) at the COS campus is utilized and encouraged for students whenever applicable.
   Per the website, these are the primary objectives of the AAC:

1. VISION: The AAC envisions a college experience that is supportive, engaging, and barrier-free.

2. MISSION: The AAC advocates for equal access to opportunities for student success.

3. CORE VALUES:

   a. ACCESS: We believe that educators who know and understand how to support our diverse student population will provide barrier-free opportunities in the classroom and on our campus.

   b. POTENTIAL: We believe that all students can motivate themselves to use individualized and interactive services to maximize their potential.

** See repository items: Catalogs, Handbooks, and Manuals: California Nursing Practice Act 2024 -Section 2786 (f)(1) pg. 49.

Standard 2, Criteria 2.8

a. Full-time faculty performance is regularly evaluated for effectiveness in their assigned responsibilities.

All full-time faculty are evaluated on a regular basis. Per the COSTA Master Agreement 2024-2027, article XVIII, summarizes the College of the Sequoias evaluation process. The following areas are evaluated for all faculty: teaching methods, materials and effectiveness; non-classroom methods, materials and effectiveness; professional responsibility, which includes maintaining and posting office hours, meeting scheduled classes, placing textbook orders, and submitting grade reports within deadline dates. Article 18.3 states "the evaluation of instruction should focus upon whether the instructor is delivering to students what is stipulated in the course outline of record as well as the current course syllabus for each course taught." Our classroom observations include multiple criteria including "provides clear and meaningful assignments related to content and objectives." This ensures that mastery of one's content area of expertise is considered in the evaluation process.

A brief summary of the evaluation procedure is as follows: faculty are notified in writing by the Vice President of Academic Services, Dr. Jennifer Vega De La Serna, in the academic year in which the faculty member is to be evaluated. Tenured faculty are evaluated on a three-year cycle and non-tenured faculty are evaluated on an annual cycle. The faculty member forms a peer evaluation committee, after which the faculty designs and submits a faculty evaluation plan that must include a list of assigned duties and/or classes during the evaluation period, course syllabi and student evaluations. Faculty are then observed by their peers and the dean of their service area. Student surveys are obtained from the administrator on the evaluation committee. The faculty committee then compiles the final evaluation packet and returns it to the committee members. For non-tenured faculty only, the evaluation committee meets to review and discuss the final evaluation. The faculty member follows up with a meeting with the dean where suggestions for improvement are discussed and goals for future faculty development are set. The packet is reviewed by the Vice President of Instruction and given to human resources and the entire packet is placed in the faculty's personnel file.

Repository item: Handbooks and Manuals: COSTA Master Agreement (page 66).; Standard 2, Criteria 2.8: Excerpt from COSTA Master Agreement Section XVIII; Standard 2, Criteria 2.8: Faculty Evaluation Forms, Standard 2, Handbooks and Manuals: *Part-time faculty performance is regularly evaluated for effectiveness in their assigned responsibilities.*

Adjunct faculty evaluations are described in detail in the COSAFA Master Agreement, page 16-17. Article VIII, which states that the purpose of the evaluation process for unit members is to improve the quality of instruction, enhance academic growth, promote professionalism, and assess performance of unit members. In summary of the process the evaluations will include adjunct faculty classroom observations, Section 8.4.2.3 specifically addresses adjunct faculty in the nursing division and states that adjunct will be evaluated using the student questionnaire developed by the nursing department. Adjunct faculty must also engage in self-evaluation.

Adjunct faculty are evaluated the first semester of employment by their program director, assistant director, division chair, or dean of service area and subsequently not less than every six semesters. Evaluations of adjunct faculty include classroom/ clinical site observations by an

administrator or his/her designee. Student evaluation surveys are carried out, specifically clinical faculty are evaluated using the student questionnaire developed by the nursing division (see appendix P and Q in COSAFA Master Agreement). There are specific criteria related to details, planning, interactive techniques, and student relations in the "Adjunct Faculty Classroom Observation Form". Appendix T in COSAFA Master Agreement includes the "Administrative Response to Adjunct Faculty Evaluation" which is reviewed by the division chair, and/or dean, academic services or area dean.

Repository item: Handbooks and manuals: COSAFA Master Agreement

Standard 2, Criteria 2.9

**College of the Sequoias Nursing Program does not use preceptors and so this is not applicable to the program.

Standard 3: Students

Student policies and services support the achievement of the end-of-program student learning outcomes for each nursing program type, and additionally for graduate programs the role-specific nursing competencies.

Standard 3, Criteria 3.1

The nursing program's current ACEN accreditation status and the ACEN contact information is accurate and readily accessible to the public.

The College of the Sequoias ACEN accreditation status as a candidate in the process of attempting to achieve our first accreditation in located in the nursing website as follows:

https://www.cos.edu/en-us/academics/nursing-allied-health/acen-candidacy

The link contains information about our status: "Notice of ACEN Candidacy Effective June 16, 2023, the associate nursing program at College of the Sequoias, accredited by Accrediting Commission for Community and Junior Colleges (ACCJC) located in Visalia, California is a candidate for initial accreditation by the Accreditation Commission for Education in Nursing. This candidacy status expires June 2025". It additionally has our Candidacy Decision Letter posted in the link which contains all the contact information for ACEN.

Additionally, the nursing program publishes a newsletter monthly that has an "ACEN Corner". This details information about the accreditation process, progress and status and is distributed to faculty, students, the entire campus faculty and staff (COS E-news), and to our community clinical partners.

**Repository item: Standard 3, Criteria 3.1 Nursing Newsletters.

Standard 3, Criteria 3.2

The following nursing program or governing organization policies are publicly accessible, current, non-discriminatory, and implemented as published: justification is provided when nursing policies differ from the governing organization:

   a. *Admissions;*
   b. *Progression;*
   c. *Graduation;*
   d. *Formal complaints and grievances procedures; and*
   e. *Technology requirements*

<u>**Criteria 3.2 a: Admissions**</u>

The COS Registered Nursing Program website (https://www.cos.edu/en-us/academics/nursing-allied-health/registered-nursing) addresses the program requirements for admission, LVN to RN Program options, the application process, multicriteria selection matrix and TEAS testing information. The website is public and linked to the COS general website listed under "Academic Programs and Classes".

All student related policies are publicly accessible on the Registered Nursing Program website at the bottom of the page under the heading "Registered Nursing Student Resources", the "Student Handbook". The student outlines progression in the program, passing classes, and grading processes. The handbook is additionally a collection of policies affecting students including B-2: Statement of non-discrimination, and B-4 Student Grievance Policy.

The faculty handbook which contains only faculty related policy and procedure is not posted publicly but is provided to all faculty upon hire.

**Repository Item: Catalogs, Handbooks, and Manuals: Faculty Handbook, Student Handbook

Criteria 3.2 b, c: Progression and Graduation

The COS administrative and board policies are publicly available in the COS website by clicking on the link for "About Us", then Governance and Board of Trustees. Under this link you can find all the administrative and board policies for the governing organization.

Administrative Policy 4100: Graduation Requirements for Degrees and Certifications speaks the requirements for graduation and for achieving success in attaining a certificate. It speaks to the requirements of general education in the various divisions of the campus.

Repository Item: Standard 3, Criteria 3.2:   Policy AP 4100

Progression in the nursing program and successful graduation depends upon the successful completion of the CABRN requirements listed in the California Nursing Practice Act Article 3; sections 1426 (a) through (g), which sets out the legal and logistical rules/laws that govern any nursing program. The CABRN lists specific criteria which must be met related to required curriculum, the number of units which must be taken in theory and clinical courses, and prerequisites. Further the act states that theory and clinical practice shall be concurrent in the following nursing areas: geriatric, medical-surgical, mental health/psychiatric nursing, obstetrics, and required program prerequisites. This means that if a student fails a clinical rotation they cannot progress to the next level theory course until passing the failed clinical experience and associated theory course. The CABRN dictates the student learning outcomes inclusive of safety, therapeutic, effective, patient-centered care; practicing evidence-based practice; working as part of interdisciplinary teams; focusing on quality improvement, and using information technology.

The COS administrative policy related to progression in a program leading to a degree is very different from the rules that govern nursing.

Repository Item: Catalogues, Handbooks and Manuals: CA BRN Nursing Practice Act 2024.

Criteria 3.2 d: Formal Complaints and Grievances procedures

The COS nursing program seeks to resolve student grievances/complaints at the lowest possible level but has a formal complaints and grievances procedure (Policy B-24), both within the nursing department and if progression of the complaint exceeds the nursing department then

we have a campus wide policy and procedure for formal complaints at the campus level (AP 5530).

The chain of command for student complaints begins with the professor of record. If no resolution can be found then the student is instructed to make an appointment with the Division Chair for Nursing and Allied Health who will attempt to assist the student and professor resolve the issue at hand at a minor level. Is progression beyond this point is necessary (rarely and not since 2017) then the Director of Nursing is notified and an appointment is made to meet with the director, student, division chair and faculty member involved. The last step in the program chain of command would be to progress to a meeting with the dean.

Should no resolution to the issue be had, then a formal complaint using administrative procedure AP 5530 which outlines the process of providing a prompt and equitable means of resolving student grievances against the District. These procedures are available to any student who reasonably believes a District decision or action has adversely affected his or her status, rights or privileges as a student. These procedures do not apply to student disciplinary actions which are covered in other policies noted in AP 5530 including the following: Police citations, sex discrimination (which is covered in AP 3410 and 3430), sexual harassment (which is covered in AP 3410, and 3430), illegal discrimination (which is covered in AP 3430 and 3410), the challenge process for prerequisites, co-requisites, advisories, and limitations on enrollment, employee discipline, challenges to established district policies and administrative procedures, or financial claims against the district.

Guidance for students for filing a formal complaint and access to administrative policies and procedures can be obtained by the student by reaching out to the Dean of Student Services and/or the Grievance Officer.

Administrative Procedures and Policies can be obtained by the public on the COS website at the following link: https://www.cos.edu/en-us/administration/governance/board/board-policies . Student services is listed under Chapter 5: Student Services.

Repository Items: Catalogs, Handbooks and Manuals: Policy and Procedure Manual: Policy B-24 Student Grievance; Standard 3, Criteria 3.2: AP 5530-Student Rights and Grievances

Criteria 3.2 e: Technology Requirements

Each individual course within the nursing program will outline the needed technology resources within the course syllabi. The nursing program does have a computer lab (Hospital Rock Rm 110) and also houses lap tops/charging carts for student use during testing or class activities requiring them.

The COS catalogue also lists the minimum technological requirements for any distance learning as follows: (excerpt from catalog)

MINIMUM TECHNOLOGICAL REQUIREMENTS

- Any computer/tablet/device capable of running Google Chrome and installing Zoom with at least 1 GHz processing power and at least 1 GB RAM

    o Examples include devices running Windows 7/8/8.1/10/11, Mac OS X 10.10 and up, and Chromebooks

- Any mobile device that is currently receiving vendor updates (iOS and Android)

- Ability to access and run Microsoft Office documents and services (Word, Excel, PowerPoint, etc.)

- Webcam, microphone, and speakers/headphones may be required for some courses

- COS recommends:

    o Broadband connection

    o Hardware less than 5 years old

    o Webcam supporting at least 720p

    o Speakers or headphones"

Examples of technology requirements as noted in the course syllabi:

NURS 121:

Distance Learning/Online Access:

This course may be delivered in a face-to-face format, or a synchronous

online format. Students will be notified re: instructional mode via email and

CANVAS announcement.

**See course calendar for course start date, and exam (Quizzes, MT, Final) dates.

If the course instructional methodology is synchronous online, it will be conducted via Canvas. Lectures may be conducted using ConferZoom or other instructional methodologies. You must have access to appropriate technology and equipment to participate in this course. Contact your instructors should you need assistance in this area. Regular and effective substantive contact between instructor and student may be initiated through any of the following:

· Canvas discussion board

· Synchronous ConferZoom meetings

· Announcements

· Assignment feedback

· Asynchronous activity (video lectures)

· Emails

· Canvas conferences

· Other (as determined by course instructor)

Any Face-to-face meetings or assessments will be held in the following manner: on campus in a classroom maintaining social distancing guidelines and/or via ConferZoom. Video content will be closed-captioned or transcriptions will be available, documents and online pages will meet accessibility requirements.

NURS 135

Minimum Technology Requirements

- Any computer/tablet/device capable of running Google Chrome and installing Zoom with at least 1 GHz processing power and at least 1 GB RAM

  o Examples include devices running Windows 7/8/8.1/10/11, Mac OS X 10.10 and up, and Chromebooks

- Any mobile device that is currently receiving vendor updates (iOS and Android)

- Ability to access and run Microsoft Office documents and services (Word, Excel, PowerPoint, etc.)

- Webcam, microphone, and speakers/headphones may be required for some courses (only if it becomes necessary to conduct class over zoom. Example during the Covid pandemic or if you are following the course content while home ill during a lecture period)

- COS recommends:
  - Broadband connection
  - Hardware less than 5 years old
  - Webcam supporting at least 720p
  - Speakers or headphones"

**Your course in NURS 135 will use the learning management system CANVAS. You should be familiar with how to access CANVAS, Class announcements within CANVAS, your COS email and how to submit assignments in CANVAS. Your instructor can provide you with needed information in this regard if needed. Testing in this course will also be in CANVAS (electronically) and grading and progressive grade reports will be available at all times in CANVAS as well.

Also, of note is that COS students who do not have the ability to access technology may be assisted to access technology through the college, be given a "hotspot", a laptop, or tablet or other necessary technology for completing their courses. Notify your course instructor should such a need exist so that we are best able to help you be successful in the course. See the following links related to student support and technology services.

https://www.cos.edu/en-us/student-support/tech-support

https://www.cos.edu/en-us/library/hotspots

https://www.cos.edu/en-us/library

Repository item: Course Syllabi

Standard 3, Criteria 3.3

Governing organization or nursing program records for resolution of formal complaints or formal grievances include evidence of:

a. *Due process; and*

b. *Timely resolution in accordance with the governing organization or nursing program policies or procedures.*

The College of the Sequoias Nursing Program has not had a formal grievance filed against it for greater than 10 years. The program does have a grievance policy (B-24) and chain of command for student complaints. Each semester the director and division chair attend each class briefly to welcome students and to verbally reinforce the chain of command for complaints which begins with the professor of a given course, proceeds to the division chair, the director and then the Dean. Policy B-24: Student Grievance outlines the right of students to pursue a formal grievance procedure when a student believes that a district decision or action has adversely affected his or her status, rights, or privileges as a student. The policy refers students to Administrative Policy 5530, and the college wide grievance procedure.

Students who have a complaint are encouraged to make an appointment with the Division Chair to discuss their issue. The Division Chair acts as a liaison between the student and professor or administration and provides the student with a lower level outlet for problem resolution. If the student complaint requires it, the Division Chair will advise the student to make an appointment with the Director of the program to discuss the issue further and try to obtain resolution. If a resolution still cannot be achieved the Division Chair or Director may refer the student to the Dean.

The College of the Sequoias Nursing Program follows these initial steps in the chain of command for each student complaint and have been able to come to a resolution in all cases for at least ten years.

Students who need to make a formal grievance following all these steps would be encouraged to reach out to student support services and follow the process outlined in AP 5530.

Repository Items: Catalogs, Handbooks and Manuals: Policy and Procedure Manual, Policy B-24 Student Grievance; Criteria 3.3: AP 5530-Student Rights and Grievances

Standard 3, Criterion 3.4
Student records maintained by the nursing program are kept secure and are in compliance with applicable policies/procedures of the governing organization and regulatory agencies.

In accordance with College of the Sequoias AP and BP 5040, the college ensures that student records are maintained in compliance with the applicable state and federal laws pertaining to their privacy. All current and former students of the district have the right to access all their student records maintained by the district and related to them. No district representative is authorized to release the contents of student records to any member of the public without the students written consent, other than directory information and information sought in accordance with state and federal laws as addressed in COS AP 5040.

** **Repository Item:** Standard 3, Criteria 3.4: AP 5040, BP5040; Catalogs, Handbooks and Manuals: Policy and Procedure Manual, Policy A-31 Student Records Maintenance

The nursing program maintains both a current nursing student program file and a file containing the Student Evaluation Record (SER). The student nursing program file contains the student program admission application, acceptance letter, physical exam, contact information, clinical agency orientation information, and a Confidentiality Agreement and Assumption of Risk form. Both student files are kept in a secure file cabinet in the Nursing Office. The file cabinet and Nursing Office are locked when office staff are not present. Only the director, nursing office staff, and faculty have access to these files. Faculty and staff adhere to the stipulations of the Family Educational Rights and Privacy Act (FERPA), and student written consent must be obtained to release information regarding academic performance. SER's of graduates or students no longer in the program are scanned into SharePoint and the hard copies of SER are kept in a locked cabinet in HR 133 for 3 years and then shredded. Additional electronic files of students completing the nursing program are kept on SharePoint and Banner-BDMS. Electronic files contain contact information, acceptance letter, application, admission worksheet, Confidentiality Agreement and Assumption of Risk, clinical incident emails, SER, and implicit bias quiz. The division dean, the nursing director, nursing office staff and faculty have access to the files on SharePoint. The Director of Admissions and Records, division dean, director of the nursing program, and nursing office staff have access to student records in Banner-BDMS.

** Repository Item: Standard 3, Criteria 3.4: Family Educational Rights and Privacy Act (FERPA)

Standard 3, Criteria 3.5

Changes in nursing program policies/procedures are clearly and consistently communicated to students in an effective and timely manner.

- Changes in the COS nursing program's policies and procedures are clearly and consistently communicated to students in an effective manner. The Policy and Procedure Committee meets at least once each month (except when a holiday falls on the scheduled meeting date) to discuss policies that are pertinent to the students and faculty, and welcome a student representative to attend and serve in an advisory (non-voting) capacity.
- When updates are made to the policies and procedures of the COS nursing program, students will be made aware of these changes via email (which is the approved communication method for COS) as well as the communication board posted in Hospital Rock.
- All new and revised policies are updated in the annual release of the student and faculty handbooks, and are posted immediately to the policy and procedure manual in SharePoint and old policies removed so that the manual is always current.
- Any revisions or new policies are enacted following review by faculty during the division meeting following the policy and procedure meeting in which the changes were approved, and after which time students are notified by email and the policies posted in the communication board.

**Repository Items: Catalogs, Handbooks and Manuals: Policy and Procedure Manual, Policy A-24: Faculty Communication, Policy D-02 Policy and Procedure Committee

Standard 3, Criteria 3.6

Student support services are commensurate with the needs of nursing students, regardless of location, methods of delivery, or program option.

