

# Comprehensive Program Review Report



## Program Review - Nursing

### Program Summary

#### 2020-2021

**Prepared by:** Anne Morris and Stephanie Sierra

#### **What are the strengths of your area?:**

RN Program Strengths:

Student Success: The Nursing Program has a high success rate with almost all the students completing the program. During the academic year of 2019-2020 the program had a total of 180 students enrolled in the Fall semester with 39 graduates and 186 total students in the Spring semester with 39 graduates. Students that did not complete the program either withdrew for personal reasons (health and financial), difficulties related to the COVID Pandemic or clinical course failure (program rigor). A variety of support services within the program and the provision that students with one academic failure can repeat that course upon faculty recommendation contribute to our programs low attrition rate and high student success. During the Spring 2020 semester students were given the option to apply for an Excused Withdrawal "EW" (until a week after final grades were posted) so that students could withdraw from their courses without penalty. In the academic year 2019-2020 only one student failed their second attempt in the program. There were 4 withdrawals for reasons other than academics. The RN program attrition rate for 2019-2020 was 6.4% which is less than the attrition rate of 11.25% reported for 2018-2019 and continues to be below the state average for ADN programs of 14%. The course success rate for the core nursing courses in the nursing program ranges from 99-100%. The nursing course with the lowest success rate is NURS 256, with a success rate of 82% for the 2019-2020 academic year. NURS 256 is offered for both college students and as a dual enrollment course available to area high schools. The High School students are not always prepared to meet the rigor of a college online course. Another influencing factor for the Spring 2020 semester was the COVID Pandemic. In addition to program success and student retention the RN program continued to have above the state average pass rates of 94.32% on the National Council Licensure Examination (NCLEX) exam (The NCLEX is the licensing exam that graduates from the Registered Nursing Program need to take after graduation to be licensed as a Registered Nurse). This figure is 3.15% lower than the pass rate of 97.47% reported for the 2018-2019 academic year. The continued success of the program appears to be due to the number of experienced and conscientious full-time tenure track faculty, pre-admission counseling, low faculty to student ratio (10:1) in the clinical areas, skills and computer lab access (for practice remediation and review), skills lab adjunct that assist students with math, care planning and skills, and all instructors utilizing the RN program Student Success Program for students at risk for failure, struggling with nursing concepts and content, needing to develop study strategies, or having psycho-social issues. The students can voluntarily arrange an appointment with the student success instructor or can be referred to the student success instructor, if identified as being an at-risk-student, for assistance. The faculty of the RN program accommodates the learning and testing needs of students that use the the Access and Ability Center. During the Spring 2020 semester faculty made every attempt to follow student AAC accommodations when courses were diverted to an online/hybrid format as a result of COVID restrictions. The faculty have also been consistent integrating an ongoing assessment tool, Assessment Technology Institute (ATI) for their course preparation, instruction and reinforcement. The ATI program purchased by students and grant funds provides the nursing student with assessments of their current knowledge level. ATI provides individualized remediation plans to support student success in achieving the COS RN program outcomes. ATI guides the student by using supplementary resources such as case scenarios to reinforce theory and clinical instruction and ATI live review after program completion prior to sitting for the NCLEX exam. The students that did complete the RN program are eligible to sit for the NCLEX exam.

Enrollment Patterns: The program continues to accept 40 generic students a semester and an additional cohort of 10 LVN students was added for both the fall and spring semesters. Students who have completed the required prerequisite courses with a minimum 2.5 GPA and have taken the TEAS test (entrance exam) are then qualified to apply for the program. The selection process for acceptance is determined using the Multi-Criteria Admission Tool (documents), which is based on a 100-point system. The average point spread scored on the Multi-Criteria Admission Tool for acceptance for the 2019-2020 academic year

was 67.7-86.2 points for generic students and 54.5-65.5 for LVN-RN applicants. There were a total of 532 generic student applications and 61 LVN-RN applications for the 2019-2020 academic year with 98 students were accepted into the program. The LVNs begin the program in the 2nd semester of the program.

**Workload Measures:** The RN "old" program has eight core nursing courses ranging from 3 to 11 units. The new CBC nursing program rolling out for the first semester in Fall 2020 will have 10 core nursing courses ranging from 2-7 units. All the core nursing courses have a lab (clinical/simulation) component associated with them with the exception of NURS 123 of the CBC curriculum. The optimal student instruction occurs when the theory instructor also teaches in the clinical setting. This continuity of instruction is preferred to promote student learning and reinforces content recently taught in the classroom. The program hired two full-time tenure tract nursing faculty (Med-Surg and Pediatric) during Summer 2020, initially giving the program a total of 12 full-time faculty to start the 2020-2021 academic year. Having 12 full-time nursing faculty provides the optimal full-time faculty/student ratio in both the theory and clinical components of all the courses except pediatrics. Full-time faculty all carry a full load of core nursing course units and some overload. The adjunct faculty consists of 7 adjunct faculty.

**Student Evaluations 2019-2020:** Evaluations are based on 3 categories, Theory, Clinical, and Resources in all 4 semesters of the program. Graphs of all categories and the evaluation questions pertaining to those categories that the students have responded to are in the Summary of Program Effectiveness pages --- in the documents. Evaluations are delivered through Survey Monkey and based on a 5-point Likert Scale. The evaluation data analysis is summarized in a narrative followed by course faculty review responding with a development of plan of action.

**Academic Quality:** A Nurse Educator is a nursing specialty supported by the National League of Nursing (NLN). The standards set by the NLN are as follows:

1. Facilitate learning
2. Facilitate learner development and socialization
3. Use assessment and evaluation strategies
4. Participate in curriculum design and evaluation of program outcomes
5. Function as a change agent and leader
6. Pursue continuous quality improvement in the nurse educator role
7. Engage in scholarship
8. Function within the educational environment

The nursing program faculty continually assess, evaluate and implement needed changes and improvements to optimize student learning and success. This process is the foundation of nursing the faculty have been practicing from the beginning of their careers and is now transferred to the students in their clinical education.

In addition to professional standards and years of nursing experience most of the Nursing Faculty attend conferences related to nursing education during the Winter and Summer breaks. Most of the faculty have attended conferences/webinars related to concept-based teaching, simulation, online teaching strategies, and conferences/webinars related to their nursing areas of expertise in order to prepare for the upcoming curriculum change slated to being in the Fall 2020, teaching online or hybrid to prepare for the Fall 2020 semester (due to college remaining mostly remote due to the COVID Pandemic).

**Resource Efficiency:** The Nursing Program is a CTE program that qualifies for VTEA grant money. The program has benefited greatly with needed skill/simulation lab equipment and faculty development. In addition to VTEA funds the program has been able to increase FTES with the addition of 10 LVN-RN students through the Strong Workforce Initiative for the 2019-2020 year and financial resources provided by one of our clinical partners. The program has also been approved for Song Brown grant funds. Money was donated to the nursing program to help support the development of the simulation lab from a private donor. The Nursing program also benefited from CARES funds that have been used to help with purchasing additional PPE, virtual simulation products (to finish out the Spring 2020 clinical hours) and pay for 0.8 faculty reassign time for a 3-semester simulation faculty position. Resource efficiency is always low attributed to our Faculty/Student ratio in the clinical setting of 1:10. This ratio and limit of students in a clinical setting is a mandate by Board of Registered Nursing.

**Faculty Growth Template Summary:** The FTES for 2019-2020 was 363 which is greater than the previous year. This can be attributed to the addition of the LVN-RN cohort added in the spring and fall, and changes in ratios needed to meet the COVID safety recommendations and restrictions. The program has always focused on the needs of the community by meeting industry demands. The community nursing needs have steadily increased in the last two years. The efficiency of the nursing program (FTES/FTEF) is 8.4 which is far below the target ratio of 17.5. It would appear that we are not efficient, but this is due to the

design of our classes by state mandate. Each semester has a class of 40-50 students divided into 4-5 groups of a clinical lab with 1 instructor per 10 clinical lab students. The program has a total of eight core (required) courses which are all designed in the same pattern. Therefore, it is virtually impossible to meet the state goal productivity value in the efficiency (FTES/FTEF) category and also meet the mandates of the Board of Registered Nursing.

