Comprehensive Program Review Report



Program Review - Nursing

Program Summary

2019-2020

Prepared by: Anne Morris

What are the strengths of your area?: Student Success: The Nursing Program has a high success rate with almost all the students completing the program. During the academic year of 2018-2019 the program had a total of 173 students enrolled in the Fall semester with 41 graduates and 178 total students in the Spring semester with 39 graduates. Students that did not complete the program either withdrew for personal reasons (health and financial) 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. In the academic year 2018-2019 only one student failed their second attempt in the program. There were two withdraws for reasons other than academics. The RN program has an attrition rate of 11.25% which is higher than 6.25% reported for 2017-2018 but 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 97-99% with the lower success rate seen with first semester students that are not used to the rigor of the program. In addition to program success and student retention the RN program continued to have above the state average pass rates of 97.47% 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 higher than the pass rate of 96.1% reported from 2017-2018. 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, 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 the students at the Access and Ability Center. 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). This tool is based on a 100-point system. The average point spread scored for acceptance in the past two semesters was 67.3-94 points. There was a total of 357 generic student applicants for the 2018-2019 academic year and 80 students were accepted into the program. There was a total of 66 LVN to RN applications for the 2018-2019 academic year and 20 were accepted with 1 applicant declining the seat.. The LVNs begin the program in the 2nd semester of the program. The application process is the same for the LVN to RN students. The multi-criteria point spread for the accepted LVN students was 63.3-89.3

Workload Measures: The RN program has eight core nursing courses ranging from 3 to 11 units. All the courses have a lab (clinical) component. 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 one full time tenure tract nursing faculty at the end of last year to start this year giving the program a total of 12. The program is fully staffed with full-time nursing faculty providing the optimal full-time faculty/student ratio in both the theory and clinical components of the courses. These faculty all carry full load of core nursing course units and some overload. The adjunct faculty consisted of 6 which is lower than the previous academic year. This reduction is attributed to faculty hires.

Student Evaluations 2018-2019: 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 related to conceptbased teaching and simulation in order to prepare for the upcoming curriculum change slated to being in the Fall 2020-Spring 2021 academic year.

Resource Efficiency: The Nursing Program is a CTE program that qualifies for VTEA grant money. The program has benefited greatly with needed skill lab equipment, faculty education, and student assessment testing, ATI live review and a consultant for the upcoming program curriculum change. 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 2018-2019 year and financial resources provided by one of our clinical partners. 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 2018-2019 was 315 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. Noted this data is a year behind the academic year being evaluated. 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 8.25 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.

Internal Relations: Many of the full-time faculty are members of campus committees representing the RN Program, they inform

the nursing faculty of the current topics and processes of these committees. The COS committees that include a representative for nursing faculty are: Curriculum, Distance Education, Academic Senate, Instructional Council, FEC, and Outcomes and Assessment. The RN program representatives that attend these meetings provide updates and information to the program Division meeting that is scheduled once a month.

External Relations: Approval from the California Board of Registered Nursing (BRN) is required for all faculty, curriculum changes, clinical sites used, and changes to cohort size (the number of students we admit into the program). The RN Program partners with multiple clinical sites for instruction in the community including Kaweah Delta Medical Center, Hanford Adventist Health Hospital, Central Valley Regional Center, Kaweah Delta Mental Health, Visalia Unified School Nurses, Tulare Office of Education Nurses, and 12 step addiction meetings. The clinical placements are coordinated by the San Joaquin Valley Nursing Education Consortium which is a computerized clinical placement program for all the hospitals and nursing programs in the region.

The RN Program is a member and hosts the annual Advisory Board. Members include representatives of the hospitals and other nursing programs in the community. (See document repository for Advisory Board minutes)

The RN Program also has an affiliation with the Health Workforce Initiative beneficial for the faculty for their required continual education units for RN license renewal with access to multiple courses at no charge.