The College of the Sequoias prides itself on providing a multitude of student support services. We are located in Tulare county and serve the population of Tulare and Kings Counties

which are considered underserved populations. We have a large diverse population of students, many who are first generation college students. We have many ESL (English as second language) students, and disproportionally impacted students, etc. Table 3.6 Student Support Services, located in the evidence repository, lists the available student support services and which services they provide. Nursing students are able to access all available student services on the Visalia campus where the program is administered. The nursing program is only offered at one location. A review of all available student support services can be found at:

Ref. Websites: https://www.cos.edu/en-us/student-support-directory; and at https://www.cos.edu/en-us/student-support/

While not every student support office list hours of operation all provide contact information by phone and/or email so that students can inquire and get that information. All support services are open every day the college is open, are available to all students who qualify for the service (some are needs based), and this includes our nursing students, and some are available on the weekend as noted in Table 3.6 Student Support Services in the evidence repository. Links to the various student support services are also provided in the repository (Standard 3, criteria 3.6 Support services availability, hours and services)

Student support services include services to help meet the needs of students in academic, financial, and housing need; require technology or tech support, ESL students and their specific needs, clothing needs, food insecurity etc.

Nursing students also have access to a counsellor who assists them with their educational program planning, graduation applications, and resources related to transfer to higher education (ADN--BSN transfer day). Many of the nursing faculty engage in one-to-one tutoring for students who need it and the director often goes above and beyond to secure needed student support (ex. Student whose medical insurance expired and could not get medications for his diabetes. Director sent him to Samaritan Center who were able to provide him with his insulin and other medications; student who had hearing impairment; Director secured a specialized stethoscope for student to use in clinical).

**Repository Items: Standard 3, Criteria 3.6 Website Links Support services availability, hours and services; Criteria 3.6 Table 3.6 Student Support Services.

Standard 3, Criterion 3.7

  a. *Learning and Technology resources for nursing students are selected by the faculty and relevant to the educational level at which students are prepared.*
  b. *Students are oriented to and receive support for learning and technology resources.*
  c. *Learning and technology resources are current and accessible.*

The nursing program directly addresses technology use in nursing in one of its end-of-program student learning outcomes which centers around technology and informatics.

EPSLO #5: "Employ information management systems and patient care technology to communicate, manage knowledge, mitigate error, and support clinical judgment."

Nursing faculty vets learning resources such as Pearson Access/ My Lab and Mastering, Lippincott's Virtual- Simulations (V-Sims), Kahoot, and Jeopardy and other online gaming platforms, F. A. Davis Medical Language Lab. Our current learning management system is Canvas and it is used as an adjunct for face-to-face lectures, as well as the exclusive platform for online courses taught by nursing faculty but are not part of the nursing core curriculum (Medical Terminology, Cultural Competence in Healthcare).

Student centered resources are available through Canvas tutorials, COS Learning Resources Center, Access and Ability Center, and Student Tech Support, which offers technology loans and other library services. All of the online resources used for classes have technology support available through their websites. Faculty are well versed in the use of classroom technology and are available during office hours to assist students as needed. Our learning management system as well as all of these electronic resources are available to students at any location where WIFI is available. In addition, the college offers loans of laptops and hotspots for students who require those services.

**Repository item: Standard 3, Criteria 3.7 Technology Support Links for Students.

Our students have access to resources available in the clinical setting such as electronic databases purchased by the facilities (Clinical Key, UpToDate, Micromedex). In addition, students are given codes to access the electronic medical record (EMR) which has resources for the medication administration system (MAK) such has IV drug compatibilities, drug interactions, and extensive drug information. Students have individual codes for the EMR which allows them to practice documentation and perform research in a real-world setting. All students entering the program are oriented and trained in our various clinical facilities EMRs as part of the student orientation process. Additionally, our students work closely with instructors as well as mentoring staff at clinical sites to aide in preparing students for real-world nursing practice utilizing technology. Other technology used by students in the clinical setting include use of and programing IV pumps, using glucometers, transcutaneous bilirubin monitors, vital sign machines, PIXIS medication distribution cabinet, bladder scanners, vein finders, fetal and contraction monitors, interpreter services, PCA pumps, and others.

The clinical instructors and nurse mentors oversee use of the medical equipment and technology on the specific units for which they are being used. Training is provided in groups or individually as required. Training is provided as part of their clinical rotation orientation and then reinforced on the units when the student is present for clinical. Computer rooms at some facilities are made available to clinical instructors for the purpose of familiarizing students with the EMR and documentation requirements. Other facilities may not have a computer lab and still other instructors prefer to teach students one-on-one. Both instructors and nurse mentors assist students with technology orientation and use. In some cases, students must be signed off in their skills competency check off booklets before accessing and using some technological equipment (IV pumps, PCA pumps, bladder scanner etc.).

We have advisory meetings with our clinical partners to discuss needs of the facility and student teaching, including housing of resources at the facilities and communication between instructors and key personnel within the facility. Our faculty communicates with facility partners about technology needs and our director disseminates updated information about current practices and changes in technology so that faculty and students stay current on any changes.

Prior to entering the program, an invitation to join a canvas shell where the orientation is housed is sent out. This is a robust new student orientation in which students are oriented to the

learning management system (Canvas) as well as requirements of individual clinical facilities and resources available. Additionally, each clinical instructor orients their own group to more specific resources available at their clinical facility and within their courses. The college LMS, CANVAS, also has a robust help center available to students. It can be accessed day or night directly through their canvas shells.

The nursing program director purchased Medline Database which is housed in the library for our nursing students to complete in-depth research on peer-reviewed evidence-based nursing articles and medical journals. We have a dedicated nursing librarian who works with faculty to ensure that databases are current and meeting the needs of our students.

Repository items: Standard 3, Criteria 3.7 Adventist Health Hospital Orientation Manual, KH Signature Pages/ Non-Employee Addendum Oct 2023), Standard 3, Criteria 3.7 Student Technology support links, Course Syllabi.

Students participate in simulation in various courses throughout the program and are oriented by our dedicated simulation coordinator. They participate in a pre-briefing and room simulation in which they are oriented to the simulation technology. Technology and equipment are available in open skills lab and students have access to a dedicated skills lab instructor who can assist them with equipment such as our auscultation manakin and other simulation equipment.

The simulation room equipment is state of the art and the mannequin has interchangeable skins to represent persons of all races/ethnicities. The simulation room also contains monitors and computers for documentation, simulated wall suction, and other hospital room necessities. The simulation area has a control center, which students do not use, but which is used by the simulation coordinator and simulation technician during simulations. A voice control is used from the control room to give the patient a voice and make the simulations interactive and believable.

Support is available to students during office hours and while in clinical with the resources of each facility as mentioned above.

Standard 3 Criteria 3.8

Students are informed of their responsibilities regarding any financial assistance.

Students receive tracking emails from the COS financial aid office as soon as we receive their FAFSA from the Federal Student Aid (FSA). Once the student is packaged for financial aid, they receive an award email. The award email includes information about our Satisfactory Academic Progress Policy (SAP), financial aid disbursement dates, setting up a Bank Mobile account to receive disbursements, and repayment policies for dropped or failed classes. This information is also available on our website: https://www.cos.edu/en-us/admissions/financial-aid?utm_content=home-financial-aid-tile

If a student falls below minimum SAP requirements (2.0 GPA, 67% PACE, Maximum Units), they are notified via email that they are in Financial Aid Warning or Disqualification. The notification makes the student may submit a financial aid appeal for extenuating circumstances that caused adverse academic performance.

Criteria 3.9: ***Compliance with the Higher Education Reauthorization Act, Title IV eligibility and certification requirements is maintained, including having a:***

a. Plan to improve the federal loan default rate (as applicable); and
b. Written, comprehensive federal student loan repayment program addressing student load information, counseling, and monitoring.

COS offers various federal, state, and local grants, work study, and loans to students. We do participate in Title IV funding. Our current federal Program Participation Agreement expires 9/30/2025. We will be submitting our renewal application January 2025.

The current default rate is 0%. This is because of the federal freeze on all loan payments during the pandemic. Because borrowers have not had to make loan payments for the past three years, there are no defaults in the 3-year cohort used to determine the default rate. Prior to the pandemic our default rate was 18.5%. We are very conservative with student loans and only disburse a few hundred loans per year. To help students stay on track with their loan payments,

we contract with a company called Student Connections. They monitor our students after they have left college and begin making loan payments. If the former students start to miss payments, they reach out to the student and help with any issues the student may be having.

There have been no recent federal or state audits. The last state audit was performed by the California Student Aid Commission in 2017 of our 2014-15 Cal Grant Program.

There is a financial aid review as part of the District's annual audit each year. There have been no audit findings over the past several years. Additionally, the financial aid office is required to submit a copy of the COS annual audit to the Federal Department of Education for review each year. Annual audits have been approved by the Department.

COS does not have a written, comprehensive student loan repayment program. COS only offers federal Direct Loans. Once a student has stopped attending at COS, we send email notification to the student to complete exit counseling with Federal Student Aid.

Criteria 3.10: *Federal financial aid record maintenance complies with federal guidelines.*

Student financial aid records are stored and accessed electronically via the Database Management System (DBMS). Federal requirements are 3 years storage. COS Technology Services maintains storage in the DBMS for 5-7 years. Financial Aid Staff have access to student financial aid records. Security and access are set up and maintained by COS Technology Services.

Standard 4 Curriculum

The curriculum supports the achievement of the end-of-program student learning outcomes for each nursing program type.

<u>Criterion 4.1 a., b.</u>

The nursing curriculum has one set of end-of-program student learning outcomes that:

 a. ***Are based on contemporary professional nursing standards, guidelines, and/or competencies; and***

 b. ***Apply to all program options and reflect the educational level at which students are being prepared.***

The end-of-program student learning outcomes for the Associate Degree Nursing Program are as follows:

1. Provide safe, quality, compassionate, evidence-based, patient-centered nursing care to diverse patients across the lifespan in a variety of healthcare settings.
2. Engage in clinical judgment when making patient-centered care and other nursing decisions.
3. Participate in quality improvement processes to improve patient care outcomes.
4. Participate in teamwork and collaboration with all members of the healthcare team including the patient.
5. Employ information management systems and patient care technology to communicate, manage knowledge, mitigate error, and support clinical judgment.
6. Use leadership, management, legal, and ethical principles to guide practice as a Registered Nurse.

The EPSLOs are documented in the student handbook, pages 34-35. The student handbook is available to the public on the nursing website located under student resources at the bottom of the page. https://www.cos.edu/en-us/Nursing-Allied-Health/Documents/Fall%202023%20RN%20Student%20Handbook.pdf

These EPSLOs were developed at the time the nursing faculty engaged in curriculum revision (beginning in 2019) and culminating in a new and contemporary concept-based curriculum. The curriculum and EPSLOs were developed with the help of a curriculum consultant; Mrs. Linda Caputi RN, MSN, EDD, CNE, ANEF. The new curriculum was implemented in Fall 2020.

Curriculum review occurs each spring semester during Dialogue Day/Annual Curriculum Review Day. Faculty intend to review and update the current curriculum references in Spring 2025, and do realize that the new NextGen NCLEX test is already being used so references related to planning for implementation etc. are outdated and will be updated. The curriculum committee is in current discussion about changing/updating/revising the curriculum and this will become part of the discussion moving forward.

Documentation for Development of End-of-Program Student Learning Outcomes

1.   **Provide safe, quality, compassionate, evidence-based, patient-centered nursing care to diverse patients across the lifespan in a variety of healthcare settings.**

This program student learning outcome focuses on many aspects of the nurse/patient relationship and integrates the QSEN competencies related to patient-centered care, safety, and evidence-based practice. The importance of patient-centered care is addressed by the Institute of Medicine (2011) stating that many systems are designed to meet the needs of providers. "True patient- and family-centered care will focus on the whole patient, putting the patient, family, and care team together as a system" (p. 16).

This outcome also relates to two of NLN's Competencies for ADN Graduates (2010): "Advocate for patients and families in ways that promote their self-determination, integrity, and ongoing growth as human beings" (p. 33), and "Implement one's role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context" (p. 35). The ANA's (White & O'Sullivan, 2012) *The Essential Guide to Nursing: Applying ANA's Scope & Standards in Practice and Education* is applied when planning quality, patient-centered nursing care.

Caring is at the heart of nursing. The "compassionate" aspect of this outcome prepares students to focus on nurturing the well-being of the patient and support persons based on individual needs. Creating a culture of caring is a primary role of the nurse. This is also based on *The Future of Nursing* (2011) report which recommends that nursing education devote more effort to fostering culturally competent and relationship-centered care. Caring is also integrated throughout the four major integrated processes (Safe and Effective Care Environment, Health Promotion and Maintenance, Psychosocial Integrity, Physiological Integrity) of the 2023 NCLEX-RN® test plan. That plan states, "Caring – interaction of the nurse and client in an atmosphere of mutual respect and trust. In this collaborative environment, the nurse provides encouragement, hope, support, and compassion to help achieve desired outcomes" (p. 4).

With this outcome students learn their responsibility to maintain the caring nature of nursing and that caring is part of the nurse's professional identity. The nurse has the moral commitment to protect and enhance human dignity. This outcome connects to the NLN's term "human flourishing" that in part states: "The nurse helps the individual in efforts to reclaim or develop new pathways toward human flourishing" (NLN, 2010, p. 67).

This learning outcome also is based on the California Nursing Practice Act, Business and Professions Code, Division 2, Chapter 6, Article 2, Section 2725 (2013) which states:

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

(1) Direct and indirect patient care services that ensure the safety, comfort, personal hygiene, and protection of patients, and the performance of disease prevention and restorative measures.

(2) Direct and indirect patient care services, including, but not limited to, the administration of medications and therapeutic agents, necessary to implement a treatment, disease prevention, or rehabilitative regimen ordered by and within the scope of licensure of a physician, dentist, podiatrist, or clinical psychologist, as defined by Section 1316.5 of the Health and Safety Code.

(3) The performance of skin tests, immunization techniques, and the withdrawal of human blood from veins and arteries.

(4) Observation of signs and symptoms of illness, reactions to treatment, general behavior, or general physical condition, and (A) determination of whether the signs, symptoms, reactions, behavior, or general appearance exhibit abnormal characteristics, and (B) implementation, based on observed abnormalities, of appropriate reporting, or referral, or standardized procedures, or changes in treatment regimen in accordance with standardized procedures, or the initiation of emergency procedures.

Additionally, the California Board of Registered Nursing in Section 1426, Required Curriculum for nursing programs states: Instructional outcomes will focus on delivering *safe, therapeutic, effective, patient-centered care; practicing evidence-based practice;* working as part of interdisciplinary teams; focusing on quality improvement; and using information technology.

The section of the California code that relates to this learning outcome also states:

The following shall be integrated throughout the entire nursing curriculum:

The nursing process;

- Basic intervention skills in preventive, remedial, supportive, and rehabilitative nursing;

- Physical, behavioral, and social aspects of human development from birth through all age levels;

- Related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior relevant to health-illness.

The California Board of Registered Nursing in Section 1426, Required Curriculum for nursing programs states that instructional content shall include patient protection and safety.

Finally, this learning outcome is supported by the expectations of the NCLEX-RN® detailed test plan (2023). The major category of Safe and Effective Care Environment covers from 26 to 38% of the questions on the NCLEX-RN. Ensuring patient safety is a primary purpose for the NCLEX-RN as noted with the National Council of State Boards of Nursing's mission statement: The National Council of State Boards of Nursing (NCSBN) provides education, service and research through collaborative leadership to promote evidenced-based regulatory excellence for *patient safety and public protection* (2016 NCLEX-RN test plan inside cover). The NCLEX-RN test plan covers patients of all ages and in a variety of healthcare settings.

2.   **Engage in clinical judgment making patient-centered care and other nursing decisions.**

Critical thinking is foundational for the development of thought processes that relate to, and provide the basis for, clinical judgment. It is part of the term NLN (2010) defines as nursing judgment which encompasses three processes: critical thinking, clinical judgment, and integration of best evidence into practice (p. 67).

Clinical judgment is evidenced not only by the student's use of the nursing process, but also when interfacing with the clinical microsystem and the larger healthcare system to deliver quality, safe, patient-centered care. Clinical judgment is required to improve patient outcomes. Many errors are made as a "result of poor thinking processes" (Caputi, 2018, p. 2).

Current nursing literature reports research that demonstrates that new graduates, after passing the NCLEX-RN, are ill prepared to engage in clinical judgment. In 2005 Del Bueno reported that only 1 in 3 new graduates were able to engage in entry-level expectations for thinking. In a repeat of that research, Kavanagh and Szweda reported in 2017 that only 1 in 4 new graduates were able to engage in thinking at the level required for entry into practice. Muntean (2013) provides further evidence of the importance of clinical judgment and its relationship to the Next Generation NCLEX currently under study.

This outcome also relates to the NLN's Competency for ADN graduates (2010): "Make judgments in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care and promote the health of patients within a family and community context" (p. 34).

This learning outcome is supported by the expectations of the NCLEX-RN detailed test plan (2016). That document states: "Nursing is a dynamic, continually evolving discipline that employs critical thinking to integrate increasingly complex knowledge, skills, technologies, and client care activities into evidence-based nursing practice" (p. 3-4) and "All task statements in the *2016 NCLEX-RN® Detailed Test Plan* require the nurse to apply the fundamental principles of clinical decision making and critical thinking to nursing practice" (p. 9).

Additionally, the California Board of Registered Nursing in Section 1426, Required Curriculum for nursing programs states that instructional content shall include critical thinking.

3. **Participate in quality improvement processes to improve patient care outcomes.**

The emphasis on quality measures to improve patient care and patient outcomes derives from the IOM (2003) reports on quality and health care. These reports discuss the need for all healthcare professionals to be more aware of, and implement, quality improvement measures. From this work the QSEN project identified quality improvement as one of the six competencies of prelicensure nursing education graduates. Quality improvement processes are needed to reduce mistakes that lead to poor patient outcomes. Medical errors are a major cause of death in the United States. According to a recent study, people die from system-wide failings and poorly coordinated care. In fact, deaths from such errors is now the third leading cause of death in the United States (Makary & Daniel, 2016).

Quality improvement refers to the use of data to monitor the outcomes of care processes and the use of improvement methods to design and test changes to continuously improve the quality and safety of healthcare systems (Smith, Cronenwett, & Sherwood, 2007). The IOM (2011) recommended nursing students learn not only "how to do the work" but also "how to improve the work" of nursing.

This outcome addresses the nurse within the healthcare environment and the impact of the nurse on the environment and the impact of the environment on the work of the nurse. The outcome promotes learning about systems including the clinical microsystem and the larger

healthcare system. The system in which care is delivered has become increasingly important as the current initiatives (IOM, QSEN, NOF) focus on decreasing errors. Students must learn about the nurse's role in the system, where the nurse fits within the system, and the effect the system has on the day-to-day work of a nurse.

This outcome also relates to the NLN's Competency for ADN Graduates (2010): "Examine the evidence that underlies clinical nursing practice to challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for patients, families, and communities" (p. 36).

Quality improvement is also included the 2016 NCLEX-RN test plan under the category of Performance Improvement (Quality Improvement) in the Management of Care section which states, "Participate in performance improvement/quality assurance processes", "Define performance improvement/quality assurance activities", and "Evaluate the impact of performance improvement measures on client care and resource utilization".