#### C.N.A. Program Strengths:

The Certified Nurse Assistant (CNA) Program consistently has a high success rate and is in high demand, course offerings fill immediately when registration opens with a waitlist. The CNA program increased its course offerings to meet student and workforce demand. Four sections were offered in the Fall 2019 semester, 5 sections were offered in the Spring 2020 semester, and 1 section is offered during the Summer. The Fall 2019 semester had a total of 55 students with 97% completers. One student received an F and another student withdrew from the course. The Spring 2019 semester had a total of 71 students with 89% completers. 5 students obtained an incomplete due to insufficient clinical hours. 3 students obtained an EW due to COVID-19 pandemic. A major reason students were unable to complete their Spring semester was due to clinical sites shutting down because of COVID-19. The Summer 2020 was unable to take place due to lack of clinical sites with the COVID-19 pandemic. The students registered for the Summer class were brought forward to the Fall 2020 semester. Their class is currently in progress. The students who successfully completed the course are eligible to sit for the state certifying exam. To assist students with their certification testing, COS is certified as a testing site under National Nurse Assistant Training and Assessment Program (NNAAP) and falls into the Northern Testing Center and host through the Regional Testing Center. Due to the current COVID-19 pandemic, for the Spring 2020 semester, students have been unable to take their certification exam. For the Fall 2019 semester, Students were able to test but because of COVID-19 Pandemic results could not be obtained at this time.

**Resource Efficiency:** The CNA program has a low teacher/student ratio, 15:1 as mandated by the state. A full-time tenure track faculty was hired for the CNA Program at the end of the Spring 2020 to help meet the staffing needs associated with having additional course offerings. This position was partially funded with funds through a HWI grant. The program utilizes the Allied Skills Lab that is also shared with the EMT, Pharmacy Tech, and PT programs.

**Enrollment Patterns:** The program (each course) accepts a maximum of 15 students per section with 9 sections being offered during 2019-2020 year. All sections provided were filled with students on the waitlist to be enrolled if a student should drop the class prior to the start of the course (Fall-7 students and Spring-12 students).

**Workload Measures:** The program is taught by one full-time faculty and one adjunct faculty. The course/program consists of a lecture and a lab. The program is structured for student learning in theory, instructor demonstration, student participation, and student skill demonstration. The students then progress to the clinical sites for patient care. The number of theory hours and clinical hours required by the students are mandated by the state.

#### Student Evaluations 2019-2020:

Student evaluations has recently been implemented in this program. Students take a five questions survey concluding each semester. Responses are based on a Likert Scale except for question 1 which asked the student's goal for taking the course. Students responses were summarized and can be found in the document repository for 2019-2020 Student Survey.

**Internal Relations:** The CNA instructors are part of the COS nursing division and are invited to all the division meetings and advisory meetings.

**External Relations:** The CNA program is part of the annual Registered Nursing Advisory Board including RN nursing faculty and representatives of the hospitals and other nursing programs in the region. (See document repository for Advisory Board minutes)

This year we are creating a separate advisory board from the Registered Nurse Program. We will include our clinical partners in hopes of establishing strong working relationships with our clinical sites further strengthening our CNA program.

#### What improvements are needed?:

RN Program Improvements Needed:

1. Continually improving student success and NCLEX pass rate.

The program's attrition rate decreased from 11.25% reported in 2018-2019 to 6.4% for 2019-2020. This is below the state average for ADN programs, which is 14%. Division tracking of attrition over the 2019-2020 academic year showed that it was related primarily to personal reasons (health, family and financial) and clinical course failure (program rigor). The current 2019-2020 National Council Licensure Examination for Registered Nurses (NCLEX) pass rate is 94.32%. This figure is lower than the pass rate reported from last year 2018-2019 of 97.47%. Some of the decrease in percentage of students passing the NCLEX exam on their first attempt can be attributed to students that were unable to complete the program within the same academic year of expected completion and delays in students being able to take the NCLEX exam related to the COVID-19 Pandemic. A grant funded part-time/adjunct counselor for the Nursing and Allied Health Division was hired at the end of 2018-2019 to provide student counseling and support student success.

(see RN Program Summary of Program Effectiveness in Document Repository)

## 2. Simulation Lab

Simulation in nursing education has provided a solution for limited clinical sites as well as meeting the increased need for scenario based learning. Simulation offers the students the opportunity to learn in situations that are comparable to actual patient encounters in a controlled learning environment that promotes critical thinking, clinical judgement and helps to ensure patient safety. The National Council of State Boards of Nursing (2019) defined clinical judgement as " the observed outcome of critical thinking and decision making. It is an iterative process that uses nursing knowledge to observe and assess presenting situations, identify a prioritized client concern and generate the best possible evidence-based solutions in order to deliver safe client care". The next generation National Council Licensure Examination (NCLEX) exam format is scheduled to be initiated in 2023 and will have a greater emphasis on measuring the students ability to make appropriate clinical judgements. In simulation, students are able to transfer classroom knowledge to realistic patient scenarios meeting the required SLOs and clinical hours mandated by the California Board of Registered Nursing. Studies have shown that the use of high-fidelity simulation has led to significant improvements in students problem-solving, critical thinking, clinical judgement, and clinical competence. The skill lab currently has low, medium, and high-fidelity simulators that are underutilized due to lack of a simulation program and oversight, limitations of simulation room layout , lack of simulation lab support staff, technological challenges, and the requirement for additional faculty training. In the report of findings from the continuing approval visit by the Nurse Education Consultant (NEC) for the Board of Registered Nursing at the end of 2017 there was a recommendation to "Evaluate sufficiency of resources specific to simulation (technology) including but not limited to physical space, support staff, and support services to optimize the use of simulation in the students learning experience".

a) In order to provide students with a training environment that supports simulation and provides learners with the physical space to promote fidelity, encourage active learning, support students clinical judgement, and support repetitive practice and reflection while meeting the International Nursing Association for Clinical Simulation and Learning (INACSL), National League for Nursing (NLN) & National Council of State Boards of Nursing (NCSBN) Standards and Recommendations for Best Practices in Simulation. The majority of the initial (Phase 1) renovation and expansion of the simulation lab space was completed in the summer 2020:

1. Simulation lab space was divided into 2 individual rooms (Initially one of these rooms will function as a debriefing area and as the integration of simulation in the program grows, and additional area for debriefing will need to be developed (Phase 2) so that both of the current rooms can be used for facilitating student simulations).
2. The control room and storage space construction.
3. Initially, a section of the skills lab, a classroom, or the debriefing area will need to be used for pre-brief. (Phase 2-development of a designated pre-brief area).

The remaining (Phase 1) renovation will be completed during the Fall 2020 semester.

b) Part-time Simulation Lab Technician - Hiring for this position is planned for the end of the fall 2020 semester or the beginning of the Spring 2021 semester. This position is initially being funded through VTEA funding. The International Nursing Association for Clinical Simulation and Learning (INACSL) & National Council of State Boards of Nursing Standards and Recommendations for Best Practices in Simulation both address the need for having a simulation technician whose primary duties include but not limited to: support daily operations of the Simulation lab; maintain human simulators and lab equipment; perform pre-simulation activities and execute the simulation experience. The new nursing curriculum has 2 new simulation courses that incorporate simulation as a continual thread. Simulation in nursing provides a solution for limited clinical sites and offers students the opportunity to learn in situations that are comparable to actual patient encounters in a controlled learning environment. Students are then able to transfer classroom knowledge to realistic patient scenarios meeting the required SLOs and mandated clinical hours.

c) Simulation Faculty - This position was approved by senior management and COSTA at 0.8 reassign time for 3 semesters (Fall 2020 thru Fall 2021). Position has been filled and position is being funded through CARES funding (See Job description and MOU). Further plans to meet the NCSBN guidelines for this position will need to be addressed as of Spring 2022.