The California Board of Registered Nursing in Section 1426, Required Curriculum for nursing programs states that instructional outcomes shall include focusing on quality improvement.

4. **Participate in teamwork and collaboration with all members of the healthcare team including the patient.**

The silo approach to care in which each professional works in parallel is no longer acceptable in the current healthcare environment. Health professionals must "cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable" (IOM, 2003, p. 4). Additionally, the Institute of Medicine (2010, p. 39) notes that 60 to 70% of adverse events happening to patients in the acute care setting can be traced to problems with communication. The curriculum is structured as a concept-based curriculum which requires faculty to engage in teamwork and collaboration thus role modeling for students these behaviors.

This program student learning outcome incorporates NLN's 2010 definition of teamwork: "to function effectively within nursing and interprofessional teams, fostering open communication, mutual respect, and shared decision making to achieve quality care" (p. 69).

The 2016 NCLEX-RN includes collaboration under the Management of Care category: Collaborate with interprofessional health care members in other disciplines when providing client care (e.g., language interpreter, health care professionals) (p. 10). There are additional detailed objectives that specifically relate to this topic (p. 12):

- Identify the need for interdisciplinary conferences

- Identify significant information to report to other disciplines (e.g., health care provider, pharmacist, social worker, respiratory therapist)

- Review plan of care to ensure continuity across disciplines

- Serve as resource person to other staff

- Manage conflict among clients and health care staff

The California Board of Registered Nursing in Section 1426, Required Curriculum for nursing programs states that instructional outcomes shall include working as part of interdisciplinary teams.

5.   **Employ information management systems and patient care technology to communicate, manage knowledge, mitigate error, and support clinical judgment.**

Knowledge and use of information systems and nursing informatics in health care mandate that students learn about new technologies. This program student learning outcome is a specific competency recommended by QSEN.

The 2016 NCLEX-RN® Detailed Test Plan requires Registered Nurses to be involved in information technology as noted in task statements under the category of "Management of Care" that state: "Information Technology: Receive and/or transcribe health care provider orders; Apply knowledge of facility regulations when accessing client records; and, Access data for client through online databases and journals; Enter computer documentation accurately, completely and in a timely manner; and Utilize valid resources to enhance the care provided to a client (e.g., evidenced-based research, information technology, policies and procedures)" (p. 13).

The California Board of Registered Nursing in Section 1426, Required Curriculum for nursing programs states that instructional outcomes shall include using information technology.

6.   **Use leadership, management, legal, and ethical principles to guide practice as a Registered Nurse.**

Leadership and management are comprehensive and include managing care, delegating to others, integrating and coordinating care, investigating and sharing best practice guidelines, and serving as a leader in many capacities within the healthcare environment. The California Board of Registered Nursing in Section 1426, Required Curriculum for nursing programs states that instructional content shall include patient advocacy, legal, social, and ethical aspects of nursing, and nursing leadership and management.

This program student learning outcome relates to two of the NLN's Competencies for ADN Graduates (2010): "Advocate for patients and families in ways that promote their self-determination, integrity, and ongoing growth as human beings" (p. 33) and "Implement one's role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context" (p. 35).

The practice piece of this learning outcome is also based on the ANA's (White & O'Sullivan, 2012) *The Essential Guide to Nursing: Applying ANA's Scope & Standards in Practice and Education* is applied when planning quality, patient-centered nursing care.

Ongoing professional development is part of this competency which includes understanding the need for lifelong learning.

Ethical practice and legal rights and responsibilities are two major topics on the NCLELX-RN 2016 test plan under the Management of Care section. There are many detailed objectives that relate to these topics as well as others such as: "maintain client confidentiality and privacy; recognize ethical dilemmas and take appropriate action, and practice in a manner consistent with a code of ethics for registered nurses".

Each EPSLO has related competencies which are course leveled and progressive to increase the student's abilities, skills and knowledge base as they meet course objectives and competencies and progress through the program. Each competency will be addressed differently throughout the courses as they are leveled up.

End-of-Program SLOs with Related Competencies

End-of-program student learning outcomes (SLOs) are statements of expectations that express what a student will know, do, or think at the end of a learning experience. These learning outcomes are general, overall statements of students' abilities. To measure if these learning outcomes have been met, each learning outcome has a list of competencies. These competencies are the measurable behaviors students will achieve to demonstrate they are meeting the SLOs. Course SLOs and competencies are leveled to culminate in the end-of-program SLOs. This connection supports internal consistency of the program to ensure each course contributes to the students' eventual achievement of the program SLOs.

Each of the six program SLOs with their related competencies is listed below.

1.   Provide safe, quality, compassionate, evidence-based, patient-centered nursing care to diverse patients across the lifespan in a variety of healthcare settings.

  a. Conduct a comprehensive and/or focused physical, behavioral, psychological, and spiritual assessment of health and illness parameters, using developmentally and culturally appropriate approaches.

  b. Identify patient needs based on assessment findings.

  c. Develop a plan of care based on evidence-based practice considering individual patient needs.

  d. Provide patient-centered care based on an understanding of human growth and development, pathophysiology, pharmacology, nutrition, medical management, and nursing management.

  e. Promote factors that create a culture of safety and caring.

  f. Provide individualized, patient-specific teaching.

  g. Deliver care within expected timeframe.

  h. Monitor patient outcomes to evaluate the effectiveness and impact of nursing care to revise the plan of care.

  i. Provide patient-centered transitions of care and hand-off communications.

  j. Safely perform nursing skills in a caring, compassionate manner.

  k. Accurately document all aspects of patient care.

2.   Engage in clinical judgment when making patient-centered care and other nursing

decisions.

    a. Use clinical judgment to ensure accurate and safe nursing care for the goal of improving patient outcomes.

    b. Anticipate risks and predict and manage potential complications.

    c. Prioritize care based on individual patient needs.

3.   Participate in quality improvement processes to improve patient care outcomes.

    a. Use quality improvement processes, including nursing-sensitive indicators, to effectively implement patient safety initiatives and monitor performance measures.

    b. Examine the clinical environment to determine its impact on the nurse's ability to provide safe, quality care.

    c. Participate in analyzing errors and identifying system improvements.

    d. Implement National Patient Safety Goals in all applicable patient care settings.

4.   Participate in teamwork and collaboration with all members of the healthcare team including the patient.

    a. Effectively communicate with all members of the healthcare team, including the patient and the patient's support network when making decisions and planning evidence-based nursing care.

    b. Collaborate with appropriate interprofessional healthcare professionals when developing a comprehensive plan of care.

    c. Use conflict resolution principles as appropriate.

5.   Employ information management systems and patient care technology to communicate, manage knowledge, mitigate error, and support clinical judgment.

    a. Use patient care technologies, information systems/technologies, and communication devices to support safe nursing practice.

    b. Evaluate the role of information technology and information systems in improving patient outcomes and creating a safe care environment.

    c. Use high quality electronic sources of healthcare information when planning patient care.

6.   Use leadership, management, legal, and ethical principles to guide practice as a Registered Nurse.

   a. Practice within the legal and ethical guidelines of Registered Nursing practice.

   b. Analyze patient care within the context of the ANA Standards of Practice.

   c. Demonstrate accountability for nursing care given by self and/or delegated to others.

   d. Apply leadership and management skills when working with other healthcare team members.

   e. Serve as a patient advocate.

   f. Complete a plan for ongoing professional development and lifelong learning.

All students (Generic RN and LVN to RN) must demonstrate competency in meeting each student learning objective and the listed course levelled competencies to progress to the next semester in the program. The LVN to RN students enter the program in semester 2 (with the exception of needing to take critical thinking which is a first semester course) and all will be expected to meet the same EPSLOs to graduate from the program and achieve an associate's degree in nursing.

Unifying Theme of the Nursing Program

  The unifying theme for the College of the Sequoias Associate Degree Nursing Program is what the new graduate needs to know and do to provide safe care in the current healthcare environment as a Registered Nurse. This provides the framework that ties together all parts of the curriculum. The overall goal of all components of the nursing program is for students to achieve the end-of-program learning outcomes and competencies which are based on evidence from the nursing and healthcare literature that validates the importance of each learning outcome. To demonstrate this evidence, an explanation of the literature used to develop each learning outcome is provided. The nursing courses are leveled throughout the program to meet that goal. Each course has expected levels of achievement (course learning outcomes and competencies) that serve as defined points for evaluation of student achievement.

        Maintaining a program centered on, and organized around, current nursing practice is achieved by constant research and updating related to what is needed to provide safe care in a variety of healthcare environments. To develop and maintain the Associate Degree Nursing

Program curriculum, current trends in nursing and health care as well as traditional standards and values of nursing practice are used as the basis for the end-of-program student learning outcomes.

To maintain program currency, faculty meet each year to discuss new trends and data that influence nursing care. The program is updated each year or as needed based on the evidence from the nationally based literature and from nursing practice in California.

Faculty create specific theory and clinical assignments that address nursing standards and competencies (as outlined in our SLOs) which are purposeful and intended to provide the student with the knowledge of nursing standards of practice, ethical practice and nursing scope. Direct measurement of clinical knowledge and performance occurs in the student's evaluation record (SER) under each SLO heading (See copy of SER in repository Standard 4, Criteria 4.10).

See repository items: Standard 4 Criteria 4.1 QSEN Competencies; Standard 4 Criteria 4.1 The Future of Nursing 2020-2030; Standard 4 Criteria 4.1 College of the Sequoias Associate Degree Nursing Program Curriculum Updated 11/3/21; Standard 4 Criteria 4.1 2023 NCLEX Test Plan; Catalogs, Handbooks and Manuals: 2025 Student Handbook, Standard 4, Criteria 4.10 B-18 Student Evaluation Record Theory and Clinical

Standard 4, Criteria 4.2

Course student learning outcomes are organized to demonstrate progression to facilitate the students' achievement of:

a. The end-of-program student learning outcomes.

The overall goal of all components of the nursing program is for students to achieve the end-of-program learning outcomes and competencies which are based on evidence from the nursing and healthcare literature that validates the importance of each learning outcome. The nursing courses are leveled throughout the program to meet that goal. Each course has expected levels of achievement (course learning outcomes and competencies) that serve as defined points for evaluation of student achievement as elucidated in criteria 4.1 a, b.

Maintaining a program centered on, and organized around, current nursing practice is achieved by constant research and updating related to what is needed to provide safe care in a variety of healthcare environments. To develop and maintain the Associate Degree Nursing Program curriculum, current trends in nursing and health care as well as traditional standards and values of nursing practice are used as the basis for the end-of-program student learning outcomes.

To demonstrate this evidence, an explanation of the literature used to develop each learning outcome is provided in the COS Nursing Program curriculum which is located in the repository for your review and in Criteria 4.1 a, b.

Table 4.2 Course Student Learning Outcomes by Semester Demonstrating Progression to Meeting the End-of-Program Outcomes is located in the repository for review.

Repository items: Standard 4, Criteria 4.1 Revised_COS_Nursing_Program_Curriculum; Standard 4, Criteria 4.2, Table 4.2 Semester SLOs & EPSLOs; Course Syllabi

Standard 4 Criteria 4.3

Learning activities are varied, appropriate for the method of delivery, and incorporate learning and technology resources to facilitate the students' achievement of course student learning outcomes.

The entirety of the nursing program is provided face-to-face; both in lecture and in clinical. Faculty in the nursing program use many different teaching strategies and methods to engage students and reinforce learned content. Teaching and learning theory is applied when making formal lecture outlines and planning activities to reinforce learning. Technology in the form of gaming platforms, learning management system, use of YouTube and online testing are just a few examples. Some faculty develop online jeopardy games, use Kahoot and other platforms to reinforce content covered during lectures.

Many of our faculty use case studies as a method to reinforce content learning and application of content to theoretical clinical situations. This engages the learner in critical thinking and judgment, teaches prioritization and analysis of information/data to recognize priority nursing diagnosis and needed interventions based on individual circumstances. Students are given pre-class preparation assignments so that they come to lecture ready to engage and participate in the discussions held in groups. Case studies incorporated scenarios based on many different medical situations, individuals of cultural variation, and diversity.

Another example of a particular learning activity, this one from OB, would be to take two individual patients in the clinical setting, both having undergone cesarean sections/or newborns/or vaginal deliveries, and compare and contrast the patients, their care and treatments, their outcomes etc. Discuss these similarities and differences in post conference and open discussion.

Learning opportunities also include the learning of new skills. Students are taught how to perform skills and are expected to practice those skills and be able to competently perform them for their instructors prior to ever performing a skill with a patient.

Students also engage in simulation. In fourth semester one of the courses (NURS 175) is dedicated to hands on learning through use of simulation. Many of the faculty use various simulations to reinforce content, practice learned procedures, and develop competence as a nurse. Students have preparatory assignments, prebrief, simulation and debriefing exercises. Simulation allows students to learn how to handle emergent situations that they would not normally be allowed to participate in,

during simulation in a safe environment and reflect on the provided care, make improvements and apply this knowledge to the clinical setting.

These activities assist students in meeting their student learning outcomes through practice, through thinking skills development, communication principles, care of patients in a safe environment, use of technology and informatics etc.

Excerpt from Standard 4, Criteria 4.3; Table 4.3. Teaching Methods and Learning Activities.

Course Outcomes	Leveled Competencies	Teaching Strategies	Learning Outcomes	Evaluation Methods
NURS 143: Concepts of Pediatric Care 1. Analyze nursing concepts to provide safe, quality, compassionate, evidence-based, patient-centered nursing care to children, their families, and other support persons.	Course Obj. 1 Competencies a. Conduct a focused and comprehensive physical, behavioral, psychological, and spiritual assessment of health and illness parameters, using developmentally and culturally appropriate approaches when providing care for children. b. Differentiate important data related to patient needs based on assessment findings. c. Develop an individualized plan of care identifying evidence-based nursing care considering individual patient needs. d. Provide patient-centered care based on an understanding of human growth and development, pathophysiology, pharmacology, nutrition, medical management, and nursing management. e. Differentiate among factors that are most important for creating a culture of safety and caring for children.	Power point slides on the material to be covered for class are provided on the Canvas LMS. Corresponding reading from the textbook is provided in a topical outline located in the course syllabus. Study guides that correspond to the assigned reading. In class discussions of major key point areas in class using Socratic questioning. Videos that show information pertaining to the material are also shown in class at times and available on the Canvas LMS. Use of case studies Use of virtual simulation	Small groups rotate through different case study situations across the pediatric lifespan. Once all groups have rotated through each case study we discuss it as a class. Educational and informational videos shown during class with discussion afterward. Virtual Simulation program on caring for a pediatric patient in a complex situation. Small group educational poster design and presentation to class. Clinical hands-on experience in a pediatric unit and NICU (Neonatal Intensive Care Unit). Observational clinical experience with a school nurse at an elementary, junior high, or high school. Hands-on experience in a preschool setting to observe child development and provide health promotion teaching to the children.	Next-gen NCLEX style questions are given as homework assignments. Clinical journals to reflect on how the objective was met in their clinical experiences. Head to Toe assessments of pediatric patients on the PEDS and NICU units, developing a priority care plan using both the nursing process and Tanner's model, which includes care planning, goal setting, interventions for care and evaluation of their goals, related to the information gathered during their experience. Research of a chronic condition that will affect the child throughout the lifespan. A detailed look into the condition is done and planning care is discussed. Students present this information to their

Course Outcomes	Leveled Competencies	Teaching Strategies	Learning Outcomes	Evaluation Methods
	f. Implement priority patient teaching that reflects the patient's developmental stage, age, culture, religion, spirituality, patient preferences, and health literacy considerations when providing care for children. g. Deliver care within expected timeframe when providing care for children. h. Select priority patient outcomes to evaluate the effectiveness and impact of nursing care used to revise the plan of care. i. Demonstrate how to property provide patient-centered transitions of care and hand-off communications, including discharge planning. j. Demonstrate safe, compassionate performance of psychomotor skills when providing care for children. k. Accurately document all aspects of patient care.		Observational experience with a pediatric concurrent care/hospice nurse or day at a regional center where children are assessed by a team to determine developmental/physical delays. Research into a chronic condition (student's choice) that will affect the child and family throughout the child's lifespan. Students chart vital signs, intake and output, meal amounts, and pertinent assessment findings in the patient EMR with supervision of the instructor when in the clinical arena.	peers during their clinical experience. Completing a concept map, SBAR report and answering the guided reflective questions in assigned virtual simulation experience. Completing the questions on observational clinical days and providing reflection on their experiences. SBAR handoff report to be given by students during our post conference time. 4 exams given throughout the semester containing multiple choice, multiple answer, drop down answers, ordering, matching and categorization to assess this objective.
2. Apply clinical judgment to make complex patient-centered care decisions when providing care for children, their families, and other support persons.	Course Obj. 2 Competencies a. Apply clinical judgment to ensure accurate and safe nursing care, including addressing anticipated changes in the patient's condition. b. Analyze the patient situation to determine common risks when providing care for	2. In class discussions of major key point areas from assessment to potential issues that could arise with the pediatric patient in class using Socratic questioning.	2. Small groups rotate through different case study situations and discuss quality outcomes and how teaching/learning, understanding barriers can impact care. Virtual Simulation program on caring for a pediatric patient in a complex situation.	2. PEDS and NICU units, developing a priority plan of care, which includes a critical thinking (clinical judgement) component of prioritization of care and ranking the top 3 priorities for the patient from the information gathered during their

Course Outcomes	Leveled Competencies	Teaching Strategies	Learning Outcomes	Evaluation Methods
	children and predict and manage potential complications. c. Prioritize nursing interventions when caring for children.	Power point slides in Canvas LMS. Study guide that corresponds to assigned reading. Think – Pair – Share to think through a case scenario with a peer and then return to a whole class discussion. Videos that show information pertaining to the material are also shown in class at times and available on the Canvas LMS. Use of case studies Use of virtual simulation Use of clinical time to ask questions about the patient the student is caring for.	Clinical hands-on experience in a pediatric unit and NICU (Neonatal Intensive Care Unit). Observational clinical experience with a school nurse at an elementary, junior high, or high school. Observational experience with a pediatric concurrent care/hospice nurse or day at a regional center where children are assessed by a team to determine developmental/physical delays.	experience. This along with discussion in their care plan of potential problems that could arise for the patient throughout the clinical day. Completing an SBAR report and answering guided reflective questions in assigned virtual simulation experience. Clinical judgment is assessed throughout the virtual simulation. Clinical journals completed by students providing reflection on how they met this objective in their experiences. Next-gen NCLEX style questions are given as homework assignments. 4 exams given throughout the semester containing multiple choice, multiple answer, drop down answers, ordering, matching and categorization to assess this objective.
3. Select quality improvement processes to improve patient care outcomes when providing care for children, their	Course Obj. 3 Competencies a. Analyze quality improvement processes to effectively implement patient safety initiatives and	3. In class discussion of key teaching points and safe care for pediatric patients and their families.	3. Think – Pair – Share discussions on teaching/evaluation methods for patients and families.	3. Clinical journals completed by students providing reflection on how they met this objective in their clinical experience.

Course Outcomes	Leveled Competencies	Teaching Strategies	Learning Outcomes	Evaluation Methods
families, and other support persons.	monitor performance measures, including nursing-sensitive indicators. b. Apply information about the clinical microsystem to determine its impact on the nurse's ability to provide safe, quality care. c. Analyze the use of National Patient Safety Goals in the care of children.	Use of case scenarios to discuss key elements to barriers in patient/family learning. Discussion of patient safety goals and why they have them during student's clinical experience.	Socratic questioning during class time to assess student understanding of this objective. Virtual Simulation assesses the students understanding and ability to assess and provide teaching and improvement in quality of care for patient/family needs. Clinical hands-on experience in a pediatric unit and NICU (Neonatal Intensive Care Unit). Discussion during post conference about teaching/learning needs of patients and families. Observational clinical experience with a school nurse at an elementary, junior high, or high school. The opportunity to see how school nurses address needs and possible barriers.	Research project on a chronic condition and how that condition will impact the patient and family that discusses the needs that they will need addressed throughout the lifespan. PEDS and NICU plans of care with discussion of teaching needs and how they would implement those ideas. Next-gen NCLEX style questions are given as homework assignments. 4 exams given throughout the semester containing multiple choice, multiple answer, drop down answers, ordering, matching and categorization to assess this objective.
4. Initiate teamwork and collaboration with members of the interprofessional team, the patient, and the patient's support persons when providing care for children, their families, and other support persons.	Course Obj. 4 Competencies a. Analyze own communications with members of the healthcare team, including the patient and the patient's support network when making decisions and planning care children. b. Engage in communication with the appropriate interprofessional healthcare team member when	4. Discuss interdisciplinary teams in pediatric nursing during class time and what team members are utilized in different situations that pertain to the material being presented.	4. Socratic questioning during class time to assess student understanding of this objective. Virtual Simulation experience. Clinical hands-on experience in a pediatric unit and NICU (Neonatal Intensive Care Unit) seeing how all team members work together to provide care	4. 4 exams given throughout the semester containing multiple choice, multiple answer, drop down answers, ordering, matching and categorization to assess this objective. Clinical paperwork for PEDS and NICU discusses team members used to provide care for the patient and family. Clinical journals completed by

Course Outcomes	Leveled Competencies	Teaching Strategies	Learning Outcomes	Evaluation Methods
	providing care for children. c. Apply conflict resolution principles as needed on the patient care unit.	Power point slides in Canvas LMS. Study guide that corresponds to assigned reading. Use of case scenarios to discuss key team players and their specific roles for pediatric patients and their families. Discussions during post conference about teamwork on the units/areas experienced that day.	to the patient and family.	students providing reflection on how they met this objective.
5. Analyze the role of information management systems and patient care technology used to communicate, manage knowledge, mitigate error, and support decision-making when providing care for children, their families, and other support persons.	Course Obj. 5 competencies a. Analyze various patient care technologies, information systems/technologies, and communication devices to support safe nursing practice when providing care for children. b. Demonstrate the use of concepts related to information technology and information systems to improve patient outcomes and create a safe care environment. c. Select high quality electronic healthcare resources to plan quality care. Course Obj. 6 competencies	5. Discussion during class time on use of EMR and how nurses use technology to provide care, teaching, and follow up for their patients and families. Clinical experiences where students must access the EMR and electronic immunization records for the patient. Virtual simulation assignment.	5. Socratic questioning during class time to assess student understanding of this objective. Virtual Simulation experience where students use a computer-based program to care for a patient. Clinical hands-on experience in a pediatric unit and NICU accessing the EMR, charting in the EMR with supervision. Research project using a search engine to find peer reviewed journal articles and/or research-based findings on that condition.	5. Clinical experience in PEDS and NICU accessing the patient chart for information. Clinical journals completed by students providing reflection on how they met this objective. Completion of research project with adequate cited resources.

Course Outcomes	Leveled Competencies	Teaching Strategies	Learning Outcomes	Evaluation Methods
6. Analyze leadership, management, legal, and ethical principles to use as a basis for practice as a Registered Nurse when caring for children, their families, and other support persons	a. Apply specific legal and ethical principles of Registered Nursing practice when caring for children. b. Analyze how the ANA Standards of Practice apply to the care of children. c. Demonstrate accountability for nursing care given by self-and/or delegated to others. d. Demonstrate how leadership and management skills are used when working with other healthcare team members. e. Provide examples of self-serving as a patient advocate when caring for children.	6. Class discussion on the legal, ethical, advocacy, and management of pediatric patients and families. Educational videos on the legal/ethical and advocacy for children and families. Power point slides posted in the Canvas LMS. Study guide that corresponds to the assigned reading. Use of case studies in class. Use of shaken baby demo doll.	6. Small group discussions and case studies, then come together as whole class. Socratic questioning during class time. Clinical experiences in PEDS and NICU with social/family issues. School nurse observation clinical experience to see how legal/ethical and advocacy is different in that care setting from hospital setting. Concurrent/Hospice observation clinical experience to see how legal/ethical and advocacy is different in the home care setting from hospital setting.	6. Next-gen NCLEX style questions are given as homework assignments. 4 exams given throughout the semester containing multiple choice, multiple answer, drop down answers, ordering, matching and categorization to assess this objective. Clinical journals completed by students providing reflection on how they met this objective.

Repository item: Standard 4 Criteria 4.3 Table 4.3 Teaching Methods and Learning Activities, Sample Assignments from Each Semester.

Standard 4, Criteria 4.4

The nursing curriculum is:

   a. ***Developed by the faculty and regularly reviewed for currency; and***
   b. ***Implemented as published.***

The COS nursing program curriculum/program of study is located in SharePoint where all faculty and invited individuals can access it. The program of study is also available for review by anyone in the COS Catalogue pages 476-485. The catalogue is available on the COS website and can be viewed by any member of the public.

The COS nursing program meets once monthly to review the curriculum and ensure that it is current, follows best practices, and is being implemented accordingly as published. The curriculum is concept-based and was approved by the college and the CA BRN and implemented beginning in the Fall 2020 semester.

In addition, the entire faculty meet during Dialogue Day (a day set aside for discussions relating to outcomes and assessments) to hold an annual curriculum review day. Discussion centers around what is going well and where improvements are needed and what current practices are being implemented. Faculty share various teaching strategies and activities used in the courses to promote student learning and attainment of SLOs. To maintain program currency, faculty meet each year to discuss new trends and data that influence nursing care. The program is updated each year as needed based on the evidence from nationally based literature and from nursing practice in California. All changes to the curriculum and the program as a whole are reported to the CABRN within 10 days as required by the Nurse Practice Act Section 1432(a) (2)

The current concept-based curriculum was developed with the assistance of a consulting expert in concept-based curriculum; Linda Caputi. The consultant helped the faculty develop a CBC curriculum to meet the needs of the program and the requirements for curriculum set forth by the BRN. The consultant helped faculty decide which concepts would be taught and the medical exemplars that would be used in each course. Faculty received numerous textbooks, professional development opportunities (conferences, and webinars) and educational materials to prepare them for teaching in a concept-based curriculum.

During curriculum meetings any changes or suggestions for revision to the curriculum is discussed and voted on. All faculty are encouraged to attend curriculum meetings and to have a voice in the revisions and changes to curriculum. The college curriculum committee and the BRN must also agree to curriculum changes.

The nursing faculty implement the curriculum in lecture and in the clinical setting as outlined in the Curriculum Program of Study. The currently used textbooks are from Pearson and faculty use the online associated platform of "Pearson My Lab and Mastering". Some faculty do choose to use supplementary texts and articles to enhance learning and content mastery by the students. Maintaining a program centered on, and organized around, current nursing practice is achieved by constant research and updating related to what is needed to provide safe care in a variety of healthcare environments. Faculty teach students content via concepts and exemplars throughout the entire duration of the nursing program.

Delivery of a concept-based curriculum is through an active learning environment that encourages individual student contributions as they learn and achieve. This requires faculty to be actively involved with students in the classroom through mutual respect, responsibility, and collaboration. The teaching skills needed to deliver the concept-based curriculum require consideration of the diverse student backgrounds and perspectives that are representative of our student body.

The nursing faculty and nursing administration use the program's mission to formulate end-of-program student learning outcomes, which serve as the basis for the development, implementation, and evaluation of the nursing program curriculum. To ensure the educational

needs of students are met, student achievement of these student learning outcomes and established program outcomes are used as metrics to determine program effectiveness.

Faculty, along with the CBC consultant, develop detailed class plans for each course with outlines of how the content concepts and exemplars would be taught with examples of teaching assignments and student learning activities. These have been modified and revised until the faculty felt that the most benefit was being achieved by the students in the class and where the content was being taught most effectively. This is an ongoing process and most faculty members keep "next time notes" and continually revise their courses making them better and better each semester,

The last visit by the BRN in November 2022 was successful and received a "no recommendations" report. The COS nursing program proved that the CBC implemented up to that point complied with BRN standards and that the recommendations from the previous visit (to update the curriculum) were successfully met.

The COS nursing program has policies and procedures that help ensure success of the curriculum that include but are not limited to:

o A-02 Curriculum Design Implementation
o A-28 Testing Blueprint
o D-04 Curriculum Committee

The reviewers can see examples of student work and assignments used during implementation of the curriculum in the submitted materials for Standard 4, Criteria 4.3

**Repository Items: Standard 4, Criteria 4.1 Revised COS Nursing Program Curriculum Updated; Meeting Minutes: Curriculum Committee Minutes; Meeting minutes: Annual Curriculum Review Meeting Minutes; Catalogs, Handbooks and Manuals: Policy and Procedure Manual. (See policies A-02 Curriculum Design Implementation, A-28 Testing Blueprint, D-04 Curriculum Committee); Course Syllabi; COS 2024-2025 Catalogue.

Standard 4, Criteria 4.5 Narrative

The nursing program of study includes:

   a. *General education courses/concepts that enhance nursing knowledge and practice for the educational level at which students are being prepared*
   b. *Nursing courses that facilitate student achievement of course student learning outcomes and end-of-program student learning outcomes.*

Associate of Science in Registered Nursing (AS)
Division: Nursing & Allied Health

RN & LVN-RN Advanced Placement Program Admission Requirements (prior to application):

- Graduation from an accredited high school or GED equivalency
- Overall GPA of 2.5 or higher for all courses at or above collegiate levels
- Must pass Anatomy, Physiology, Microbiology, and English 1 with a minimum 'C' grade
- Accumulative GPA of 2.5 or higher on combined Biology prerequisite courses
- Must complete 4 semester units including a lab component in each Biology prerequisite course
- No more than one (1) repetition in each Biology prerequisite coursework is allowed, W's count as a repeat
- All Additional Graduation Requirements must be passed with a minimum 'C' grade and can be taken either before entry into the program or during completion of nursing courses
- ATI TEAS exam must be taken and passed with a score of 62% or higher
  - You must achieve this score in your first two attempts at the TEAS. If you cannot achieve a score of at least 62% in your first two attempts, you will not be considered for the COS Nursing Program. A minimum of 45 days between test taking is required.

Additional LVN-RN Advanced Placement Program Admission Requirements (prior to application):

- LVN Program Certificate
- LVN License

Local area hospitals require background checks and urine drug screen prior to clinical placement

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Registered Nursing is an academic discipline concerned with the study of biological, behavioral, and physical sciences and will require critical thinking, effective communication, physical assessment, cultural competency skills, and abilities. A higher degree may be required to meet minimum job requirements depending on the position.

COS Associate Degree General Education (COS catalogue for courses included in categories)

- Area A1: Written Communication-4 units
- Area A2: Oral Communication/Analytic Thinking-3 units
- Area B: Natural Science-3 units
- Area C: Humanities-3 units
- Area D: Social/Behavioral Science-3 units

General Education Requirements: A minimum of 18 units of general education is defined in Areas A-D above. All courses require a minimum grade of C. The additional 3 units required by Title 5 will be met with the health and wellness subject requirement. Note: completion of the CSU

GE or IGETC transfer general education requirements or general education requirements at any regionally accredited university will fulfill the COS general education, subject, and competency requirements. **+:**

All courses and the TEAS Exam (score 62% or higher) must be completed PRIOR to applying to the RN Program.

- BIOL 030 Human Anatomy 4 units
- BIOL 031 Human Physiology 4 units
- BIOL 040 General Microbiology 4 units
- ENGL 001 college Reading and Composition 4 units
- + corequisite courses

Recommended for completion prior to entering RN Program

- COMM 001 Fundamentals of Public Speaking 3 units
- Or COMM 004 Interpersonal Communication
- Or COMM 008 Group Communication
- PSY 001 General Psychology 3 units
- SOC 001 Introduction to Sociology 3 units
- Or ANTH 010 Cultural Anthropology
- Or NURS 106 Cultural competency in Healthcare

*Courses meet General Education requirements and 12 units may double count above in COS-GE. Students earning a degree in **Registered Nursing are exempt from the 2-unit PE subject requirement, and the 1-unit Information Competency requirement**. Registered Nursing students also use a course substitution for the 3-unit Health & Wellness requirement using, one of the following alternatives: PSY 001, SOC 001, or NURS 106.

General Education Philosophy for the Associate Degree

The College of the Sequoias philosophy for the Associate Degree and general education states that general education breadth emphasizes democratic concepts based on the value and dignity of each individual, thus helping students prepare to undertake the responsibilities of citizenship and to participate knowledgeably in the varied experiences of life.

Major requirements educate students in the area of specialization; breadth requirements help them develop the capacity for independent judgment. The general education breadth requirements are of vital importance in the personal, social, and vocational/professional life of each student.

In personal development, breadth requirements help students develop self-awareness, thus increasing their understanding of personal potential and limitations.

In social relationships and in the life of society, breadth requirements help students communicate more effectively, better understand others, and develop an awareness of societal relationships.

In professional development, breadth requirements help students become more effective in the workplace through more effective communication through a better understanding of the relationship between the job at hand and the larger world.

General education breadth requirements:

- Expose students to the major disciplines of accumulated knowledge
- Stimulate curiosity about their surroundings
- Help students evaluate alternatives so that personal values can be formed
- Develop effective communication skills
- Gain a sense of self-worth
- Learn to make rational decisions based on the utilization of problem-solving techniques; and
- Question simple solutions of complex problems and if appropriate, seek alternatives

Ref: College of the Sequoias 2024-2025 Catalogue: Associate Degree Requirements

https://catalog.cos.edu/associate-degree-requirements/

The COS Associate Degree requirements include completion of the:

1. Required major courses and restricted elective courses with a "C" or better grade in each course (required and restricted elective courses may be substituted with the approval of the Division Chair),

2. General Education requirements,

3. Subject requirements including *PE, *Health & Wellness, and American Institutions, and

4. A minimum of 60 units of degree applicable courses numbered 1-299, at least 12 of which must be taken in residence at College of the Sequoias, with a "C" (2.0) average (see Associate Degree Requirements for additional details).

Students who anticipate continuing their education for a BSN (Bachelor of Science in Nursing) are strongly encouraged to take CHEM 020 and MATH 021.

Table 4.5a RN Program Units to Completion

College of the Sequoias - RN Traditional									
Pre-requisites	16	English 001, Biol 030, Biol 031, Biol 040							

Co-requisites	9	Comm, Psychology, Soc							
RN	40	RN Major							
GE	22	Local GE A1, A2, B, C, D, HW							
Double-counting	-12	Biol 030 for Area 2, Psych 1 for Area HW, Soc 001 for Area D, Comm 001 (Area 1B)							
Total units	75								
College of the Sequoias - LVN to RN Adv. Pl.									
Pre-requisites	16								
Co-requisites	9								
LVN	25								
GE	22								
Double-counting	-12	Biol 030 for Area 2, Psych 1 for Area HW, Soc 001 for Area D, Comm 001 (Area 1B)							
Total units	60								

Students should be advised that this program requires 73-75 units (students who have equivalent 3-unit courses in English and Math from another school may need only 73 units for completion whereas students completing courses at COS alone will require 75) or more for traditional student and 58-60 units or more for LVN to RN students. Applicants will be required to complete background checks and drug screenings.

The chosen prerequisites for the RN program comply with the requirements set forth by the CA BRN Section 1426 page 106 and 107 (2024 ed.) which outlines the knowledge, skills, and abilities necessary to function in accordance with the registered nurse scope of practice and defined in code section 2725, and meet minimum competency standards of an RN. These sections of the CA Nurse Practice Act outline the minimum number of semester units (58) which include at least the following number of units in specified course areas:

1. Art and science of nursing (36 semester units of which 18 units must be in clinical practice)
2. Communication skills (6 semester units including written, oral and group communication)
3. Related natural sciences (anatomy, physiology, and microbiology), behavioral sciences, and social sciences (16 semester units)

The CA BRN states theory and clinical practice shall be concurrent in the nursing areas of geriatrics, medical-surgical, mental health/psychiatric nursing, obstetrics, and pediatrics. All instructional outcomes will focus on delivering safe, therapeutic, effective, patient-centered care; practicing evidence-based practice; working as part of interdisciplinary

teams; focusing on quality improvement; and using information technology. The CA BRN specifies that instructional content needs to include (but is not limited to) critical thinking, personal hygiene, patient protection and safety, pain management, human sexuality, client abuse, cultural diversity, nutrition, pharmacology, patient advocacy, legal, social and ethical aspects of nursing and nursing leadership/management.

In addition to summarize the requirements as set forth in the Nursing Practice Act, section 1426 Required Curriculum, the CA BRN and the practice act require that the following be integrated throughout the curriculum:

1. Nursing process
2. Intervention skills
3. Physical, behavioral and social aspects of human development through the lifespan
4. Knowledge and skills required to develop collegial relationships with health care providers (collaboration)
5. Communication skills
6. Natural sciences
7. Related behavioral and social sciences with emphasis on societal and cultural patterns, human development and behavior relevant to health-illness

This section also spells out what a program must possess in terms of evaluative methods, number of credits, and clinical practice requirements.

Ref: Board of Registered Nursing, California Nursing Practice Act. 2024 ed.

**Repository Item: California Nursing Practice Act, 2024 ed.

RN Program Core Courses

Completion of the **traditional nursing program** includes completion of the following core nursing courses over 4 semesters, which allows students to successfully meet all the required leveled competencies and student learning outcomes of the program:

NURS 121 Fundamentals of Nursing
NURS 123 Critical Thinking/Clinical Judgement in Nursing
NURS 124 Concepts of Adult Health Nursing 1
NURS 133 Concepts of Mental Health and Psychiatric Nursing
NURS 134 Concepts of Adult Health Nursing 2
NURS 135 Concepts of Nursing Care of the Pregnant Family and the Neonate
NURS 143 Concepts of Pediatric Nursing
NURS 144 Concepts of Adult Health Nursing 3
NURS 174 Concepts of Adult Health Nursing 4
NURS 175 Transition to Registered Nursing Practice

The **advanced placement LVN to RN** students complete 3 semesters of nursing courses after admission into the program in core nursing courses, which allows students to successfully meet all the required levelled competencies and student learning outcomes of the program.