The NCSBN guidelines specify that there is a need for a qualified lead faculty (Simulation Coordinator/Director position) to oversee and be involved with the simulation lab development; policies and procedure creation, oversight, revision and evaluation that follow INACSL Standards of best practice; chair the Simulation Committee; design job descriptions; simulation oversight and management of schedule; maintain and manage financial resources; design and development of simulation scenarios to meet student needs; facilitate simulations for Transitions to Nursing and Concepts of Adult Health 3 courses; use evaluative feedback for quality improvement; provide faculty education and professional development.

d) Faculty development/training in simulation pedagogy and the use of a theory-based debriefing. This is required to prepare competent simulation faculty and ensure the consistency across the programs that use simulation as a teaching tool.

e) A management system- The management system equipment has been purchased for one simulation room and is scheduled to be installed during the Fall 2020 semester. The audio visual equipment for the second simulation room has not been purchased yet because the second simulation room will initially be used as a debrief room. Faculty training sessions on the management system will be held after installation.

a system to manage the tracking and evaluation of: learning outcomes, simulation utilization (to contribute to quality and

process improvement), and resource allocation.

f) Electronic Medical Record (EMR)-The Quality and Safety Education for Nurses(QSEN) project have defined quality and safety competencies for nursing that identify the knowledge, skills, and attitudes to be developed in pre-licensure programs. Informatics is one of the QSEN competencies. This competency identifies that students should be able to apply technology and information management tools to support safe patient care, navigate the electronic health record, document and plan patient care in an electronic health record. Our students get limited exposure and access to documentation in electronic health records in the hospital setting. Hospital rules lessen the abilities of students to use computers and document patient care. If the nursing program had an electronic medical record for students to practice navigating, documenting, and planning patient care they would have an increased ability to navigate and manage a patient record, mitigate error and make better decisions related to safe patient-care. The EMR could be integrated into both theory and clinical and would help students to be more prepared for the work environment after graduation. (see Assessment and Recommendations for Nursing Simulation Program in the document repository).

During the Spring 2020 semester Nursing Director, Nursing and Allied Health Chair and COS IT Representatives met with Kaweah Delta IT and Education representatives on via zoom conference to see if it would be possible to get a copy of the Kaweah Cerner training shell so that our students can be trained on the Cerner EMR on campus. A follow-up meeting was to be scheduled but due to the COVID pandemic this item was put on hold. The Simulation Committee will follow up on this with Kaweah, evaluate program needs and look into other EMR products available that would meet the documentation needs to support student success.

### 3. Virtual Simulation Products

Beginning in March 2020, due to the COVID Pandemic, clinical facilities were unable to provide a safe environment for faculty and students because of limited PPE. In addition, clinical partners denied students clinical access to all or some units and placements or greatly reduced the numbers of students allowed to be present for clinical placements. In response to the COVID Pandemic clinical restrictions, the governor issued Executive Order N-39-20 and the Department of Consumer Affairs provided an order waiving restrictions on nursing student clinical hours. As a result the CA BRN increased the percentage of simulated clinical hours allowed to 50% for the Spring 2020 semester. The waivers and increase in simulated clinical experiences has been extended thru 12/2020.

Even prior to the COVID Pandemic, providing clinical placements and experiences that support students' development of clinical judgment and provide students with the education and experience necessary to become competent and autonomous professional nurse students has been getting more difficult due to limited clinical placements. Virtual simulation products provide students with patient experiences/ cases that can also be integrated into theory.

Virtual patient simulations have been shown to be as effective as high-fidelity simulations as long as INACSL guidelines are followed (including a pre-brief and debrief in addition to the simulated experience). New research had shown that relevant student learning outcomes are at least equal to those achieved in traditional clinical settings. The National Council for State Boards of Nursing (NCSBN) conducted a large-scale, nationwide, randomized study comparing educational outcomes between students groups where simulation was substituted for up to 50% of traditional clinical experiences (Hayden et al., 2014). Results showed that there were no significant differences in nursing knowledge, clinical competency, NCLEX pass rates, and overall readiness for professional practice when simulation was substituted for up to 50% of traditional clinical experiences. The NCSBN study also showed that the benefits of using simulation in lieu of traditional clinical hours in pre-licensure nursing programs expanded to their students' first clinical position as there were no significant differences in clinical competency and readiness for practice at six weeks, three months, and six months after graduation.

4. Full Time Nursing Faculty Retirement Replacement Medical-Surgical Instructor Position to maintain the high level of student success in medical-surgical nursing courses. A current Advanced Med-Surg Nursing instructor has notified the division that she will use bank time for 100% of her load for the Fall 2021 semester is planning on retiring prior to the Spring 2022 semester. The success the Nursing Program is dependent on dedicated full-time faculty that coordinate and consistently plan and monitor each semester in both the theory and clinical components. The nursing program is requesting the hire of a full-time tenure track nursing faculty to replace the retiring full-time tenured Med-Surg faculty.

### C.N.A. Program Improvements Needed:

CNA According to the September 2020 Central Valley Labor Market Analysis for Certified Nursing Assistants and Home Health Aides, the C.N.A occupation is expected to grow over 13% in the next 5 years, with 1120 projected annual job openings and Home Health Aide occupation is expected to grow by 84% with 353 annual job openings. (See Report in document repository) Due to the present COVID-19 pandemic, healthcare workers are in high demand. Some projections suggest a need of 630,000 to 1 million front line healthcare workers in the next decade. Due to the very critical staffing shortages that are occurring presently, California has put a "emergency waiver" in place to allow students to work as Nursing Assistants in healthcare organizations. Actions on H.H.A. and R.N.A. courses are ongoing. We are still looking to develop these programs. Due to the challenges with the COVID 19 pandemic we have moved our focus to supporting our current students through their Certified Nursing Program.



1. Development of a Home Health Aide (H.H.A.) Training Program to help with meeting the expected community needs for this occupation. This program would be available to students who have completed a nurse aide training program and possess a nurse assistant certificate. Financial support for the development of this program comes from VTEA funding.
2. Development of a Rehabilitative Nurse Assistant course which introduces the C.N.A. to restorative care. This course will help to meet the market demands and will increase the student's skill set and give them more options in the job market. Financial support for the development of this course comes from VTEA funding.
3. In response to students' surveys, we are currently discussing a potential open skill lab time for the CNA program. Having an open skill lab for students will give students an opportunity to practice their skills prior to clinical practice. This will give instructors the opportunity to recommend additional skill lab time to students who are struggling with specific skills. Instructors will have the ability to include skill lab time in a student's plan of remediation during the semester. An open skill lab will give students the opportunity to become proficient in their state required skills, pass their clinical practicum and untimely their state certification exam. Having an open skill lab accessible to our CNA students will facilitate student learning outcome number 3.
4. At the beginning of each semester, collecting over 75 student's clinical clearance documentation is an overwhelming process for our Administrative Assistant. We offered an orientation day for students for an explanation of the process. Due to "remote courses" students were required to email all documentation to the Allied and Nursing Health office to verify and file. Starting next semester, we hope to facilitate this process by requiring students to purchase a compio subscription. This subscription will allow students to directly upload all their clinical requirements and verify the compliance. Students will then need to assure they stay compliant the entire semester. This tool allows to run reports to verify students clinical compliance. The purchase of this subscription will minimize the challenges we face every semester to clear students for their clinical practicum.

**Describe any external opportunities or challenges.:**

**RN Program Opportunities:**

1. There has been an increase in demand for nursing hires in the community. When the demand for nurses increases the health care facilities often develop and institute opportunities for the student during their nursing education. The RN Program's largest clinical partner has increased the number of Student Nurse aide and Student Nurse Intern positions on multiple nursing units in response to our recommendation and also the hospital's need for nurses. This allows the nursing students during in their second semester (SNA) or last semester (SNI) of training to work under the supervision of an RN doing patient care and advanced skills under the classification of unlicensed personnel. The student is paid an hourly wage, gains experience in patient care, and possible employment at the completion of the program and licensure.
2. Also related to the nursing shortage in the area are the opportunities to expand the program to meet the needs of the community. The increase of FTES is beneficial to the college. A clinical partner has provided financial resources to the program to increase the number of LVN to RN students. Strong Workforce funds has also provided funds to increase the LVN to RN students. For the 2019-2020 academic year he program added 20 LVN to RN students. Funds secured through Strong Workforce and one of the clinical partners.
3. A third advantage to the area's current nursing shortage is our graduates are finding employment immediately after graduation before they have taken their NCLEX exams.