NURS 123 Critical Thinking/Clinical Judgement in Nursing
NURS 133 Concepts of Mental Health and Psychiatric Nursing
NURS 134 Concepts of Adult Health Nursing 2
NURS 144 Concepts of Adult Health Nursing 3
NURS 174 Concepts of Adult Health Nursing 4
NURS 175 Transition to Registered Nursing Practice

The nursing program core courses progress from simple to complex nursing care and competency achievement. In the fundamentals course students focus on concepts necessary for safe, compassionate, patient-centered nursing care for a diverse patient population with well-defined healthcare concerns. First semester courses focus on foundational concepts related to professional practice as a nurse and legal and ethical responsibilities of the RN. Students begin to use clinical judgement and critical thinking.

Second semester courses build upon and apply concepts of nursing practice to the care of patients with various mental health needs, advancing acute and chronic conditions and medical surgical needs in a diverse patient population and nursing practice of the pregnant woman and the neonate. Application of new and previously learned nursing concepts, patient care skills and clinical judgment occurs in a variety of clinical settings.

Third semester courses continue to build on and expand all previously learned concepts of nursing practice with application to the care of children, adult patients with complicated conditions, their families, and other support persons, while maintaining competency in previously learned nursing concepts, patient care and clinical judgement in a variety of clinical settings.

During the final culminating semester, the concepts of nursing practice are expanded, and acquisition and application of care is emphasized with patients who have complex healthcare needs, their families and support persons. In the transitions to practice course, a synthesis of all concepts and nursing content taught in the program is provided with application in the simulation lab. The transitions course enables the individual student to recognize areas that need enhancement prior to entering RN practice and includes a component for NCLEX-RN readiness strategies.

Students are able to access the program of study on the COS Nursing and Allied Health Website: Registered Nursing link: https://www.cos.edu/en-us/academics/nursing-allied-health/registered-nursing; and the 2024 College of the Sequoias Academic Catalog.

**Repository Item: Course Syllabi

Standard 4, Criteria 4.6

Course credits and/or clock hours for all nursing courses in the program of study, including ratios for contact hours, comply with requirements of the:

a. *Governing organization and*

b. *Regulatory agencies*.

"College of the Sequoias grants units in accordance with Title 5 (Section 55002.5). The District uses a standard term length of 17.5 weeks and awards credit in half-unit increments; 53.5 total student learning hours is equivalent to 1 unit of credit. The minimum unit increment is .5 units, and unit calculations are thresholds (i.e., unit calculations are not rounded up)". Ref: AP4090. College of the Sequoias uses a 50-minute clock hour for calculations of class times/hours. A regular 60- minute hour is calculated using a 50-minute hour (Lecture Hour Equivalents). This is to compensate students for the time it takes to travel between classes (10 minutes). Per the College of Sequoias Master Agreement (2021-2024) pg.11, "A contact (lecture, lab, activity or noncredit) hour is defined as fifty (50) clock minutes. Conversions are provided in an appendix of the Master Agreement.

The College of the Sequoias awards units of credit in the following instructional categories according to the specified unit configuration ratios:

Lecture:

1 hour in-class + 2 hours outside-of-class= 3 total student learning hours which equal 1 unit of credit

Lab:

3 hours in-class + 0 hours outside-of-class= 3 total student learning hours which equal 1 unit of credit

Work Experience:

Each 75 hours of paid work equals 1 unit of credit.

Each 60 hours of non-paid work equals 1 unit of credit.

Clock Hours

For programs designated by the governing board as clock hour programs, units of credit shall be awarded in a manner consistent with the provisions of 34 Code of Federal Regulations part 600.2.

**Repository Items: Standard 4, Criteria 4.6 AP4090; Standard 4, Criteria 4.6 34 Code of Federal Regulations part 600.2

The Accrediting Commission for Community and Junior Colleges (ACCJC) policy on Credit Hour, Clock Hour, and Academic Year require institutions to meet generally accepted practices when awarding credit, which require evidence of:

1. Academic study of sufficient content, breadth, and length
2. Levels of rigor appropriate to the programs and/or degrees, including baccalaureate degrees offered;
3. Statements of expected student learning outcomes relevant to the disciplines; and

4. Assessment results which provide sufficient evidence that students are achieving key institutional and program learning outcomes.

ACCJC Policy excerpt: "An accredited institution conforms to a commonly accepted minimum program length of 60 semester credit hours or 90 quarter credit hours awarded for achievement of student learning for an associate degree...".

The College of the Sequoias written policy on credit/clock hours follows the written policy in the ACCJC. The policy for credit hour, clock hour, and academic year can be viewed in the ACCJC Compendium of Institutional and Operational Policies pages 26-29.

** Repository Item**: Standard 4, Criteria 4.6: ACCJC Compendium of Institutional and Operational Policies

The COS ADN program follows all policies and requirements related to awarding college units for hours of instruction as identified by COS, BRN, Accrediting Commission for Community and Junior Colleges (ACCJC), and California Community College Chancellors Office See Table 4.6c Unit of Credit-to Contact Hour Ratios below.

Table 4.6a Unit of Credit-to-Contact-Hour Ratios

Academic Setting	Unit of Credit-to-Contact-Hour Ratio/Equivalency
Didactic	1:1
Laboratory	1:3
Simulation	1:3
Clinical	1:3
Methods Used to Verify Credit-to-Contact Hour Ratios: Nursing Policy A-29 Program Hours of Instruction; COS Administrative Policy 4090 Unit/Credit Hour Configuration; California Nurse Practice Act, section 1426 pg. 107, 1(g), 2024 ed.; AACJC Policy on Credit Hour, Clock Hour, and Academic Year; Board of Governors of California Community Colleges Revisions to Title 5 Regulations: Credit Hour - § 55002.5	

To attain an associate's degree, College of the Sequoias requires students to complete the general education requirements and have a minimum of 60 units of college level courses numbered 1-299, at least 12 of which must be taken in residence at College of the Sequoias, with a "C" (2.0) average. These 60 units include general education, major, and elective courses. See the COS catalog description of requirements for the associate degree at this link:

https://catalog.cos.edu/associate-degree-requirements/

The catalog is also available in the repository.

The associate of science in registered nursing degree requirements are as follows:

Table 4.6b Nursing and General Education Units for Each Program Option

Program Option	Total Units	Nursing Units	General Education Units, Prerequisites and Corequisites
Traditional RN ADN Program	75	40	35
LVN-RN Advanced Placement Option	60	25	35
Year-round RN ADN Program	75	40	35
Methods Used to Verify Program Length: COS Registered Nursing webpage Program Requirements and LVN to RN program options at this link: https://www.cos.edu/en-us/academics/nursing-allied-health/registered-nursing and COS catalog for associate science registered nursing requirements at this link: https://catalog.cos.edu/areas-study/nursing/associate-science-registered-nursing-not-for-transfer-as/ and COS catalog associate science registered nursing advanced placement requirements at this link: https://catalog.cos.edu/areas-study/nursing/associate-science-registered-nursing-advanced-placement/			

The total curriculum plan listing all courses needed to attain a nursing degree at College of the Sequoias is noted in the "Total Curriculum Plan" created for the CA BRN which has been placed in the repository for review.

** Repository Item: Standard 4, Criteria 4.6: Total Curriculum Plan; General Program items: COS RN Program Units to Completion

Table 4.6c Summary of CA BRN Approved Total Curriculum Plan for College of the Sequoias ADN Program

Course	Wks.	Total Units	Theory		Lab/Clinical		Total Hours	
			Units	Hr./Wk.	Units	Hr./Wk.	Theory	Lab
Engl. 001 (pre-req)	17.5	4	4	4		0	70	0
Anatomy 030 (pre-req)	17.5	4	3	3	1	3	52.5	52.5
Physiology 031 (pre-req)	17.5	4	3	3	1	3	52.5	52.5
Microbiology040 (pre-req)	17.5	4	3	3	1	3	52.5	52.5
Comm 0004/008 (co-req)	17.5	3	3	3	0	0	52.5	0
Psychology 001 (co-req)	17.5	3	3	3	0	0	52.5	0
Soc001/Nurs106 or Anthro 010 (co-req)	17.5	3	3	3	0	0	52.5	0
Humanities/Elective	17.5	3	3	3	0	0	52.5	0
History 017/018 or Pol Sc.005	17.5	3	3	3	0	0	52.5	0
Math 230 or higher	17.5	4	4	4	0	0	70	0
Total Gen Ed, Pre-req, Coreq.		35	32	32	3	9	560	157.5
Nurs. 121	17.5	6	3	3	3	9	52.5	157.5
Nurs. 124	17.5	3	1.5	1.5	1.5	4.5	26.25	78.75
Nurs. 123	17.5	2	2	2	0	0	35	0
Nurs. 134	17.5	4	2	2	2	6	35	105
Nurs. 135	17.5	3	1.5	1.5	1.5	4.5	26.25	78.75
Nurs. 133	17.5	3	1.5	1.5	1.5	4.5	26.25	78.75
Nurs. 143	17.5	3	1.5	1.5	1.5	4.5	26.25	78.75

Course	Wks.	Total Units	Theory Units	Theory Hr./Wk.	Lab/Clinical Units	Lab/Clinical Hr./Wk.	Total Hours Theory	Total Hours Lab
Nurs. 144	17.5	6	3	3	3	9	52.5	157.5
Nurs. 174	17.5	7	3	3	4	12	52.5	210
Nurs. 175	17.5	3	1	1	2	6	17.5	105
Total Nursing Courses		40	20	20	20	60	350	1050
Total for Entire Program							910	1207.5

Table 4.6d Curriculum Plan for College of the Sequoias LVN-RN Advanced Placement Program

Course	Wks.	Total Units	Theory Units	Theory Hr./Wk.	Lab/Clinical Units	Lab/Clinical Hr./Wk.	Total Hours Theory	Total Hours Lab
Engl. 001 pre-req	17.5	4	4	4		0	70	0
Anatomy 030 pre-req	17.5	4	3	3	1	3	52.5	52.5
Physiology 031 pre-req	17.5	4	3	3	1	3	52.5	52.5
Microbiology040 pre-req	17.5	4	3	3	1	3	52.5	52.5
Comm 0004/008 co-req	17.5	3	3	3	0	0	52.5	0
Psychology 001 co-req	17.5	3	3	3	0	0	52.5	0
Soc001/Nurs106 or Anthro 010 co-req	17.5	3	3	3	0	0	52.5	0
Humanities/Elective	17.5	3	3	3	0	0	52.5	0
History 017/018 or Pol Sc.005	17.5	3	3	3	0	0	52.5	0
Math 230 or higher	17.5	4	4	4	0	0	70	0
Total Gen. Ed, Pre-req, and Co-req		35	32	32	3	9	560	157.5

Course	Wks.	Total Units	Theory	Lab/Clinical	Total Hours	Course	Wks.	Total Units
Nurs. 123	17.5	2	2	2	0	0	35	0
Nurs. 133	17.5	3	1.5	1.5	1.5	4.5	26.25	78.75
Nurs. 134	17.5	4	2	2	2	6	35	105
Nurs. 144	17.5	6	3	3	3	9	52.5	157.5
Nurs. 174	17.5	7	3	3	4	12	52.5	210
Nurs. 175	17.5	3	1	1	2	6	17.5	105
Total Nursing Courses		25	12.5	12.5	12.5	38.5	218.75	656.25
Total for Entire Program							778.75	813.75

The CA BRN Requirements:

The CA BRN Section 2786 (a)(1) States that "An approved school of nursing, or an approved nursing program, is one that has been approved by the board, gives the course of instruction approved by the board, covering not fewer than two academic years, is affiliated or conducted in connection with one or more hospitals, and is an institution of higher learning". Section (a)(3) page 48, additionally states, "An approved school of nursing or nursing program may cover fewer than two academic years if approved to provide a course of instruction that prepares a licensed vocational nurse licensed under the Vocational Nursing Practice Act (commencing with Section 2840) for a license under this chapter".

The CA BRN requires that schools of nursing meet a minimum of 500 direct patient care clinical hours in a board-approved clinical setting with a minimum of 30 hours of supervised direct patient care clinical hours dedicated to each nursing area specified by the board. (Section 2786 (2) pg. 48. The five nursing areas are as follows: Geriatrics; Medical-surgical; Mental health/psychiatrics nursing; Obstetrics; and Pediatrics. The BRN does not have any current regulations related to the use of simulation in lieu of clinical time.

The BRN requires that approved nursing programs gives the course of instruction that is approved by the board, covering not fewer than two academic years, is affiliated with one or more hospitals, and is an institution of higher learning (Nurse Practice Act, 2024, section 2786, pgs. 47-48).

The COS Registered Nursing Program exceeds the minimum requirements specified by the CA BRN.

** Repository Item**: Catalogs, Handbooks and Manuals: California Nursing Practice Act

The **California Community Colleges Chancellors Office (CCCCO)** information for Nursing and Allied Health can be located at the following link:

https://www.cccco.edu/About-Us/Chancellors-Office/Divisions/Workforce-and-Economic-Development/Nursing-and-Allied-Health

The CCCCO states that "The California colleges Nursing and Allied Health programs provide instruction leading to certificate, associate degrees, and transfers to four-year institutions. Our goals are to:

- Improve the employability of newly graduated nurses and allied health professionals to function as safe and effective patient care practitioners
- Promote and support statewide efforts to increase the pipeline of baccalaureate-prepared nursing and allied health professionals
- Support colleges to deliver health care workforce training programs to meet the future demands of a growing, aging, and diverse population".

All options of the COS RN program follow the policies and regulations set forth by the GO and regulatory agencies as identified in Table 4.6d Governing Organization and Regulatory Agencies Policies for Length and Curriculum for ADN Nursing Programs.

Table 4.6b
Governing Organization and Regulatory Agencies Polices for Length and Curriculum for ADN Nursing Program

College of the Sequoias:	California Board of Registered Nursing:	California Community College Chancellor's Office:	ACCJC:
To attain an associate's degree, College of the Sequoias requires students to complete the general education requirements and have a minimum of 60 units of college level courses numbered 1-299, at least 12 of which must be taken in residence at College of the Sequoias, with a "C" (2.0) average. These 60 units include general education, major, and elective courses. https://catalog.cos.edu/associate-degree-requirements/	Requires that approved nursing programs provide the course of instruction that is approved by the board, covering not fewer than two academic years, is affiliated with one or more hospitals, and is an institution of higher learning. Nursing curriculum is to have 18 semester units in lecture and 18 semester units clinical. The BRN also requires that theory and clinical practice shall be concurrent. Nursing courses and prerequisites must include the minimum pre-licensure nursing content that is not less than 58 semester units for the generic Associate in Nursing degree program. Graduation requirements also include one hour of direct participation in an implicit bias training as outlined in section 2786 (f)1 (California Nurse Practice Act, section 2786, 2024 ed. Pgs. 47-49; section 1426 pgs. 106-107) https://casetext.com/regulation/california-code-of-regulations.title-16-professional-and-vocational-regulations.division-14-board-of-registered-nursing.article-3-prelicensure-nursing-programs.section-1426-required-curriculum	Associate degree for students requires a minimum of: 18 semester units in a major or area of emphasis, at least 18 semester units of GE, and at least a total of 60 semester units (CCCCO Program and Course Approval Handbook 8th Edition, pg. 78) https://www.cccco.edu/-/media/CCCCO-Website/docs/guidance-instruction/program-course-approval-handbook-8th-edition.pdf	Minimum program length of 60 semester credit hours or 90 quarter credit hours awarded for achievement of student learning for an associate degree. (ACCJC Policy on Credit Hour, Clock Hour, and Academic Year, page 27.) **https://accjc.org/wp-content/uploads/Compendium-of-Institutional-and-Operational-Policies.pdf**

Standard 4, Criteria 4.7

Emphasizing the role of the nurse at the educational level for which students are being prepared, the curriculum incorporates contemporary concepts in all learning environments, including but not limited to:

   a. *Diversity, equity, inclusion, and/or social determinants of health;*
   b. *Evidence-based practice, research, and scholarship;*
   c. *Information literacy;*
   d. *Interprofessional collaboration and delegation; and*

e. Professional identify and scope of practice

The Concept-Based Curriculum (CBC) as implemented by the nursing program faculty benefit the students of COS by preparing them for the role of the registered nurse as attained through accomplishment of an associate's degree in nursing. The CBC emphasizes interactive student engagement in the content and while students are interactively engaging and sharing perspectives they are also incorporating learning that includes diversity, equity, and inclusion (DEI). The curriculum uses evidence-based practice (EBPs), information literacy, ability to participate in interprofessional collaboration and delegation, and understanding of professional identity and scope of practice. Not only do these aspects of the curriculum align with the nursing program philosophy and the COS mission statement, but they are integrated into the End-of-Program Student Learning Outcomes (SLOs) for the nursing program.

- Students are able to provide nursing care for diverse populations.
    - In theory classes students learn about patients who come from a multitude of cultural, ethnic, socioeconomic, and mental health backgrounds. The content in the Concept-based curriculum (CBC) covers multiple populations to consider for each concept/exemplar taught, and the case studies also explore many different patient populations.
    - In the skills lab and in simulation, the mannequins and patient scenarios are also reflective of a very diverse patient population that successfully addresses DEI and social determinants of health.
    - Our clinical sites are based in Tulare and Kings Counties in CA, with a predominantly White and Hispanic population, and 18.5% poverty rate which is higher than the national average of 12.5% (2023) https://datausa.io/profile/geo/tulare-county-ca .
    - Students are also required to complete implicit bias training, in order to be compliant with California's Assembly Bill 1407, which mandates all new nurses must complete one hour of direct participation in an implicit bias course. This implicit bias training is provided by COS as an approved course for students to complete prior to graduation.
    - The nursing program curriculum student learning outcomes emphasize DEI: SLO #1 states: Provide safe, quality, compassionate, evidence-based, patient-centered nursing care to diverse patients across the lifespan in a variety of healthcare settings.
- Students are taught the importance of implementing EBP for their patients, as well as utilizing correct research skills to maintain currency in nursing skills.
    - In theory, students use textbooks that are current (with publications being within the past 5 years) as well as refer to articles or videos that display the latest EBPs as pertinent to their coursework.
    - In the clinical setting, students observe nursing staff that also use EBP as changes are happening on a daily basis within the acute patient care setting. They are

exposed to the latest policy changes/guidelines, and faculty are also maintaining currency in nursing skills that are aligned with best EBPs.

- SLO#1 Provide safe, quality, compassionate, evidence-based, patient-centered nursing care to diverse patients across the lifespan in a variety of healthcare settings.

- Students participate in research projects, such as quality improvement, to practice and understand information literacy.
    - As previously stated, students are taught how to perform research based on reputable and quality sources to best improve their nursing practices to ultimate enhance patient care and patient outcomes. In this associate's degree program, there are instances where using American Psychological Association (APA) format is required and therefore students must utilize professional writing techniques to adhere to information literacy.
    - Examples of reliable resources to utilize for research include Lippincott (which is also available in the clinical setting), the library at COS as well as the medical libraries available at certain clinical sites, and the textbooks as part of the CBC that are current and published within the last five years.
    - SLO #3states: Participate in quality improvement processes to improve patient care outcomes.
    - Student assignments include completing research on various topics in the library and writing papers. (example: NURS 135 students are asked to identify a nursing/practice that has changed in obstetrics over the years and must identify at least three scholarly articles from the library that show the research for the change in practice (evidence-based practice change).

- Students learn what interprofessional collaboration is in the healthcare setting and also appropriate styles of delegation as they prepare to become a new graduate RN. Collaboration is a concept addressed many times within the CBC, and students are able to participate firsthand in theory with group activities as well as in the clinical setting with healthcare professionals and their patients.
    - In theory, the concept of collaboration is a common theme applicable to many aspects of the patient's care, regardless of medical diagnosis or plan of care. Students become exposed to the idea that patients rely on many healthcare professionals working seamlessly together for the benefit of the patient. Students are also taught what skills/tasks are appropriate to delegate to certain personnel, in regard to their respective scope of practices.
    - Additionally, students participate in active learning and are often assigned group work that must be completed among their peers. Certain activities include working on case studies, creating presentations for the class, and creating concept maps.
    - In simulation, collaboration is integral to each given simulation as students are assigned to be in groups of three to four. Each student is designated a certain role and collaborate with one another in order to be successful with each given scenario.

- In the clinical setting, students collaborate with other healthcare professionals and their patients on a daily basis. Delegation between RNs, certified nursing assistants (CNAs), licensed vocational nurses (LVNs), and other staff is observed, especially as team nursing has become more prevalent in the main clinical site (Kaweah Health). Furthermore, students are able to observe other new graduate RNs and see what they are successfully able to delegate in these patient care settings.
- SLO #4 states: Participate in teamwork and collaboration with all members of the healthcare team including the patient.

- Students are taught extensively about the American Nurses Association's (ANA) scope of practice and code of ethics in regard to the professional identity of a new graduate RN.
  - Education regarding the RN's professional identity and scope of practice is taught starting in the first semester of the nursing program and is integrated throughout the CBC.
  - In the clinical setting, students are expected to adhere to these guidelines in order to pass their clinical rotations and meet with SLOs. Anything that is done out of the student's scope of practice or in conflict of the professional identify of the nurse is grounds for failure.
  - SLO #5 states: Use leadership, management, legal, and ethical principles to guide practice as a Registered Nurse.

Repository Items: Catalogs, Handbooks and Manuals: Policy and Procedure Manual, Policies: A-01 Registered Nursing Program Philosophy, A-03 Conceptual Framework, Course Syllabi. Standard 4, Criteria 4.7 Examples of Assignments and Student Work demonstrating DEI, EBP, Information Literacy.

ACEN Standard 4 Criterion 4.8

As applicable, **skills and/or simulation laboratory learning environments and experiences**:

a.   Reflect **evidence-based nursing practice**;

Nursing Simulation Lab: NURS 175 (Transition to Registered Nurse Practice) is an advanced, comprehensive course that provides a synthesis of all concepts and nursing content taught throughout the program with application in the simulation lab. This course enables the individual student to recognize areas that need enhancement prior to entering Registered Nursing practice and includes a review for the NCLEX-RN and strategies for success. During the 6-week rotation of N175, learners participate in multiple different simulations that have been created by the Simulation Coordinator and N175 instructors, and integrated into the curriculum. Scenarios have been created to reflect current evidence-based nursing practice standards, and are based on information from the program's required textbook (Pearson) which

has remained current (less than 5 years old), as well as other respected sources (i.e. Cancer.gov, The Joint Commission's National Patient Safety Goals, & American Heart Association). **See Table 4.8a**

**Repository Item: Standard 4, Criteria 4.8: Table 4.8a Simulation and Lab Evidence-Based Practice

SL-4: Policy and Procedure: Simulation Process (Highlights below)

Simulation-based experience (Design)

- Simulation-based experiences are purposefully designed to meet identified objectives and optimize the achievement of expected outcomes.
- Each of the criterion below includes a list of required elements. Please reference the Healthcare Simulation Standards of Best Practice: Design for such details.

Criteria Necessary to Meet this Standard

Simulation-based experiences (SBE) should be designed in consultation with content experts and simulationist's knowledgeable in best practices in simulation education, pedagogy, and practice.

- The use of an evidence-based scenario template should be considered (I.e. California Simulation Alliance Template [Appendix B]).

Debriefing Process

All simulation-based educational (SBE) activities must include a planned debriefing process. This debriefing process may include any of the activities of feedback, debriefing, and/or guided reflection. This facilitated process is accomplished using multiple techniques and must be based on theoretical frameworks and/or evidence-based concepts.

Criteria Necessary to Meet this Standard

The debriefing process is:

1. Planned and structured in a purposeful way based on theoretical frameworks and/or evidenced-based concepts

** See repository item: Standard 4, Criteria 4.8 Simulation Policy and Procedure Manual: SL-4 Policy and Procedure Simulation Processes.

Nursing Skills Lab

The nursing program has a well-equipped, designated skills lab. There is a variety of low fidelity and high-fidelity mannequins available, and all other types of medical supplies and equipment for student use

and competency development. Faculty and students use the skills lab to teach, practice, and obtain competency in required clinical skills. Each course has designated skill sets associated with clinical/course objectives and competencies. The skills lab is maintained by the skills lab instructor. All equipment and supplies are maintained by the skills lab instructor and faculty using it. A skills lab instructor is available to students Mondays through Thursdays 12:00-4:00 during open skills lab hours. During this time students are welcome to sign into skills lab and use the equipment or practice skills with the assistance of the skills lab instructor. Students may also be referred to skills lab for practice of certain skills by their clinical instructor/faculty and require oversight and sign off of the skill by the skills lab instructor indicating competency attainment. The skills lab instructor is a licensed RN.

b. Include healthcare technology; and

The Simulation Lab is stocked with multiple high-fidelity Laerdal mannequins that are operated with either a laptop or SimPad using the LLEAP software, and includes a wall mounted patient monitor that allows for cardiac monitoring, vital signs, hemodynamic monitoring, CO_2 monitoring, etc. Most simulations used in N175 also include a workstation on wheels (WOW), which consists of a flat screen computer on a rolling stand, internet access for medication or other research, an Electronic Medical Records (EMR) program which allows students to review the chart and to document care, and the ability to screen mirror the WOW onto the large flat screen monitor on the wall over the patients head of bed for all learners to view. Some simulations include viewing X-ray images, which are brought up via the WOW. The simulation lab also has the ability to video record each simulation to allow for a video playback during debrief or for other training purposes. Pre-learning assignments and other assignments are accessed and submitted through our Learning Management System (Canvas). Simulations include a pseudo iPhone to allow learners to communicate with other members of the interdisciplinary team. We currently do not have access to an electronic medication dispensary cart, so a pseudo electronic med cart is utilized and learners are encouraged to suspend disbelief while accessing their medications. CPR simulation incorporates CPR feedback which allows students to see their CPR effectiveness in real time and allows for adjustments as needed. A defibrillator/Transcutaneous pacemaker is also utilized during Code Blue simulations.

The Nursing Skills Lab

The nursing skills lab utilizes many healthcare technologies including automatic vital sign machines, Alaris IV pumps for the adult and a pediatric IV pump, Feeding pumps, Purewick urinary system, patient-controlled analgesia, sequential compression devices, bladder scanner, suction devices and a computer/smart cart.

c. Meet **regulatory agencies** requirements for skills laboratory and/or simulation, as applicable.

The Nursing Simulation Lab was created with the new Concept-Based Curriculum that was initiated in Fall 2020. The main focus of creating the Simulation Lab was to facilitate student learning during their 4th semester course (N175), as well as support other courses wishing to utilize simulation. Job descriptions for the Simulation Coordinator (Educator) and Simulation Tech were created and the positions were filled.

**See repository items: Catalogs, Handbooks, and Manuals: Policy and Procedure Manual, Policies A-26 Nursing Simulation Faculty Job Description and A-27 Nursing Simulation Technician Job Description.

A Simulation Committee was formed and is scheduled to meet monthly throughout the semesters. Simulation Lab Policies and Procedures were created and are updated via the Simulation Committee.

**See repository item Standard 4, Criteria 4.8 Simulation Policy and Procedure Manual.

"All simulation-based learning in the COS Nursing Simulation Lab shall utilize standards published by the International Nursing Association for Clinical Simulation and Learning (INACSL), Association of Standardized Patient Educators (ASPE), and standards approved by the California Board of Registered Nursing"

** See repository item Standard 4, Criteria 4.8 Simulation Policy and Procedure Manual, Policy SL-1: Policy and Procedure Introduction

The Nursing Skills Lab

The CABRN does not provide guidelines for the skills lab or its use by students. Students are highly encouraged to make use of the skills lab during open hours to practice learned skills and maintain their competencies; however, there are no guidelines from the CABRN regarding the number of hours that must be spent in skills lab nor does it outline any specific requirements regarding the presence of a skills lab, the equipment that must be within the skills lab etc.

d. Reflect the educational level at which students are being prepared to facilitate the achievement of the **course student learning outcomes and end-of-program student learning outcomes**.

Nursing Simulation Lab: All Simulations for N175 are created in order for the student to meet their Course Learning Outcomes/Competencies (1-6) for N175. Each week, the student is to formatively journal/document achievement of each course outcome/competency. Achievement of these Course Learning Outcomes will aid the student in meeting their Program Learning Outcomes.

** See repository item Standard 4 Criteria 4.8: 4th semester NURS 175, Example of student journal

Some instructors of other nursing courses have utilized the Simulation Lab to supplement clinical hours. In these instances, the simulations were created collaboratively with the course instructor and Simulation Lab Coordinator and integrated into the curriculum. The appropriate Course Learning Outcomes/competencies were utilized in creating each Simulation and pre-brief/debrief sessions. Formative evaluation is utilized which focuses on achievement of Course Learning Outcomes/Competencies).

The Simulation Committee created a Policy & Procedure Manual for the Simulation Lab Program. Below are some highlights from these policies:

SL-3: Policy & Procedure: Expectations (Highlights below)

Curriculum Integration

All simulation-based experiences are purposefully designed, facilitated and linked to course and program outcomes.

**See repository item Standard 4 Criteria 4.8: Simulation Policy and Procedure Manual, Policy SL-3 Policy and Procedure Expectations

SL-4: Policy & Procedure: Simulation Process (Highlights below)

Simulation Process The simulation process includes Pre-brief, Design, Facilitation, Debrief, & Evaluation.

** See repository item: Standard 4 Criteria 4.8: Simulation Policy and Procedure Manual, Policy SL-4 Policy & Procedure Simulation Process

Pre-brief:

General Criterion 2**:** Prebriefing should be developed according to the purpose and learning objectives of the simulation-based experience.

General Criterion 3**:** The experience and knowledge level of the simulation learner should be considered when planning the prebriefing.

Preparation: Criterion 4: Based on needs assessment and purpose of the experience, preparation materials are developed to assure that learners are prepared for the experience and can meet the scenario objectives.

Preparation: Criterion 5: Preparation materials should be developed according to the purpose and learning objectives of the simulation-based experience.

Design:

- Simulation-based experiences are purposefully designed to meet identified objectives and optimize the achievement of expected outcomes.
- Simulation-based experiences (SBE) should be designed in consultation with content experts and simulationists knowledgeable in best practices in simulation education, pedagogy, and practice.
- Perform a needs assessment to provide the foundational evidence of the need for a well-designed simulation-based experience.
- Construct measurable objectives that build upon the learner's foundational knowledge.
- Build the simulation-based experience to align the modality with the objectives.

Simulation-based experience (Facilitation)

Facilitation methods are varied and use of a specific method is dependent on the learning needs of the learner and the expected outcomes. Facilitation provides the structure and process to guide participants to work cohesively, to comprehend learning objectives and develop a plan to achieve desired outcomes.

A facilitator is the educator that assumes responsibility and oversight for managing the entire simulation-based experience.

1. The facilitative approach is appropriate to the level of learning, experience, and competency of the participants.

2. Facilitation after and beyond the simulation-based experience aims to support participants in achieving expected outcomes.

Debriefing Process

All simulation-based educational (SBE) activities must include a planned debriefing process. This debriefing process may include any of the activities of feedback, debriefing, and/or guided reflection. This facilitated process is accomplished using multiple techniques and must be based on theoretical frameworks and/or evidence-based concepts. The debriefing process needs to be adaptable to all simulation-based modalities. In this standard, the term ``process'' refers to feedback, debriefing, and/or guided reflection except when indicated.

The process aims to identify and resolve gaps in knowledge, skills, attitudes, and communication related to the individual, team, and/or system. The goal of the debriefing process is to assist in the development of insights, and promote the transfer and integration of learning to practice. Although the planned session for implementing the debriefing process should not be an additional lecture opportunity, much learning occurs during this time.

The debriefing process is:

- Planned and incorporated into the simulation-based experience in an appropriate manner in order to guide the learner(s) in achieving the desired learning or evaluation outcomes.

Evaluation (Participant)

Simulation-based experiences (SBE) may include evaluation of the learner.

Learner evaluation is:

- directed by the objectives, outcome and/or the level of the learner.

- guided by the type: formative, summative, or high- stakes evaluation.

Criterion 2: SBEs may be selected for formative evaluation.

Required Elements:

Formative evaluation is conducted with the purpose of:

- facilitating teaching and learning.
- identifying and closing gaps in knowledge, skills, and attitudes.
- monitoring progress toward achieving outcomes.
- developing learner's clinical competencies.
- providing ongoing formative feedback.
- assessing readiness for entry to the clinical setting.

Nursing Skills Lab

Faculty and students use the nursing skills lab to complete required skills teaching and demonstrations at each level of the program. The skills lab instructor is available during open skills lab hours to facilitate learning and practice which is supervised and approved by the skills lab instructor.

** See Repository Item: Standard 4, Criteria 4.8 Table 4.8b Simulation and Skills Lab Hours and Evidence

** See Repository Items: Catalog, Handbooks and Manuals: Policy and Procedure Manual, Policies: A-26 Nursing Simulation Faculty Job Description, A-27 Nursing Simulation Technician Job Description and Standard 4; Criteria 4.8 Simulation Policies and Procedure Manual: Policies SL-1 through SL-7 which constitutes the Simulation Lab Policy and Procedure Manual.

Standard 4, Criteria 4.9: Clinical/practicum learning environments and experiences:

   a. *Have current written agreements that specify expectations for all parties for the protection of the student;*
   b. *Reflect evidence-based nursing practice; and*
   c. *Meet regulatory agencies requirements for clinical/practicum learning environments, as applicable*
   d. *Reflect the educational level at which students are being prepared to facilitate the achievement of the course student learning outcomes and end-of-program student learning outcomes.*

The program follows standards for direct patient care, skills attainment, simulation, and clinical judgment instruction found in current research journals, as identified by content experts, in Curriculum Committee discussion, and through collaboration with local hospitals. The types of direct, hands-on clinical/practicum experiences with patients are determined by faculty to support the student's achievement of the course student learning outcomes and competencies. Some of the types of direct care include providing nursing care for one or multiple patients in the clinical setting. Examples of direct care provided by the students could include taking a patient history, completing a head-to-toe or focused assessment, medication administration, treatments, procedures, and patient/family teaching. The direct care provided by the student is dependent on the patient population the student is working with and the student learning outcomes and competencies which are leveled according to semester.

For example, Interprofessional teamwork and collaboration are addressed in all courses of the program starting with N123 & N124 by introducing the concepts of communication and collaboration along with SBAR communication and the collaborative relationship between nursing and other health care professions. The importance of interprofessional collaboration is addressed in all courses of the program culminating with N174, Concepts of Adult Health Nursing 4 and N175, Transition to Registered Nurse Practice, which emphasize the importance of participating effectively in teamwork and collaboration and determining the effect of teamwork and collaboration on the interdisciplinary team as well as positive patient outcomes. The importance of family and patient social networks is addressed in

the planning of care, patient teaching, goal attainment, and discharge planning in each course of the program.

Nursing Course Descriptions

Semester 1 Nursing

Nursing 121: Fundamentals for Nursing

This course focuses on fundamental concepts necessary for safe, compassionate, patient-centered nursing care for a diverse patient population with well-defined healthcare concerns with a focus on elderly patients. The course offers an introduction to foundational concepts related to professional practice such as the legal and ethical responsibilities of the Registered Nurse. The student also uses clinical judgment applied to nursing practice. Select nursing skills are taught in the skills laboratory; theory and skills are applied in various clinical settings.

Nursing 123: Critical Thinking/Clinical Judgment in Nursing

This course introduces clinical judgment through a focused study of critical thinking skills and strategies used by the Registered Nurse. The student applies critical thinking skills and strategies at the RN level that underscore the clinical judgment represented in the nursing process as well as dealing with aspects of the healthcare system for safe practice in the current healthcare environment. The major purpose of the course is to teach students the clinical judgment needed to predict and manage potential complications and to decrease the failure to rescue rate which results in improved patient outcomes. This course provides the foundation for the thinking processes applied throughout all nursing courses.

Nursing 124: Concepts of Adult Health Nursing 1

This course is a continuation of Nursing 121: Fundamentals for nursing, presenting additional fundamental concepts necessary for safe, compassionate, patient-centered nursing care for a diverse patient population with well-defined healthcare concerns with a focus on elderly patients. The course continues as an introduction to foundational concepts related to professional practice such as legal and ethical responsibilities of the Registered Nurse. The student also uses clinical judgment applied to nursing practice. Select nursing skills are taught in the skills laboratory; theory and skills are applied in various clinical settings.

Semester 2

Nursing 133: Concepts of Mental Health & Psychiatric Nursing

This course builds on and applies concepts of nursing practice to the care of patients with various mental health needs, their families, and other support persons. Application of new and previously learned nursing concepts, patient care skills, and clinical judgment occurs in a variety of clinical settings.

Nursing 134: Concepts of Adult Health Nursing 2

This course builds on and applies the concepts of nursing practice from semester 1 to the acquisition and application of adult health nursing theory in the care of diverse adult patients with acute and chronic conditions, their families, and other support persons. Application of knowledge, patient care skills, and clinical judgment occurs in a variety of clinical settings which may include experiences in the simulation lab.

Nursing 135: Concepts of Nursing Care of the Pregnant Family and the Neonate

This course builds on and applies concepts of nursing practice to the care of the pregnant family and the neonate. Application of new and previously learned nursing concepts, patient care skills, and clinical judgment occurs in a variety of clinical settings.