**RN Challenges:**

1. Beginning in March 2020, due to the COVID Pandemic, clinical facilities were unable to provide a safe environment for faculty and students because of limited PPE. In addition, clinical partners denied and are continuing to deny students clinical access to all or some units and clinical placements and/or have greatly reduced the numbers of students allowed to be present for clinical placements. For the Spring 2020 semester there was concern that the students would not be able to complete the required amount of clinical hours required at the bedside (CA BRN only approves 25% of the students clinical hours to be in simulation) and that students may have to take an incomplete and possibly not graduate on time. Pursuant to the Governor's Executive Order N-39-20, during the state of emergency, the Department of Consumer Affairs issued a waiver waiving restrictions on nursing student clinical hours. The BRN approved increasing the number of simulation time allowed to 50% which enabled most students to complete the clinical hour requirements. These waivers have been extended thru 12/2020.
2. COVID recommendations and restrictions on the COS campus have impacted both students and faculty. In March 2020 all courses were required to move to an online or hybrid mode of instruction. Students completed the semester with online lectures for theory, reduced clinical hours in the hospital at the bedside or other out of the hospital clinical experiences, and use of virtual simulation products to complete their required clinical hours. This was difficult for some students who had limited technology (computers, laptops and wifi). Many of the students also had additional challenges because of responsibilities and learning distractions (family members, children) that hampered learning in the home environment. a percentage of students

also had difficulties with learning in an online or virtual format. In an effort to promote student success, the college offered students that were struggling with online learning the option to take an (EW) so the student could withdraw from the course and repeat the course without it affecting their GPA. Faculty members not familiar with using the CANVAS LMS to manage courses had to learn how to navigate, organize, manage and facilitate courses using the LMS. Faculty members had to re-format their lecture courses to be facilitated via Zoom and on the CANVAS LMS. All faculty members that were not certified to teach online needed to complete an online teaching certification course or an emergency online training course. Online and hybrid course instruction has been extended thru the Spring 2021 semester.

#### C.N.A. Opportunities and Challenges:

For Spring 2020, there was a major external challenge for our Certified Nursing Program, COVID-19. In the middle of our clinical rotation (March), our clinical sites stopped allowing students into their facility due to the high risk of infection. CDPH released a waiver in late May allowing alternative platforms for meeting the required number of theory/clinical hours. Spring 2020 students completed their theory hours via a synchronous method. To meet their clinical hours, students returned to the skill lab in small groups. Their completion date for the Spring semester was in July 2020.

The Summer 2020 CNA was postponed to Fall 2020 due to the pandemic. Clinical facilitates continued to not allow students into their facilities in the summer semester.

Due to these unforeseen circumstances, students from Spring 2020 have not taken for their state certification exam. Testing sites in California have closed and are currently trialing a soft opening. We continue to be a testing site for NNAAP.

After months of collaboration, the CNA program and clinical partners created a proposal to bring students safely back into clinical. (See attachment).

Due to the high county infection rate of COVID-19, students are required to test for COVID-19 weekly. There were many challenges in obtaining COVID-19 tests for students weekly. Students were struggling with finding COVID-19 screening sites, appointment availability and obtaining results in a timely manner. Recently, we partnered up with BioCEPT, a COVID screening laboratory. Currently, we are testing our students weekly for COVID-19 to maintain clinical clearance. Our program will continue to follow recommended state guidelines for testing to align with clinical facilities.

Due to the COVID-19 pandemic and the abrupt educational transition to online learning, three students in the Spring semester withdrew due to extenuating circumstances (EW) from our CNA program.

Students have been given the opportunity to work as a nursing assistant without taking a certification exam. Students from the Spring semester are currently working as nursing assistants in various healthcare organizations. Currently, students have the opportunity of working in healthcare facilitates. This opportunity can maximize student clinical experience in this class and facilitate learning outcomes. Joining the workforce during this pandemic will give students a feeling of helping others and making a difference.

#### Overall SLO Achievement:

Registered Nursing (RN) Program:

The old nursing program curriculum (currently in 2nd-4th semesters) has 8 core courses and the same 8 SLOs for each course (1. Caring, 2. Safety, 3. Critical Thinking, 4. Psychomotor, 5. Health Teaching, 6. Communication 7. Growth, Development and Adaptation, 8. Legal Ethical, and Professional Practice). The SLO's

In the new concept-based nursing program curriculum (currently in 1st semester) each course has varying numbers of SLO's that are individualized by course content and complexity.

The SLOs are semester leveled, meaning each semester's expectations of the student increase with complexity.

The faculty assess all SLOs by various evaluation methods; classroom testing, clinical observation, student demonstration, written care plans, and ATI testing. The goal of the faculty is to have 100% of their students meet each SLO. Each course and every SLO consistently met the established goal of 100% success rate also reflective in the program success and attrition rates.

C.N.A. Program:

Certified Nurse Assistant (CNA) Program The full-time faculty of the CNA program are responsible in maintaining and updating the SLO evaluations of the program in accordance with college schedule.

#### Changes Based on SLO Achievement:

#### Overall PLO Achievement:

#### Changes Based on PLO Achievement:

**Outcome cycle evaluation:** The college requirement for faculty SLO assessment is every 3 years. The Nursing Division faculty decided 3 years is too long to assess the 8 SLOs for each of the classes as evaluation and improvement measures need to be identified and planned so the following semesters can benefit. At least 1 SLO is evaluated every year from every nursing core course but most faculty address all of the 8 SLO's each year. The faculty participate in tracdat outcome assessments in the beginning of the academic year, usually during Dialog Day as outcome assessment is scheduled into the agenda.

This process of outcome evaluation will continue for the new Concept-based Curriculum (CBC) as it rolls out.

**Related Documents:**

[BRN clinical\\_hours.pdf](#)

[dca\\_Extension for Waiver for Nursing Student Clinical Hours.pdf](#)

[NURS - 2020 Program Review Data\(2\) \(2\).pdf](#)

[Nursing Advisory Committee 4-9-19 Meeting Minutes \(2\).doc](#)

[Nursing advisory list 2019.pdf](#)

[Nursing LMI, 2020.pdf](#)

[Nursing VTEA Allocation\(1\).pdf](#)

[Sim Educator Job Description Final May 21 2020.pdf](#)

[SIM Lab Faculty Coordinator District Proposal \(May 18 2020\) Signed.docx](#)

[C.N.A. Outline for Survey responses for Spring 2020.docx](#)

[CNA proposal \(3\).docx](#)

[EMSI Data on Tulare-Kings Co. HHA\\_CNA 2020-2021.docx](#)

[Occupation Overview Home Health and Personal Care Aides in 2 California Counties\\_7489.pdf](#)

[Occupation Overview Nursing Assistants in 2 California Counties\\_7802.pdf](#)

## Action: 2020-2021 Facilitate Students Development of Clinical Judgment and Provide Support to Meet the Board of Registered Nursing Clinical Hour Requirements Through the use of Virtual Patient Simulation Products

Purchase of virtual simulation products.

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**Implementation Timeline:** 2020 - 2021

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**Identify related course/program outcomes:** This action supports Nursing PLO's # 1,2,4, 5 and 6.

**Person(s) Responsible (Name and Position):** Jonna Schengel Associate Dean of Nursing and Allied Health, Belen Kersten Director of Nursing, Robert Morris, Nursing Simulation Faculty

**Rationale (With supporting data):** Beginning in March 2020, due to the COVID Pandemic, clinical facilities were unable to provide a safe environment for faculty and students because of limited PPE. In addition, clinical partners denied students clinical access to all or some units and placements or greatly reduced the numbers of students allowed to be present for clinical placements. In response to the COVID Pandemic clinical restrictions, the governor issued Executive Order N-39-20 and the Department of Consumer Affairs provided an order waiving restrictions on nursing student clinical hours. As a result the CA BRN increased the percentage of simulated clinical hours allowed to 50% for the Spring 2020 semester. The waivers and increase in simulated clinical experiences has been extended thru 12/2020.

Even prior to the COVID Pandemic, providing clinical placements and experiences that support students' development of clinical judgment and provide students with the education and experience necessary to become competent and autonomous professional nurse students has been getting more difficult due to limited clinical placements.

Virtual patient simulations have been shown to be as effective as high-fidelity simulations as long as INACSL guidelines are followed (including a pre-brief and debrief in addition to the simulated experience). New research had shown that relevant student learning outcomes are at least equal to those achieved in traditional clinical settings. The National Council for State Boards of Nursing (NCSBN) conducted a large-scale, nationwide, randomized study comparing educational outcomes between students groups where simulation was substituted for up to 50% of traditional clinical experiences (Hayden et al., 2014). Results showed that there were no significant differences in nursing knowledge, clinical competency, NCLEX pass rates, and overall readiness for professional practice when simulation was substituted for up to 50% of traditional clinical experiences. The NCSBN study also showed that the benefits of using simulation in lieu of traditional clinical hours in pre-licensure nursing programs expanded to their students' first clinical position as there were no significant differences in clinical competency and readiness for practice at six weeks, three months, and six months after graduation.

**Priority:** High

**Safety Issue:** No

**External Mandate:** No



# Program Review - Nursing

## Safety/Mandate Explanation:

## Resources Description

### Technology - Virtual patient simulations (Active)

**Why is this resource required for this action?:** Beginning in March 2020, due to the COVID Pandemic, clinical facilities were unable to provide a safe environment for faculty and students because of limited PPE. In addition, clinical partners denied students clinical access to all or some units and placements or greatly reduced the numbers of students allowed to be present for clinical placements. In response to the COVID Pandemic clinical restrictions, the governor issued Executive Order N-39-20 and the Department of Consumer Affairs provided an order waiving restrictions on nursing student clinical hours. As a result the CA BRN increased the percentage of simulated clinical hours allowed to 50% for the Spring 2020 semester. The waivers and increase in simulated clinical experiences has been extended thru 12/2020.

Even prior to the COVID Pandemic, providing clinical placements and experiences that support students' development of clinical judgment and provide students with the education and experience necessary to become competent and autonomous professional nurse students has been getting more difficult due to limited clinical placements.

Virtual patient simulations have been shown to be as effective as high-fidelity simulations as long as INACSL guidelines are followed (including a pre-brief and debrief in addition to the simulated experience). New research had shown that relevant student learning outcomes are at least equal to those achieved in traditional clinical settings. The National Council for State Boards of Nursing (NCSBN) conducted a large-scale, nationwide, randomized study comparing educational outcomes between students groups where simulation was substituted for up to 50% of traditional clinical experiences (Hayden et al., 2014). Results showed that there were no significant differences in nursing knowledge, clinical competency, NCLEX pass rates, and overall readiness for professional practice when simulation was substituted for up to 50% of traditional clinical experiences. The NCSBN study also showed that the benefits of using simulation in lieu of traditional clinical hours in pre-licensure nursing programs expanded to their students' first clinical position as there were no significant differences in clinical competency and readiness for practice at six weeks, three months, and six months after graduation.

**Notes (optional):** VTEA Request

**Cost of Request (Nothing will be funded over the amount listed.):** 50000

## Link Actions to District Objectives

District Objectives: 2018-2021

**District Objective 2.1** - Increase the percentage of students who earn an associate degree or certificate (CTE and Non-CTE) by 5 percentage points over three years

**District Objective 2.4** - By 2021, Increase the percentage of CTE students who achieve their employment objectives by 5 percentage points

## Action: 2020-2021 Increase FTES in the RN Program to Meet Community Demands

Add a cohort of 5-10 LVNs to RN cohort in both the Fall 2020 and Spring 2021 semesters.

**Leave Blank:** New Action

**Implementation Timeline:** 2020 - 2021

**Leave Blank:** 09/07/2017

**Leave Blank:**

**Identify related course/program outcomes:** District Objective 2.1: Increase the number of students who earn an associate degree or certificate annually

District Objective 2.4: by 2021 increase the percentage of CTE students who achieve their employment objectives by 5% points

**Person(s) Responsible (Name and Position):** Jonna Schengel Associate Dean of Nursing and Allied Health, Belen Kersten Director of Nursing, Anne Morris Chair of Nursing and Allied Health

**Rationale (With supporting data):** Current and predicted nursing shortages in the area. See labor market data in documents

# Program Review - Nursing

**Priority:** High

**Safety Issue:** No

**External Mandate:** No

**Safety/Mandate Explanation:**

## Update on Action

### Updates

**Update Year:** 2020 - 2021

09/19/2020

**Status:** Continue Action Next Year

A cohort of 10 LVNs was added in both the Fall 2019 and Spring 2020 semesters.

**Impact on District Objectives/Unit Outcomes (Not Required):**

## Resources Description

**Non-instructional equipment** - The increase of nursing graduates meets the needs of the community by increasing the amount of RNs available for employment (Active)

**Why is this resource required for this action?:** Funding request is linked to District objectives through its associated action

**Notes (optional):**

**Cost of Request (Nothing will be funded over the amount listed.):** 80000

## Link Actions to District Objectives

District Objectives: 2018-2021

**District Objective 2.1** - Increase the percentage of students who earn an associate degree or certificate (CTE and Non-CTE) by 5 percentage points over three years

**District Objective 2.4** - By 2021, Increase the percentage of CTE students who achieve their employment objectives by 5 percentage points

**District Objective 4.1** - Increase the use of data for decision-making at the District and department/unit level

## Action: 2020-2021 Full-Time Tenured Medical-Surgical Nursing Faculty

Full Time Nursing Faculty Retirement Replacement Medical-Surgical Instructor Position to maintain the high level of student success in medical-surgical nursing courses.

**Leave Blank:**

**Implementation Timeline:** 2020 - 2021

**Leave Blank:**

**Leave Blank:**

**Identify related course/program outcomes:**

**Person(s) Responsible (Name and Position):** Jonna Schengel Associate Dean of Nursing and Allied Health, Belen Kersten Director of Nursing, Anne Morris Chair of Nursing and Allied Health

**Rationale (With supporting data):** A current Advanced Med-Surg Nursing instructor has notified the division that she will use bank time for 100% of her load for the Fall 2021 semester is planning on retiring prior to the Spring 2022 semester. The success the Nursing Program is dependent on dedicated full-time faculty that coordinate and consistently plan and monitor each semester in both the theory and clinical components. The nursing program is requesting the hire of a full-time tenure track nursing faculty to replace the retiring full-time tenured Med-Surg faculty.

**Priority:** High

**Safety Issue:** No

**External Mandate:** No

**Safety/Mandate Explanation:**

# Program Review - Nursing

**Personnel - Faculty** - Full-Time Tenured Medical-Surgical Nursing Faculty (Active)

**Why is this resource required for this action?:** This is a retirement replacement position.

**Notes (optional):**

**Cost of Request (Nothing will be funded over the amount listed.):**

## Link Actions to District Objectives

District Objectives: 2018-2021

**District Objective 4.3** - College of the Sequoias Board of Trustees, administration, faculty, and staff will engage in best practices and staff development to sustain effective operational systems for institutional assessment and continuous improvement.

## Action: 2019-2020 Facilitate Student Ability to Communicate, Manage Knowledge, Mitigate Error, and Support Clinical Judgement

Purchase a Simulated Electronic Medical Record

**Leave Blank:**

**Implementation Timeline:** 2019 - 2020, 2020 - 2021

**Leave Blank:**

**Leave Blank:**

**Identify related course/program outcomes:** This action relates to the current PLO's and SLO's for Safety, Critical Thinking, Communication and Legal, Ethical, Professional. This action relates to the PLO in the proposed new curriculum #5 Employ Information Management Systems/Patient Care Technology to Facilitate Student Ability to Communicate, Manage Knowledge, Mitigate Error, and Support Clinical Judgement and SLO #5 in all new courses related to technology

**Person(s) Responsible (Name and Position):** Jonna Schengel Associate Dean Nursing/Allied Health, Belen Kersten Director of Registered Nursing, and Anne Morris Chair of Nursing and Allied Health and Assistant Director of the Registered Nursing Program

**Rationale (With supporting data):** The 2019 National Council Licensure Examination for Registered Nurses (NCLEX-RN® Examination) 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. 11).

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

In order to assure that nursing students have the knowledge, skills, and attitudes (KSA's) essential to meet the Quality and Safety Education for Nurses (QSEN) competency for informatics and the BRN requirements for information technology nursing students need to be able to "Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making". Students need to be able to navigate and document a plan of care in an electronic health record (EHR). The EHR is an integral tool used by nurses in a variety of clinical settings. Due to regulations imposed by The Joint Commission, clinical partners are hesitant to allow nursing students to chart on assigned patients in the EHR in order to avoid potential errors or substandard documentation. Simulated EHRs allow undergraduate nursing students to develop proficiency in electronic documentation in a safe and controlled environment.

**Priority:** High

**Safety Issue:** No

**External Mandate:** No

**Safety/Mandate Explanation:**

### Update on Action

#### Updates

**Update Year:** 2020 - 2021

**Status:** Continue Action Next Year

09/18/2020

# Program Review - Nursing

Nursing Director, Nursing and Allied Health Chair and COS IT Representatives met with Kaweah Delta IT and Education representatives on 2/28/20 via zoom conference to see if it would be possible to get a copy of the Kaweah Cerner training shell so that our students can be trained on the Cerner EMR on campus. A follow-up meeting was to be scheduled but due to the COVID pandemic this item was put on hold. The Simulation Committee will follow up on this with Kaweah, evaluate program needs and look into other EMR products available that would meet the documentation needs to support students success.