Semester 3

Nursing 143: Concepts of Pediatric Nursing

This course continues to build on and expand all previously learned concepts of nursing practice with application to the care of children, their families, and other support persons. Application of new and previously learned nursing concepts, patient care skills, and clinical judgment occurs in a variety of clinical settings.

Nursing 144: Concepts of Adult Health Nursing 3

This course continues to build on and expand all previously learned concepts of nursing practice with application to the care of adult patients with complicated conditions, their families, and other support persons. Application of new and previously learned nursing concepts, patient care skills, and clinical judgment occurs in a variety of clinical settings.

Semester 4

Nursing 174: Concepts of Adult Health Nursing 4

This culminating course expands the concepts of nursing practice for the acquisition and application of care of adult patients with complex healthcare needs, their families, and other support persons. Application of knowledge, patient care skills, and clinical judgment occurs in a variety of clinical settings which may include experiences in the simulation lab.

Nursing 175: Transition to Registered Nursing Practice

This advanced, comprehensive course provides a synthesis of all concepts and nursing content taught throughout the program with application in the simulation lab. This course enables the individual student to recognize areas that need enhancement prior to entering Registered Nursing practice and includes a review for the NCLEX-RN® and strategies for success.

Clinical practice learning environments are chosen based on the site ability to accommodate students and ensure appropriate learning experiences for each level of the program. Students in first semester attend clinicals in accredited community hospitals and spend time in oncology units with end-of-life treatment, a renal unit, and a medical surgical unit where patients have fewer complex needs (chest pain, wound care, neuro patients, feeding tubes).

Students in second semester take two specialty courses (mental health and obstetrics) and attend clinical sites offering services in those fields. The other course in second semester is focused on level 2 adult health nursing and they attend clinical in the orthopedic unit which specializes in care of traumatic and elective ortho injuries including surgical and non-surgical treatment, post stroke/TIA management, neurological disorders (seizures, acute confusion, and hydrocephalus, neck and spinal surgeries and other patient care.

In third semester students attend clinical sites that include pediatrics and level 3 adult nursing care. Clinical experiences and skills are advancing so placements take this into consideration which allows students to meet their learning objectives. The third semester medical surgical clinical rotations have experiences in medical surgical units that specialize in cardiac diseases and services, and general and traumatic surgical patient care. The patients require more complex care than the patients in first semester. Students also attend a clinical rotation in the pediatric unit and NICU.

In fourth semester students' skills and experiences are again levelled up and students will attend clinical in critical care units, and the cardiac catheterization lab.

All clinical site placements are in accredited facilities assuring that evidence-based practice is standard and used in practice.

See Repository item: Standard 4 Criteria 4.9 **Table 4.9 Practice Learning Environments

The College of the Sequoias Nursing Program has written affiliation agreements with all clinical/practicum practice agencies currently in use. These agreements are kept current and renewed as needed. All agreements state that the facility will accept College of the Sequoias ADN students for their

clinical experiences and the program will accept responsibility for the curriculum and student assignment. Protection of the students is ensured by the inclusion of the following items:

- Title IX of the Education Amendments of 1972
- The Americans with Disabilities Act of 1990
- Title VI of the Civil Rights Act of1964
- Process for assuring completion of background verification, communicable disease screening, certifications, and training of all students
- Compliance with privacy regulations found in HIPAA (Health Portability and Accountability Act)

** See Repository Items: Standard 4 Criteria 4.9 Clinical Facilities and Expiration Dates, Standard 4 Criteria 4.9 Standard Student Affiliation Agreement 2020-2025, Standard 4 Criteria 4.9 Affiliation Agreement for Students Without Instructors on site, Standard 4 Criteria 4.9 Affiliation Agreement Crosswalk

At the end of each academic year faculty and adjunct faculty clinical instructors complete Clinical Facility Evaluations. See historical clinical site evaluations for last 3 years in the repository.

** Repository Item: Standard 4, Criteria 4.9: Clinical Site Evaluations

Student clinical site evaluation, and clinical instructor evaluation occurs at the end of each course. Students are asked to complete a course evaluation that includes an evaluation of their clinical experience, their instructor and the site.

**Repository Item: Standard 1, Criteria 1.3: Course Evaluations

An affiliation agreement crosswalk is maintained which outlines the CABRN clinical requirements and where in each affiliation agreement the information can be located.

**See repository items: Standard 4, Criteria 4.9 Affiliation Agreement Crosswalk; Criteria 4.9 Clinical Facility Affiliation Agreements with Expiry Dates
*All affiliation agreements will be available to review during the accreditation visit.
Figure 4.9a and 4.9b represent the total number of clinical units and hours required by the COS RN Program which exceeds the minimum requirements as outlined by the CA BRN.

Figure 4.9a Clinical Hours for Traditional RN Program

Course and Program Option	Number of clinical hours (50 min. hours)
NURS 121 Fundamentals for Nursing	3-unit X 3hrs./unit/wk. X 17.5 weeks = 157.5 hours

NURS 124 Concepts of Adult Health Nursing 1	1.5-unit X 3Hrs./unit/wk. X 17.5 wk. = 78.75 hrs.
NURS 133 Concepts of Mental Health & Psychiatric	1.5-unit X 3Hrs./unit/wk. X 17.5 wk. = 78.75 hrs.
NURS 134 Concepts of Adult Health Nursing 2	2 units X 3 Hrs./unit/wk. X17.5 Wk. =105 hrs.
NURS 135 Concepts of Care of the Pregnant Family…	1.5-unit X 3Hrs./unit/wk. X 17.5 wk. = 78.75 hrs.
NURS 143 Concepts of Pediatric Care	1.5-unit X 3Hrs./unit/wk. X 17.5 wk. = 78.75 hrs.
NURS 144 Concepts of Adult Health Nursing 3	3-unit X 3 Hrs./unit/wk. X 17.5 weeks = 157.5 hrs.
NURS 174 Concepts of Adult Health Nursing 4	4 units X 3 Hrs./unit/wk. X 17.5 Wk. = 210 hrs.
NURS 175 NURS 175 Transition to Registered Nursing	2 units X 3 Hrs./unit/wk. X17.5 Wk. =105 hrs.
Total Clinical Units and Hours	20 units = 1050hrs

Figure 4.9 b Clinical Hours for LVN-RN Advanced Placement Option

Course and Program Option	Number of clinical hours (50 min. hours)
NURS 133 Concepts of Mental Health & Psychiatric	1.5-unit X 3Hrs./unit/wk. X 17.5 wk. = 78.75 hrs.
NURS 134 Concepts of Adult Health Nursing 2	2 units X 3 Hrs./unit/wk. X17.5 Wk. =105 hrs.
NURS 144 Concepts of Adult Health Nursing 3	3-unit X 3 Hrs./unit/wk. X 17.5 weeks = 157.5 hrs.
NURS 174 Concepts of Adult Health Nursing 4	4 units X 3 Hrs./unit/wk. X 17.5 Wk. = 210 hrs.
NURS 175 NURS 175 Transition to Registered Nursing	2 units X 3 Hrs./unit/wk. X17.5 Wk. =105 hrs.
Total Clinical Units and Hours	12.5 units = 656.25 hrs.

Regulatory Bodies

The CA BRN California Nursing Practice Act, 2024, Section 2786(2), pg.48 outlines requirements for clinical hours. Nursing programs must meet a minimum of 500 direct patient care clinical hours in a board-approved clinical setting with a minimum of 30 hours of supervised direct patient care clinical hours dedicated to each nursing area specified by the board (geriatrics, medical-surgical, mental health/psychiatric nursing, obstetrics, and pediatrics). Additional clinical hours required by the program for nursing education preparation in each nursing area as specified by the board shall be identified and documented in the curriculum plan for each area. Title 16 California Board of Registered Nursing Department of Consumer Affairs, 2023, in the initial statement of reasons document states that clinical practice hours can be provided in different lab settings such as a simulation lab, skills lab, and computer lab or through direct patient care.

Standard 4, Criteria 4.10

Formative and Summative student evaluation methods:

    a. *Are utilized throughout the curriculum in all learning environments*
    b. *Are varied and appropriate for all methods of delivery; and*
    c. *Align with the progression of course student learning outcomes*

The College of the Sequoias uses many different formative and summative evaluation methods to evaluate student performance throughout the program in all settings. Assessment methods should help the instructor answer the questions "How do I know the required learning has taken place? What might I need to modify about the course to best support student learning?" Assessment of learning can be direct or indirect measures. Some examples of formative assessment used by faculty in the COS Nursing program include use of adaptive quizzing, role play, and online gaming platforms like Kahoot and AhaSlides, Just in Time Teaching, active discussions, debates, student reflection assignments, and use of Socratic questioning to engage students in discussion allowing us to evaluate understanding and competency. Many faculty use unfolding case studies as homework assignments, clinical assignments, or review in the classroom in group assignments. Group work participation is awarded credit for work completed in class demonstrating application of learned concepts. Many faculty use Pearson's MyLab and Mastering and assign NextGen case scenarios and modules which are graded and analyzed. The formative and summative assessments help reveal what students are learning during the course and often help the faculty address what the next step should be in teaching and learning. The assessments used are intentional and systematic and provide insight into student learning, and understanding of taught content.

In the clinical setting skills performance is directly observed and evaluated and post conference discussions are used to elicit information about patient conditions and application of learned content in the clinical setting. If skills performance is less than ideal then the student will be referred to the skills lab to demonstrate competency and be signed off by the skills lab instructor prior to being able to perform that particular skill in the clinical setting. Students are responsible for remaining competent once a skill has been signed off in their blue skills check off booklet which is a document which outlines competencies attained at each level of the program. Students are instructed to carry this document with them to clinical at all times.

Summative evaluation methods in the nursing program includes quizzing, midterm exams and final exams, projects, and end of course/clinical assignments, journals and care plans. A

midterm/midsemester grade is evaluated and if necessary a midterm warning letter is sent to students which identifies where improvement is required to pass the course.

Some indirect measures of student learning might include course evaluations, student surveys, clinical evaluation meetings with feedback, NCLEX results and employment placement rates.

For a full understanding of the evaluation methods used across the curriculum please view Table 4.3 in the repository.

** **Repository Item:** Standard 4, Criteria 4.3: Table 4.3 Teaching and Instructional Methods and Evaluation; Standard 4, Criteria 4.3 Examples of Assignments and Student Work

The entire didactic portion of the nursing program (both traditional RN and LVN-RN advanced placement) is offered face-to-face on one campus (Visalia campus). The clinical component of the program is offered at several community hospitals (Kaweah Health, Adventist Hospitals in Hanford, Reedley, and Tulare). Most clinical rotations have 10 students and an instructor.

As outlined in Table 4.3 the variety of evaluative methods used represent current evaluation methodologies, technology, and Socratic questioning etc. These are appropriate methods for an in-person lecture.

Program testing policies are reviewed regularly and updated as needed to maintain currency. The testing blueprint used by the COS nursing program outlines where questions address nursing process, NCLEX Client Needs, NLNAC Competencies, QSEN competencies, Blooms Taxonomy and the Clinical Judgement Measurement Model. Each test shall contain questions which are representative of alternate test item formats as determined by the instructor (fill-in-the-blank, Chart exhibit, diagrammatic etc.). Policy A-28: Testing Guidelines outlines testing procedure and review processes. The policy states that test questions shall be representative of the leveled course objectives and curriculum outcomes. Each question is to be written at a critical thinking level using Bloom's Taxonomy (application, analysis, evaluation and creation).

Repository Item: Catalogs, Handbooks and Manuals: Policy and Procedure Manual, Policy A28: Testing Guidelines.

The following is a summary of formative and summative learning methods used in all learning environments:

Table 4.10 Formative and Summative Evaluation Methods

Learning Environment	Methods of Formative Evaluation	Methods of Summative Evaluation
Theory	- Quizzes - Midterms - Group presentations - Observation during in-lecture activities - Kahoot - Pre-lecture assignments, - Homework assignments, - In-class participation (discussion, group work), - Case studies - Study Modules - Standardized testing - AhaSlides - Active discussions, debates - Student teacher - Concept mapping/Tanners Model Care Plans	- Final exams - Final paper - Student Evaluation Record - Standardized Testing - Quizzes - Medical Math Test
Clinical	- Observation of student performance and skill performance - Daily discussion between clinical instructor and student regarding clinical performance - Socratic questioning - Written clinical assignments. - Care plan - Concept maps - Simulations - Virtual simulation, - Study modules - Mid-rotation self-evaluation - Participation in post-conference - Oral presentations - Debrief sessions	- Final Presentations - Research paper - Student Evaluation Record - Demonstration of clinical skills - Math test - Care Plan
Simulation Lab	- Post Simulation Reflective journal assignments - Pre-learning assignments - Observation of student performance during simulation experiences - Participation in debrief	- Student Evaluation Record - Post Simulation Reflective journal assignments
Skills Lab	- Skills demonstration - Skill remediation	Skills checkoff demonstrating competency

A more detailed explanation of evaluations methods and how they meet course student learning outcomes can be viewed in the repository Standard 4, Table 4.3.

Student learning outcomes measurement and documentation for all faculty at COS is implemented in the outcomes and assessment platform known as Nuventive Improve. Nursing faculty have agreed to complete outcomes assessment on the spring semester of each academic year by fall

(Dialogue Day) of the following academic year. This allows time for collection of all needed data for outcomes analysis and decisions to be made about improvements needed. The division chair completes the program learning outcomes assessment and program review. A copy of these reports will be available in the repository.

**Repository Item: Standard 4, Criteria 4.10 Course Assessment Reports for Spring 2024

Standard 5 Outcomes: Written Systematic Plan of Evaluation

Standard 5, Criteria 5.1

The systematic plan for evaluation describes the process for regular summative nursing program level assessment of student learning outcome achievement. The faculty will:

    a. *Use a variety of appropriate direct outcome assessment methods to ensure comprehensive summative assessment for each end-of-program student learning outcome;*

    b. *Establish a specific, measurable expected level of achievement outcome statement for each summative assessment method;*

    c. *Collect aggregate assessments data at regular intervals to ensure sufficiency of data to inform decision-making and disaggregate the data to promote meaningful analysis; provide justification for data that are not disaggregated;*

    d. *Analyze assessment data at regular intervals and when necessary, implement actions based on the analysis to maintain and/or improve end-of-program student learning outcome achievement*

    e. *Maintain documentation for the three most recent years of the assessment data, the analysis of data, and the use of data analysis in program decision-making to maintain and/or improve students' end-of-program student learning outcome achievement; and*

    f. *Share the analysis of the end-of-program student learning outcomes data with communities of interest*

The College of the Sequoias Nursing Program utilizes many varied and appropriate direct outcome assessment methods. The CA BRN requires nursing programs to complete a self-study and program evaluation every 5 years; however, the nursing program engages in evaluation processes annually and as needed. Faculty are required to enter assessment and outcome data for individual courses into our college online outcomes and assessment data network called "Nuventive/Improve". Faculty must address all course and student learning outcomes measurement in the Improve system. We use the data collected in this system to then further compile data that helps us assess the achievement of program level outcomes for the nursing program. In the past, the Director of Nursing for COS compiled data required by the CA BRN

related to program completion rates, employment, NCLEX success rates, completion on time, and attrition. The administrative assistants in the nursing office assist in the collection of data for the program annually and as needed. Student survey data is collected including licensure rates, program completion and job placement, graduate satisfaction, and resource evaluation.

As this is our first attempt at achieving accreditation through ACEN we did not have the same type of written systematic plan of evaluation required by ACEN but have always had a systematic plan of evaluation meeting the requirements of the CA BRN. The CA BRN requirement evaluates all aspects of the program every five years. It is an evaluative tool, which includes faculty review of the program mission statement and philosophy, the admission process, library resources, policies and procedures, and several areas of the nursing program including program outcome results, student evaluations, graduate satisfaction, employer satisfaction etc. Where appropriate this data is shared annually with all communities of interest (Administrative personnel, Nursing Advisory Board, Faculty, Students). The faculty are now compiling data to support measured (expected level of achievement; ELA) achievement outcomes for each end-of-program student learning outcome (EPSLO) which was not previously required by the BRN but is required by ACEN.

Going forward the Nursing Program will have a comprehensive written systematic plan of evaluation including EPSLO assessment and expected level of achievement (ELA) in accordance with the ACEN definition.

See repository item: Standard 5, Criteria 5.1: Table 5.1a EPSLO Evaluation

Table 5.1b
SPE schedule of assessment

Program Outcome/Component	Assessment Method	Frequency of Assessment	Expected Level of Achievement (ELA)
NCLEX-RN Licensure exam passing rates	Board Exam Reports	Data is compiled by the board quarterly. Faculty will review results quarterly and discuss and evaluate annually	85% or better for all first-time test takers during the calendar year. (the CA BRN requirement is 75%)
Program Completion Rates	Student program completion data collection	Data will be compiled on a semester-based schedule and reviewed annually	80% or better for on-time graduates beginning with the first day of the first nursing course.
Job Placement Rates	Email/text/calls sent to each graduate within 6 months post-graduation.	Conducted at end of every semester post-graduation	>85% of students will report employment within the nursing profession within 6 months of graduation.
EPSLOs Direct Measurement	1.Data results from the ATI comprehensive predictor Exam.	Students in the 4th semester transition to practice course will take the ATI comprehensive	Students will meet or exceed the state average on each individual subscale on the ATI comprehensive predictor test:

Program Outcome/Component	Assessment Method	Frequency of Assessment	Expected Level of Achievement (ELA)
		predictor exam at the beginning of the semester and again at the end of semester for comparison of results and analysis of improvement.	• Management of Care: EPSLO 1,2,4,5,6); • Safety and Infection Control (EPSLO 1,2,3,4); Health Promotion and Maintenance (EPSLO 1,2,3,4,5,6); • Psychosocial Integrity, Basic Care and Comfort (EPSLO 1,2,4,5); • Pharmacological and Parenteral Therapies (EPSLO 1,2,3,4,5,6); • Reduction of Risk Potential (EPSLO 1,2,3,4,5,6); • Physiological Adaptation, Clinical Judgment (EPSLO 1, 2, 4,6)}
	2. Students have successfully met all CLOs and SLOS for each core nursing course in the program	Student performance in theory and clinical is evaluated both formative and summative each semester for achievement of the CLOs and SLOs. Demonstrating competence in nursing practice throughout.	Students must achieve a minimum grade of 75% in all theory courses and a passing grade in all clinical components. Documentation of student success will occur in the student evaluation record at the end of each clinical rotation and end final grades posted at the end of each academic semester.
Course Evaluations	Course evaluations at the end of each core nursing course. Areas of professor strength and weakness. Scale 0-5	Conducted at the end of each academic semester and analyzed by course professors.	Each item scored should exceed 3.0 with the exception of the use of resources which is scored on a 0-8 scale and reflects the students use of various resources.
Graduate Satisfaction Surveys	Survey Monkey sent to graduates -Likert scale	Surveys are conducted 6 months post-graduation and analyzed biannually	>80% of all student respondents will report satisfaction with the COS Nursing program by marking agree or strongly agree on the survey questions.
Clinical Site Evaluations by Faculty	Clinical site evaluations form	Conducted annually by clinical instructors and analyzed annually	>80% of faculty will report having adequate clinical resources to meet student learning objectives
Employer Satisfaction Evaluation	Annual email to employers	Conducted annually and analyzed annually	>80% of employers are satisfied with COS Nursing Program graduates.

Currently one of the methods used to directly measure the achievement of EPSLOs is the use of the ATI comprehensive predictor exam which is taken at the beginning of the fourth semester (NURS 175) and again at the end of the semester. The first semester for which the new

concept-based curriculum hit fourth semester was in spring 2022 so this is the first semester for which the comprehensive predictor metrics are available. While this is only one method of evaluation of achievement of competencies and objectives in the program, the information is limited by the number of direct questions given on the exam in any given QSEN category. For example, the test may only have one test item directly assess safety related to infection prevention, and so this limits the ability of faculty to assess true comprehension and competency related to this category. We are working to improve the methods for which this exam will be delivered. In the past it has been offered as a low stakes exam and students have not taken the results seriously. We hope to improve this by raising the stakes on the exam and by offering a live review (Hurst) prior to students taking the second comprehensive predictor thereby also offering them a more reliable study guide (provided by ATI).

When assessment data is analyzed annually, action plans are developed that address program weaknesses, curriculum, and course objective competencies. Results of data analysis lead to program level decision making and decision making related to improving student EPSLOs, and achievement.

In the past parts of the systematic plan of evaluation (where appropriate) have been shared with the nursing advisory board and other communities of interest (community partners, administration). This is our first attempt at achieving national accreditation and we have not shared end-of-program learning outcome data with these parties of interest, but have always shared completion data, success data, and employment data which more accurately reflect the success of the program.

Repository Item: College of the Sequoias Written Systematic Plan of Evaluation

Standard 5, Criteria 5.2 a-f.

The written systematic plan for evaluation describes the process for annual assessment of the nursing program completion rate. Faculty will:

a. **Calculate the on-time program completion rate for each program option from the first nursing course through completion of the courses required for conferral of a certificate, diploma, or degree.**
b. **Establish a specific, measurable expected level of achievement outcome statement for on-time program completion for each program option and provide a rationale for each expected level of achievement;**
c. **Collect aggregate program completion rate data annually and disaggregate the data to promote meaningful analysis; provide justification for data that are not disaggregated;**
d. **Analyze program completion rate data (aggregate and/or disaggregate) annually and when necessary, implement actions based on the analysis to maintain and/or improve program completion rate;**

e. **Maintain documentation for the three most recent years of the data (aggregate and/or disaggregate), the analysis of data, and the use of data analysis in program decision-making to maintain and/or improve students' success in completing the program; and**

f. **Share the analysis of the program completion rate data with communities of interest.**

**Programs seeking initial accreditation that have had graduates should address items a-f but are only required to have data from the time that candidacy with the ACEN was achieved.

The COS nursing program achieved candidacy status June 16, 2023. The following data represents information and data collected since achieving candidacy. As this will be our first attempt at achieving accreditation through ACEN we will continue to maintain documentation of at least three years data and present three years of aggregate and disaggregate data at all following accreditation visits.

Standard 5, Criteria 5.2 Table 5.2a

Program Length Table for Calculations

Program Option	Total Number of Academic Terms to Complete Program Option (Including Prerequisites)	Number of Academic Terms for Nursing Coursework
Traditional ADN RN Program	8	4
Advanced placement LVN-RN ADN Program	5	3
Year-round traditional ADN RN Program	9	5 (1 semester = 5 months; this program takes 26 months)

Standard 5, Criteria 5.2 Table 5.2b

**Data beginning in fall 2023 which indicates the time of candidacy approval until current

Aggregated Program Completion Table

Program Completion – Aggregated for the Entire Program				
Year	Total number of students starting in the first nursing course	Total number of on-time graduates.	On-Time Completion Rate	Ultimate Completion Rate
2023-2024	N=48 + 45 = 93	45 + 43 = 86	92.5%	98.9%
2022-2023	N=42 + 49 = 86	41 + 42 = 83	96.5%	100%
2021-2022	N=48 + 45 = 93	46 + 43 = 89	95.7%	100%

Standard 5, Criteria 5.2 Table 5.2c

Disaggregated Program Completion Table

Year	Traditional RN	On-Time Completion	Ultimate Completion	LVN-RN	On-Time Completion	Ultimate Completion
2023-2024	N= 38+36=74	94.5%	(73) 98.6%	10+9=19	97.4%	100%
2022-2023	N=36+39=75	93.3%	(74) 97.3%	10+8=18	94.4%	100%
2021-2022	N=39+39=78	96.2%	(78) 100%	9+6=15	100%	100%

AY 2023-2024

College of the Sequoias Generic Students	Academic Yr. 23-24
Completed the program on schedule	69
Withdrew from the program	2
Were dismissed from the program	0
Are still enrolled in the program	2
Total Scheduled to Complete	**74**
Completion rate	94.5%
Attrition rate	5.5%

College of the Sequoias LVN to RN Advanced Placement Students	Academic Yr. 23-24
Completed the program on schedule	9
Withdrew from the program	0
Were dismissed from the program	0
Are still enrolled in the program	1
Total Scheduled to Complete	**8**
Completion rate	97.4%
Attrition rate	10%

AY 2022-2023

College of the Sequoias Generic Students	Academic Yr. 22-23
Completed the program on schedule	69
Withdrew from the program	5
Were dismissed from the program	0
Are still enrolled in the program	1
Total Scheduled to Complete	**75**
Completion rate	92%
Attrition rate	8%
College of the Sequoias LVN to RN Advanced Placement Students	Academic Yr. 22=23
Completed the program on schedule	16
Withdrew from the program	0

Were dismissed from the program	0
Are still enrolled in the program	1
Total Scheduled to Complete	**17**
Completion rate	94.1%
Attrition rate	5.9%

AY 2021-2022

College of the Sequoias Generic Students	Academic Yr. 21-22
Completed the program on schedule	67
Withdrew from the program	6
Were dismissed from the program	2
Are still enrolled in the program	0
Total Scheduled to Complete	**73**
Completion rate	91.7%
Attrition rate	8.3%

College of the Sequoias LVN to RN Advanced Placement Students	Academic Yr. 21-22
Completed the program on schedule	16
Withdrew from the program	0
Were dismissed from the program	0
Are still enrolled in the program	0
Total Scheduled to Complete	**16**
Completion rate	100%
Attrition rate	0

Expected level of achievement for on-time program completion statement:

Ultimately the COS nursing program historically has a very low attrition and failure rate so we set our expected level of achievement high with the realization that we will not always reach this goal but need to strive to meet or exceed it. The Nursing Program will achieve an on-time completion rate of 90% or greater and an ultimate completion rate of 97% or greater.

Values and data will be collected biannually at the end of each semester, and analyzed annually and as needed. Faculty will discuss both the aggregated and disaggregated data collected and analyze this for use in making decisions about the program, the curriculum, and to develop program improvements.

Analysis of Completion Rate Data: The nursing program meets all ELOs for both on-time completion and ultimate completion. Attrition plays a small role in our completion rate. In general attrition in the nursing program is due to personal, and/or financial issues. In recent years the Covid pandemic played a role in the students' ability to complete the program on time sometimes due to health issue, family health, financial concerns. etc. Historically attrition in the nursing program has been quite low; under 9% in the traditional program and in the LVN-RN

attrition of one student per semester would equal 10% so that number is higher. Course failure rates are low and students usually will rejoin the following semester if there is an open seat, to ultimately finish the program which is reflected in our excellent ultimate completion rates.

Action: Monitor attrition and rationale for attrition along with course failures in Nursing ARRC. Brainstorm ways to retain students and decrease attrition. Assess and discuss with faculty reasons for student course failures. Look for opportunities to address student equity issues and allocate resources and student support to those students.

Collected data will be shared with the nursing advisory board, faculty, administration and others as appropriate.

When evaluating our current data set we would like to note that the year-round traditional nursing students begin their program in the beginning of a summer session1 (the first cohort started in summer 2022) and end at the end of summer session 3, taking 26 months to complete the program. Data for the year-round program is limited as we have only enrolled two cohorts of students (20 each cohort) thus far. We will be finishing the program with the first cohort of students in late July 2024. After this first two cohorts the program will only be admitting 20 students bi-annually into the year-round program. We are interested to see how this program compares statistically to our traditional and LVN-RN programs.

**See repository items: Meeting Minutes: Nursing Advisory Board Committee Minutes; ARRC Minutes.

**See repository items: COS Written Systematic Plan of Evaluation

**See repository item: Standard 5, Criteria 5.2 Enrollment and Completion Data

Standard 5, Criteria 5.3

The written systematic plan for evaluation describes the process for annual assessment of the licensure and/or certification examination pass rate. Faculty will:

a) Examine aggregate examination pass rate data secured from regulatory and/or certifying agencies. The most recent annual pass rate OR the mean pass rate for the three most recent years meeting at least one of the following based on the total number of test-takers:
   - 80% or greater for all first-time test-takers; or
   - 80% or greater for all first-time test-takers and repeaters; or
   - At or above the national/territorial mean based on the nursing program type.
b) Disaggregate the pass rate data to promote meaningful analysis; provide justification for data that are not disaggregated;
c) Analyze program licensure and/or certification examination pass rate data annually and when necessary, implement actions based on the analysis to maintain and/or improve students' pass rate success.

d) Maintain documentation for the three most recent years of the aggregated and/or disaggregated data, the analysis of data, and the use of data analysis in program decision-making to maintain and//or improve students' success in passing the licensure exam; and

e) Share the analysis of the licensure and/or certification examination pass rate data with communities of interest.

The COS Nursing Program written systematic plan of evaluation (SPE) addresses the NCLEX licensure exam pass rate for all program types over several years (minimum of three most recent years). The three most recent years of data will always be maintained in the SPE. The SPE will be stored and shared on SharePoint. Data is collected quarterly and analyzed annually. The CABRN NCLEX pass rate results are calculated beginning July 1st of a given year and end June 30 the following year.

The Director of Nursing for the program will collect and maintain the data. The division chair for nursing will enter the current data into the SPE tables and maintain currency of the documents. This data will be shared with all communities of interest including faculty, administration, the nursing advisory committee, community partners and the public.

The nursing program SPE notes the need to gather, review and analyze a minimum of three years of aggregate and disaggregate data to improve and obtain meaningful analysis and provide data and justification for needed decision making used to improve student success in the program and in test-taking.

The Expected Level of Achievement (ELO) for the aggregate first-time test taker pass rate will be meet or exceed **85% for all program types**. The CABRN requires programs to maintain a pass rate of 75% (California Nursing Practice Act, 2024 ed., page 111 Section 1431: Licensing Examination Pass Rate Standard). The CABRN conducts visits and implements warning measures for nursing programs who have pass rates lower than 75%. The COS Nursing Program seeks to provide an excellent education in nursing and we expect (based on previous pass rates) that students will achieve at least a pass rate of 85% or better.

The Expected Level of Achievement (ELO) for the Ultimate Pass Rate will be 97%. Historically students of this program have been able to meet this goal. We will review the goal and student success regularly to evaluate whether maintaining this goal is realistic.

The following data tables are used in the SPE:

Aggregate Pass Rate Data Table

First-Time and Ultimate Pass Rate Table-Aggregated for the Entire Program		
Academic Year	First-Time Exam Pass Rate	Ultimate Pass Rate
2023-2024	F23 42/48=87.5% + S24 44/48= 91.67% Total = 89.58%	94/96 = 97.9% 1 student still needs to take the test
2022-2023	F22 40/41=97.5% + S23 42/45=93.3% Total = 95.4%	86/86 = 100%
2021-2022	F21 41/47=87.2% + S22 37/43=86% Total = 86.6%	90/90 = 100%

3-year Average	89.5% + 95.4 + 86.6 = 90.5%	269 /271 = 99 %

Disaggregate Pass Rate Data Table

Disaggregated Pass Rate Data for First-Time Test Takers		
Academic Year	Generic RN Program	LVN-RN Program
2023-2024	F23 34/38 = 89.5% + S24 36/39= 92.3% total = 90.9 %	F23 8/10 = 80% + S24 8/9 = 88.9% = 84.45%
2022-2023	F22 31/32 = 96.9% + S23 34/37 = 91.9% Total = 90.35%	F 22 9/9 = 100% + S24 8/9 = 88.9%= 94.45%
2021-2022	F21 32/37 = 86.5% + S22 31/37 = 83.8% Total = 85.15%	F21 9/10 = 90% + S22 6/6 = 100% = 95%
3-year Average	92.3 + 90.35 + 85.15 = 267.8/300 = 89.26%	84.45 + 94.45 + 95 = 273.9/300 = 91.3%

Excerpt from SPE

Analysis of Data

The data analyzed at the end of the 2021-2022 academic year revealed a lower than normal pass rate for the nursing program. This may be related to events surrounding the COVID pandemic, including the necessary remote teaching and learning, effects on clinical placement, and student related issues related to the pandemic (illness, family, financial resources).

LVN pass rates for these three reported years appears to exceed the pass rate of the generic RN students. This might be expected related to their previous medical experience and exposure and possibly because they have already taken a licensure exam and are aware of the expectations for the exam.

When reviewing the ACEN standards for first-time pass rate, ultimate pass rate and disaggregate pass rates, the nursing program has exceeded the recommended standard for each value and has met the programs self-designated aggregate goal first-time pass rate of at least 80% and an ultimate pass rate of 95% for each academic year.

Action Plan

The College of the Sequoias Nursing Program, in an effort to always be proactive implemented several steps in the 2022-2023 academic year to address the decrease in our pass rate (2018-1019 97.4%, 2019-2020 94.25%, 2020-2021 87.85%). We decided to purchase U-World NCLEX review materials for our students and additionally we implemented an in-person HURST review. Students who could not attend the three day, in person review were offered the opportunity to take the review online (Streaming). When analyzing the pass rates for that academic year we did see a dramatic increase in the pass rate in both the fall and spring semesters; however, that increase did not persist into the Fall of 2023. At the time of this analysis the spring 2024 results were not yet ready for review. We will continue to monitor pass rates and

continue to use the data to make decisions and implement action plans that address student success.

The program shall share pass rate data with the nursing advisory board, and other parties of interest in the fall semester (2024). Pass rate data is sent to all faculty when it is received by the CABRN. Pass rate data is shared with the entire division, and the dean during division meetings which are held monthly and include allied health programs.

Current NCLEX pass rate data is shared publicly on the COS/Registered Nursing Program website at the following link:

https://www.cos.edu/en-us/academics/nursing-allied-health/registered-nursing

** See repository items: California Nurse Practice Act; COS Written Systematic Plan of Assessment, Standard 5, Criteria 5.3 CABRN pass rate data.

Standard 5, Criteria 5.4

The written systematic plan for evaluation describes the process for annual assessment of the job placement rate.

The COS Nursing Program reaches out to post-graduates by email within 6 months of graduation. The email includes a survey monkey link for post-graduates. Data is collected from responses related to job placement, preparation for the NCLEX, evaluation methods during the program, clinical experiences, nursing program resources, etc. Emails go out following graduation each semester. Data is reviewed and analyzed annually and is used to help the director and faculty make decisions and implement actions that will improve job placement rates and to improve or assist students' success in obtaining job placement. This is the link to the actual survey data collected from the graduates.

Graduate Survey Link: https://www.surveymonkey.com/r/COS_NURS_SELFEVAL

Obtaining responses to the post graduate survey is quite challenging. The program director does attempt to reach each graduate multiple times, in various ways, (email, text, phone) and is able to get an appropriate response rate in this way to collect relevant data on employment rates.

The director collects and maintains the data collected on each student respondent. Data, analysis and action plans are developed by the director and faculty and shared with the division, the nursing advisory committee and other parties of interest (dean, college administration, community partners and the public) as appropriate. The data is available publicly on the COS Nursing Program website.

COS Nursing Program Website Link: https://www.cos.edu/en-us/academics/nursing-allied-health/registered-nursing.

Employers in our local area are also sent satisfaction surveys using the following link: Employer Survey Link: https://www.surveymonkey.com/r/COSRN_EMPLOYER_EVAL. Data gathered from this survey will help the nursing program director and faculty determine any needed revisions in the program curriculum or clinical experiences that would help the students be successful in maintaining job placement.

Expected Level of Achievement

The expected level of achievement statement was developed using the data table as a guide. The nursing faculty use data to determine a percentage of post-graduates that was genuine and realistic, but with the realization that improvement is the expectation

➢ 85% of graduates will report employment as an RN within six months of graduation.

Aggregate Job Placement Table

	Job Placement Rates – Aggregated for the Entire Program		
Year	Response Rate (Number of **graduates responding** to survey/number of actual graduates)	Response Rate (Number of **Graduates who received RN** License/number of actual graduates)	Job Placement Rate **(Number employed** as RN/number of **responding graduates**)
Summer 2024	17/18 =94.4%	17/18 = 94.4%	17/17 = 100%
2023-2024	79 /96 = 82.29%	96/96 = 100%	79/79 = 100%
2022-2023	83/86 = 96.5%	86/86 = 100%	83/83 = 100%
2021-2022	88/91 =96.7%	90/91 = 100%	88/88 = 100%

Disaggregated Job Placement Table

Job Placement Rate – Disaggregated by Program Option		
Year	Generic RN Program (Number employed as RN/number of responding graduates)	LVN-RN Program (Number employed as RN/number of responding graduates)
2023-2024	67/77 = 87%	15/19= 78.9%
2022-2023	67/69 = 97.1%	17/17 = 100%
2021-2022	72/75 = 96%	16/16 = 100%

*data to support these tables can be viewed during our visit as they contain student identifiers.

Analysis of Job Placement Data:

Graduates who respond with employment data are those who have obtained RN jobs. We have few responses from graduates who have not yet been employed in the nursing field. The reason for this is unclear.

The analysis of employment data indicates a very high percentage of graduates are able to obtain employment in the profession of nursing. The director also collects information about when the graduate obtains employment and where. Many of our graduates have secured employment even before graduating from the program. This is a medically underserved area and the hospitals are very much in need of nurses so our graduates usually do not have difficulty securing work.

Action Plan:

Maintain current efforts to reach out to graduates by multiple means. This method is successful and we are able to gather sufficient data for analysis in this way.

** **See Repository Items**: Systematic Plan of Evaluation; Standard 5, Criteria 5.4 NCLEX and Employment Rates for Generic and LVN 2021-2024

Note. As part of our Systematic Plan of Evaluation the COS Nursing Program also uses additional methods of program assessment including student course evaluations, graduate satisfaction survey data, Clinical site evaluations and Employer Satisfaction surveys. This information can be found in the Systematic Plan of Evaluation in the repository.