**Impact on District Objectives/Unit Outcomes (Not Required):**

## Resources Description

**Technology** - A simulated electronic medical record (Active)

**Why is this resource required for this action?:** This action supports the current PLO's and SLO's for Safety, Critical Thinking, Communication and Legal, Ethical, Professional. This action relates to the PLO in the proposed new curriculum #5 Employ Information Management Systems/Patient Care Technology to Facilitate Student Ability to Communicate, Manage Knowledge, Mitigate Error, and Support Clinical Judgement and SLO #5 in all new courses related to technology. The 2019 National Council Licensure Examination for Registered Nurses (NCLEX-RN® Examination) 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. 11).

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

In order to assure that nursing students have the knowledge, skills, and attitudes (KSA's) essential to meet the Quality and Safety Education for Nurses (QSEN) competency for informatics and the BRN requirements for information technology nursing students need to be able to "Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making". Students need to be able to navigate and document a plan of care in an electronic health record (EHR). The EHR is an integral tool used by nurses in a variety of clinical settings. Due to regulations imposed by The Joint Commission, clinical partners are hesitant to allow nursing students to chart on assigned patients in the EHR in order to avoid potential errors or substandard documentation. Simulated EHRs allow undergraduate nursing students to develop proficiency in electronic documentation in a safe and controlled environment.

**Notes (optional):** 190 students= 19,600 per year; (VTEA?)

200 students= 22,500 per year

**Cost of Request (Nothing will be funded over the amount listed.):** 22500

## Link Actions to District Objectives

District Objectives: 2018-2021

**District Objective 2.1** - Increase the percentage of students who earn an associate degree or certificate (CTE and Non-CTE) by 5 percentage points over three years

**District Objective 2.4** - By 2021, Increase the percentage of CTE students who achieve their employment objectives by 5 percentage points

**District Objective 4.3** - College of the Sequoias Board of Trustees, administration, faculty, and staff will engage in best practices and staff development to sustain effective operational systems for institutional assessment and continuous improvement.

## Action: 2019-2020 Improve Student Clinical Reasoning and Clinical Judgement Through the Use of Simulation

Development of a Simulation Program following the standards of best practice.

**Leave Blank:**

**Implementation Timeline:** 2019 - 2020, 2020 - 2021

**Leave Blank:**

# Program Review - Nursing

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## Leave Blank:

**Identify related course/program outcomes:** This action relates to all 8 of the RN Program PLO's and course SLO's.

**Person(s) Responsible (Name and Position):** Jonna Schengel Associate Dean Nursing/Allied Health, Belen Kersten Director of Registered Nursing, and Anne Morris Chair of Nursing and Allied Health and Assistant Director of the Registered Nursing Program

**Rationale (With supporting data):** Simulation Lab-Simulation in nursing education has provided a solution for limited clinical sites as well as meeting the increased need for scenario based learning. Simulation offers the students the opportunity to learn in situations that are comparable to actual patient encounters in a controlled learning environment that promotes critical thinking, clinical judgement and helps to ensure patient safety. The National Council of State Boards of Nursing (2019) defined clinical judgement as "the observed outcome of critical thinking and decision making. It is an iterative process that uses nursing knowledge to observe and assess presenting situations, identify a prioritized client concern and generate the best possible evidence-based solutions in order to deliver safe client care". The next generation National Council Licensure Examination (NCLEX) exam format is scheduled to be initiated in 2023 and will have a greater emphasis on measuring the students ability to make appropriate clinical judgements. In simulation, students are able to transfer classroom knowledge to realistic patient scenarios meeting the required SLOs and clinical hours mandated by the California Board of Registered Nursing. Studies have shown that the use of high-fidelity simulation has led to significant improvements in students problem-solving, critical thinking, clinical judgement, and clinical competence. The skill lab currently has low, medium, and high-fidelity simulators that are underutilized due to lack of a simulation program and oversight, limitations of simulation room layout, lack of simulation lab support staff, technological challenges, and the requirement for additional faculty training. In the report of findings from the continuing approval visit by the Nurse Education Consultant (NEC) for the Board of Registered Nursing at the end of 2017 there was a recommendation to "Evaluate sufficiency of resources specific to simulation (technology) including but not limited to physical space, support staff, and support services to optimize the use of simulation in the students learning experience". Following this recommendation and the INACSL Standards of Best Practice, at the end of Spring 2019 the Nursing Division had a simulation consultant provide a Simulation Strategic Planning Workshop here at COS. During this workshop a needs assessment of our current simulation program was done using tools based on industry best standards and practices (National League of Nurses, National Council of State Boards of Nurses, International Nursing Association for Clinical Simulation and Learning, and the Society for Simulation in Healthcare (see Assessment and Recommendations for Nursing Simulation Program in the document repository). current simulation room space needs to be renovated and expanded to provide adequate designated physical space to support a simulation lab with 2 individual simulation rooms (area in which students engage in the simulation experience), a pre-briefing/debriefing room, control room and storage space. Simulation in nursing education has provided a solution for limited clinical sites as well as meeting the increased need for scenario based learning. Simulation offers the students the opportunity to learn in situations that are comparable to actual patient encounters in a controlled learning environment that promotes critical thinking and helps to ensure patient safety. Students are able to transfer classroom knowledge to realistic patient scenarios meeting the required SLOs and mandated clinical hours. The skill lab currently has low, medium, and high-fidelity simulators that are underutilized due to faculty workload, technological challenges, and the requirement for additional training.

The National League for Nursing (NLN) supports the use of simulation as a teaching methodology to prepare nurses for practice across the continuum of care in today's complex health care environment. Based on the results of the NCSBN study, simulation provides a rich learning opportunity, and can be used as a substitute for traditional clinical experiences in all courses in pre-licensure nursing education, with qualifications:

- a) Ensure optimal learning, simulation experiences should be facilitated by an adequate number of dedicated simulation faculty with training and expertise in the pedagogy of simulation.
- b) Debriefing should be theory based and facilitated by a qualified educator who has received specific education in debriefing techniques.
- c) Debriefing facilitators should have their competence assessed on a regular basis.
- d) All aspects of simulation experiences should be guided by the Standards of Best Practice: Simulation (INACSL,

2013)

Nursing programs using simulation need to ensure that simulation is purposefully integrated into the curriculum with clear connections toward achievement of course and program outcomes. The report of findings from the COS Nursing Program continuing approval visit by the Board of Registered Nursing at the end of 2017 there was a recommendation to "Evaluate sufficiency of resources specific to simulation (technology) including but not limited to physical space, support staff, and support services to optimize the use of simulation in the students learning experience". Following this recommendation, At the end of Spring 2019 the Nursing Division had a simulation consultant provide a Simulation Strategic Planning Workshop here at COS. During this workshop an assessment of our current simulation program was done using tools based on industry best standards and practices (NLN, National Council of State Boards of Nurses, International Nursing Association for Clinical Simulation and



# Program Review - Nursing

Learning, and the Society for Simulation in Healthcare).

**Priority:** High

**Safety Issue:** No

**External Mandate:** No

**Safety/Mandate Explanation:**

## Update on Action

### Updates

**Update Year:** 2020 - 2021

09/18/2020

**Status:** Continue Action Next Year

Expansion and Renovation: Most of the needed construction and renovation was completed during Summer 2020. There is still some minor construction needed that should be completed during the Fall 2020 semester.

Simulation Lab Technician: Hiring for this position will take place at the end of the Fall 2020 semester or the beginning of the Spring 2021 semester. VTEA funding will cover the costs of this position for the 2020-2021 academic year.

Simulation Faculty: This position was approved by senior management and COSTA at 0.8 reassign time for 3 semesters (Fall 2020 thru Fall 2021). Position has been filled and position is being funded through CARES funding.

Simulation Management system including audio, visual and debriefing equipment: This equipment has been purchased and is scheduled to be installed during the Fall 2020 semester (Tentative date: end of October beginning of November).

**Impact on District Objectives/Unit Outcomes (Not Required):**

## Resources Description

**Facilities -** Expansion and Renovation of Current Simulation Space (Active)

**Why is this resource required for this action?:** The current simulation room space needs to be renovated and expanded to provide adequate designated physical space to support a simulation lab with 2 individual simulation rooms (area in which students engage in the simulation experience), a pre-briefing/debriefing room, control room and storage space. Simulation in nursing education has provided a solution for limited clinical sites as well as meeting the increased need for scenario based learning. Simulation offers the students the opportunity to learn in situations that are comparable to actual patient encounters in a controlled learning environment that promotes critical thinking and helps to ensure patient safety. Students are able to transfer classroom knowledge to realistic patient scenarios meeting the required SLOs and mandated clinical hours. The skill lab currently has low, medium, and high-fidelity simulators that are underutilized due to faculty workload, technological challenges, and the requirement for additional training.

The National League for Nursing (NLN) supports the use of simulation as a teaching methodology to prepare nurses for practice across the continuum of care in today's complex health care environment. Based on the results of the NCSBN study, simulation provides a rich learning opportunity, and can be used as a substitute for traditional clinical experiences in all courses in pre-licensure nursing education, with qualifications:

a) Ensure optimal learning, simulation experiences should be facilitated by an adequate number of dedicated simulation faculty with training and expertise in the pedagogy of simulation.

b) Debriefing should be theory based and facilitated by a qualified educator who has received specific education in debriefing techniques.

c) Debriefing facilitators should have their competence assessed on a regular basis.

d) All aspects of simulation experiences should be guided by the Standards of Best Practice: Simulation (INACSL, 2013)

Nursing programs using simulation need to ensure that simulation is purposefully integrated into the curriculum with clear connections toward achievement of course and program outcomes. The report of findings from the COS Nursing Program continuing approval visit by the Board of Registered Nursing at the end of 2017 there was a recommendation to "Evaluate sufficiency of resources specific to simulation (technology) including but not limited to physical space, support staff, and support services to optimize the use of simulation in the students learning experience". Following this recommendation,

# Program Review - Nursing

At the end of Spring 2019 the Nursing Division had a simulation consultant provide a Simulation Strategic Planning Workshop here at COS. During this workshop an assessment of our current simulation program was done using tools based on industry best standards and practices (NLN, National Council of State Boards of Nurses, International Nursing Association for Clinical Simulation and Learning, and the Society for Simulation in Healthcare). The following are based on the results of the program assessment and best practice standards:

a) In order to provide students with a training environment that supports simulation and provides learners with the physical space to promote fidelity, encourage active learning and support repetitive practice and reflection while meeting the International Nursing Association for Clinical Simulation and Learning (INACSL) & National Council of State Boards of Nursing (NCSBN) Standards and Recommendations for Best Practices in Simulation.

**Notes (optional):** first Stage

**Cost of Request (Nothing will be funded over the amount listed.):** 100000

**Related Documents:**

[16\\_Simulation\\_Guidelines.pdf](#)

[COS ROF from BRN.pdf](#)

[INACSL Standards of Best Practice.pdf](#)

[COS Recommendations 6-2019.pdf](#)

**Personnel - Classified/Confidential - Simulation Lab Technician (Active)**

**Why is this resource required for this action?:** The International Nursing Association for Clinical Simulation and Learning (INACSL) & National Council of State Boards of Nursing Standards and Recommendations for Best Practices in Simulation both address the need for having a simulation technician to support daily operations of the Simulation lab; maintain human simulators and lab equipment; manage simulation lab supplies; perform pre-simulation activities; execute the simulation experience; perform post-simulation activities; collaborate with faculty and staff; assist with the maintenance of simulation lab documentation and resources; maintain professional development; other duties as assigned by Simulation Program Coordinator. This position has been funded through VTEA for 2019-2020.

**Notes (optional):** This position will initially be paid through grant and VTEA.

**Cost of Request (Nothing will be funded over the amount listed.):** 23650

**Related Documents:**

[16\\_Simulation\\_Guidelines.pdf](#)

[COS ROF from BRN.pdf](#)

[INACSL Standards of Best Practice.pdf](#)

[Learning Gets Real- A Hands-On Simulation Guide for Teaching Tomorrow's Clinical Practitioners.pdf](#)

[COS Recommendations 6-2019.pdf](#)

**Personnel - Faculty - A Simulation Faculty: Faculty Coordinator for Simulation Curriculum Design, Integration Across the Curriculum, and Faculty Training . (Active)**

**Why is this resource required for this action?:** According to the 2019 Simulation Guidelines recommended by the Board of Registered Nursing, "Simulation activities shall be managed by an individual who is academically and experientially qualified. The individual shall demonstrate continued expertise and competence in the use of simulation while managing the program".

The faculty fulfilling the obligations of this position will be instrumental in the simulation lab development; policies and procedure creation, oversight, revision and evaluation that follow INACSL Standards of best practice; design job descriptions; simulation oversight and management of schedule; maintain and manage financial resources; design and development of simulation scenarios to meet student needs; facilitate pre and post-simulation activities including debriefing; conduct simulations for Transitions to Nursing and Concepts of Adult Health 3 courses; use evaluative feedback for quality improvement; faculty education and professional development; coordinate community outreach activities; maintain professional development. (See Simulation Guidelines Recommended by the California BRN in document repository).

**Notes (optional):** Looking at 0.8 reassign time for 3 semesters (Fall 2020-Fall 2021) for this position.

**Cost of Request (Nothing will be funded over the amount listed.):** 50000

**Related Documents:**

[16\\_Simulation\\_Guidelines.pdf](#)

[COS Recommendations 6-2019.pdf](#)

[COS ROF from BRN.pdf](#)

[INACSL Standards of Best Practice.pdf](#)

# Program Review - Nursing

[Learning Gets Real- A Hands-On Simulation Guide for Teaching Tomorrow's Clinical Practitioners.pdf](#)

**Technology** - Simulation Management system including audio, visual and debriefing equipment (Active)

**Why is this resource required for this action?:** Ongoing assessment of progress toward established business and educational goals is fundamental in measuring success. Utilizing a dashboard focused on metrics against goals can assist with bridging strategy and action. The goals you establish will ultimately drive the data. The NCSBN Simulation Guidelines for Pre-Licensure Nursing Program Preparation Checklist recommends that leaders establish a long-range plan for the anticipated use of simulation in coming years (Journal of Nursing Regulation: Volume 6/Issue 3, October 2015). A functioning simulation lab/center requires on-going scheduling and equipment accountability. The simulation lab team needs tools to store content and standardize offerings across the entire facility. Having evaluation tools in a consistent format and location eases the burden of staff and faculty. A management system that can assist with: tracking and evaluating simulation utilization to contribute to quality and process improvement; Resource allocation to ensure adequate resources to support the program; and learning outcomes to ensure the student, program, and institutional needs are being met. Using video and audio to record clinical simulation labs enables both instructors and students to review recorded lab sessions and has been demonstrated to increase greatly the effectiveness of learning during clinical simulation lab. The simulation encounter can also be electronically viewed in a remote classroom during a live classroom session. Simulation action can be recorded, studied, replayed and logged to give facilitators and learners every opportunity to evaluate each learning experience completely, meet SLO's, and assist students with improving their clinical judgement.

**Notes (optional):**

**Cost of Request (Nothing will be funded over the amount listed.):** 60000

**Related Documents:**

[16\\_Simulation\\_Guidelines.pdf](#)

[COS Recommendations 6-2019.pdf](#)

[COS ROF from BRN.pdf](#)

[INACSL Standards of Best Practice.pdf](#)

[Learning Gets Real- A Hands-On Simulation Guide for Teaching Tomorrow's Clinical Practitioners.pdf](#)

## Link Actions to District Objectives

District Objectives: 2018-2021

**District Objective 2.1** - Increase the percentage of students who earn an associate degree or certificate (CTE and Non-CTE) by 5 percentage points over three years

**District Objective 2.4** - By 2021, Increase the percentage of CTE students who achieve their employment objectives by 5 percentage points

**District Objective 4.1** - Increase the use of data for decision-making at the District and department/unit level

**District Objective 4.3** - College of the Sequoias Board of Trustees, administration, faculty, and staff will engage in best practices and staff development to sustain effective operational systems for institutional assessment and continuous improvement.

## Action: 2019-2020 Provide Students Interested in Nursing & Allied Health Careers With a Clearer Path for Success

Institutionalize the Adjunct Nursing and Allied Health Counselor position.

**Leave Blank:**

**Implementation Timeline:** 2019 - 2020, 2020 - 2021

**Leave Blank:**

**Leave Blank:**

**Identify related course/program outcomes:**

**Person(s) Responsible (Name and Position):** Jonna Schengel Associate Dean Nursing/Allied Health, Belen Kersten Director of Registered Nursing, and Anne Morris Chair of Nursing and Allied Health and Assistant Director of the Registered Nursing Program

**Rationale (With supporting data):** COS has multiple allied health programs and over a 1000 nursing majors. Not all declared nursing majors or PTA majors will get into the programs due to the difficult prerequisite science courses and the competitive

# Program Review - Nursing

application process. The student may not be aware of other health care options that are available to them to begin their career in health care and the pathways to advance their career in healthcare. A Nursing & Allied Health Counselor can provide a pathway for students and an alternative pathway for students whose primary goal can not currently be achieved.

The data is in the research and literature. Bailey, Thomas R., Smith Jaggars, S., and Jenkins, D. 2015. Redesigning America's Community Colleges: A Clearer Path to Student Success. Cambridge, MA: Harvard university Press.

This book and multiple research papers support the idea guided pathways reforms provide a systematic process through which students can make more informed choices, take less units, and have less debt. (See attached document for counselor duties and rationale). This adjunct position can be supported with grant funding.

**Priority:** High

**Safety Issue:** No

**External Mandate:** No

**Safety/Mandate Explanation:**

## Update on Action

### Updates

**Update Year:** 2020 - 2021

09/18/2020

**Status:** Continue Action Next Year

Part-time/adjunct counselor for the Nursing and Allied Health Division position was filled for the 2019-2020 year- and is currently grant funded.

**Impact on District Objectives/Unit Outcomes (Not Required):**

## Resources Description

**Personnel - Faculty** - Adjunct Counselor for Nursing and Allied Health (Active)

**Why is this resource required for this action?:** Data supports the rational for the action and need for resource request. COS has multiple allied health programs and over a 1000 nursing majors. Not all declared nursing majors or PTA majors will get into the programs due to the difficult prerequisite science courses and the competitive application process. The student may not be aware of other health care options that are available to them to begin their career in health care and the pathways to advance their career in healthcare. A Nursing & Allied Health Counselor can provide a pathway for students and an alternative pathway for students whose primary goal can not currently be achieved.

**Notes (optional):**

**Cost of Request (Nothing will be funded over the amount listed.):** 75000

**Related Documents:**

[RN Counselor rationale 2019.pdf](#)

## Link Actions to District Objectives

District Objectives: 2018-2021

**District Objective 1.1** - The District will increase FTES by 1.75% over the three years

**District Objective 2.1** - Increase the percentage of students who earn an associate degree or certificate (CTE and Non-CTE) by 5 percentage points over three years

**District Objective 2.2** - Increase the number of students who transfer to a four-year institution by 10 percent over three years

**District Objective 2.4** - By 2021, Increase the percentage of CTE students who achieve their employment objectives by 5 percentage points

## Action: 2019-2020 Strengthen Academic Experiences for RN Students Through Faculty Development

# Program Review - Nursing

Improve academic experiences for RN students by providing faculty development courses in areas of debriefing, simulation, concept-based teaching strategies and current RN practice. (VTEA Request)

Leave Blank:

Implementation Timeline: 2019 - 2020, 2020 - 2021

Leave Blank:

Leave Blank:

Identify related course/program outcomes: This action will relate to all of the new SLO's and PLO's in the new RN curriculum

Person(s) Responsible (Name and Position): Jonna Schengel Associate Dean Nursing/Allied Health, Belen Kersten Director of Registered Nursing, and Anne Morris Chair of Nursing and Allied Health and Assistant Director of the Registered Nursing Program

Rationale (With supporting data): The Nursing faculty needs to stay current in their practice in order to maintain BRN approval to teach in different content areas. The current RN curriculum is undergoing a change to a concept-based curriculum with the integration of simulation. Faculty development is needed to support faculty with teaching the concept-based curriculum that incorporates simulation and to provide learning experiences that support students meeting their SLO's, PLO's, and be successful

Priority: High

Safety Issue: No

External Mandate: No

Safety/Mandate Explanation:

Update on Action	
<b>Updates</b>	
Update Year: 2020 - 2021	09/18/2020
Status: Continue Action Next Year	
Multiple faculty members were able to attend conferences and webinars related to concept-based teaching, virtual simulation products, strategies for teaching virtually (Online) and simulation. Faculty development will continue to be at the forefront as we continue to roll out the concept-based curriculum (CBC), continue to learn how to facilitate courses virtually (online or hybrid), develop skills for equitable online teaching, and continue to work on expanding knowledge related to simulation.	
Impact on District Objectives/Unit Outcomes (Not Required):	

## Link Actions to District Objectives

District Objectives: 2018-2021	
District Objective 2.1 - Increase the percentage of students who earn an associate degree or certificate (CTE and Non-CTE) by 5 percentage points over three years	
District Objective 2.4 - By 2021, Increase the percentage of CTE students who achieve their employment objectives by 5 percentage points	
District Objective 4.3 - College of the Sequoias Board of Trustees, administration, faculty, and staff will engage in best practices and staff development to sustain effective operational systems for institutional assessment and continuous improvement.	

## Action: 2019-2020 Increase student access to a Home Health Aide Program

Development of a Home Health Aide Training Program through the curriculum process and hiring a full-time tenured C.NA and H.H.A faculty position.

Leave Blank:

Implementation Timeline: 2019 - 2020, 2020 - 2021

Leave Blank:

Leave Blank:

Identify related course/program outcomes:

Person(s) Responsible (Name and Position): Jonna Schengel Associate Dean Nursing/Allied Health, Stephanie Sierra

Rationale (With supporting data): The intent of this program is to build upon the knowledge, skills, and abilities of individuals



# Program Review - Nursing

who are C.N.A's. According to the California Future Health Workforce Commission Executive Summary (2019) the projected need for H.H.A's in California is 600,000 by 2030. It would save the state economy 2.7 billion over 10 years due to enhanced training and care provided in the home and reduce emergency room visits and unnecessary hospitalizations. Any community college with a C.NA program must add the HHA program to meet with needs of students and community. (See attached, #8, pg. 3. Hiring a full-time tenured C.NA and H.H.A faculty position. to help meet the increased student demand for C.N.A course offerings, on 2 of the three campuses within our district, and to facilitate the Home Health Aide Training Program to meet both the student and community demand.

**Priority:** Medium

**Safety Issue:** No

**External Mandate:** No

**Safety/Mandate Explanation:**

## Resources Description

**Personnel - Faculty** - Hiring a full-time tenured C.N.A and H.H.A faculty position. (Active)

**Why is this resource required for this action?:** A temporary full-time Certified Nursing Assistant (C.N.A) faculty position was approved for the 2019-2020 academic year to help meet the demands of additional C.N.A course offerings. We have increased the sections of C.N.A offered and are currently offering 4 sections of C.N.A in the fall, 5 sections in the spring and 1 session in the summer. We are requesting a full-time tenured C.N.A and H.H.A faculty position to replace the temporary full-time C.N.A position. This faculty position is needed to help meet the increased student demand for C.N.A course offerings, on 2 of the three campuses within our district. This faculty position will also facilitate the development and instruction of the Home Health Aide Training Program in order to meet both the student and community demand.

**Notes (optional):**

**Cost of Request (Nothing will be funded over the amount listed.):** 110000

**Related Documents:**

[HHA + CNA statewide data CA 2019.pdf](#)

[Nursing and Allied Health LMI.pdf](#)

[Nursing Advisory Committee 4-9-19 Meeting Minutes \(2\).doc](#)

## Link Actions to District Objectives

District Objectives: 2018-2021

**District Objective 1.1** - The District will increase FTES by 1.75% over the three years

**District Objective 2.1** - Increase the percentage of students who earn an associate degree or certificate (CTE and Non-CTE) by 5 percentage points over three years

**District Objective 2.4** - By 2021, Increase the percentage of CTE students who achieve their employment objectives by 5 percentage points

**District Objective 4.3** - College of the Sequoias Board of Trustees, administration, faculty, and staff will engage in best practices and staff development to sustain effective operational systems for institutional assessment and continuous improvement.