CNA Course Success Rates:

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 the student demand. Two sections were offered in the Fall 2018 semester, 3 sections were offered in the Spring 2019 semester, and 1 section was offered during Summer 2019. The Fall 2018 semester had a total of 29 students with 100% completers. The Spring 2019 semester had a total of 45 students with 44 (97.8%) completers and 1 withdraw. The Summer 2019 session had a total of 16 students with 13 completers (81.3%), 2 incompletes and 1 withdrawal. The students who successfully completed the course are eligible to sit for the state certifying exam. To assist students with their certification testing, COS became 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. For the Fall 2018 semester, of the 29 completers, 26 students passed the certification exam (89.7% pass rate) which is higher than the percentage for Fall 2017 (73.3%). For the Spring 2019 semester, of the 44 completers 43 took the exam. Of the 43 who took the exam (1 student did not test), 41 students passed the certification exam (95.3% pass rate) which is higher than the percentage for Spring 2018 (80.7%). For the Summer 2019 session, of the 13 completers, 11 passed the certification exam (84.6% pass rate).

Resource Efficiency: The CNA program has a low teacher/student ratio, 15-1 as mandated by the state. A temporary full-time instructor was hired for the CNA Program at the end of the Spring 2019 semester 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, and PT programs.

Enrollment Patterns: The program (1 course) accepts a maximum of 15 students per section with 6 sections being offered during 2018-2019. 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-3 students, Spring-4 students, and Summer-3 students).

Workload Measures: The program was taught by 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 2018-2019: Student evaluations consist of 5 questions with responses based on a Likert Scale except for question 1 which asked the student's goal for taking the course. (See document repository for 2018-2019 Student Survey)

Academic Quality: The CNA program prepares the student as an entry-level worker, providing basic nursing care to patients in acute care and long-term care settings by presenting course information in a variety of methods and reinforcing that information with practices whenever possible.

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)

What improvements are needed?:

RN

1. Continually improving student success and NCLEX pass rate. The program's attrition rate increased from 6.25% reported in 2017-2018 to 11.25%. Much of this can be attributed to students that were unable to complete the program within the same academic year of expected completion. NCLEX pass rates have increased from 96.1% in 2017-2018 to 97.47% but they are not at the of goal of 100%. 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.

2. Concept-Based Curriculum-The faculty are continuing to work with a nurse consultant to revise the Nursing Program curriculum that was developed in 2002. The curriculum is dated and does not represent all the new health care reform standards and mandates. This process began in the 2017-2018 academic year. The contracted nurse consultant will be holding a 2-day workshop for nursing faculty Fall 2019 that will encompass concept-based teaching strategies and test item writing. This workshop will be funded through VTEA. (See document repository for Curriculum Revision Timeline).

3. 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 oversite, 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 International Nursing Association for Clinical Simulation and Learning (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). 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, 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 current simulation room space needs to be be renovated and expanded to provide adequate physical space to support a simulation lab with 2 individual simulation rooms (area in which students engage in the simulation experience), a pre-briefing area (Designated space where the student can gather data and reflect on what their next steps will be prior to the human patient simulation), a debriefing area (Designated area where all students who participated in the simulation can be engage in guided reflection on the simulation), control room (space that will accommodate the equipment for running and monitoring the simulated patient scenario, the simulation technician and a faculty member who will facilitate the debriefing

session), and storage space. Studies have shown that the use of high-quality simulation leads to significant improvements in students problem-solving, critical thinking, clinical judgement and clinical competence. Two courses in the new curriculum will incorporate the use of simulation and there are plans to incorporate simulation as a continual thread throughout the whole nursing program and eventually incorporate all appropriate disciplines in the Nursing and Allied Health Division. In addition, the California Board of Registered Nursing currently allows that simulation performed, following the standards of best practice, can be used to replace up to 25% of clinical time and there is evidence to support using up to 50% of clinical time in simulation. (See NCSBN Simulation Guidelines for Pre-licensure Nursing Education Programs, INACSL Standards of Best Practice: Simulation, and Learning Gets Real: a Hands on Simulation Guide for Teaching Tomorrow's Clinical Practitioners in document repository).

b) Part-time Simulation Lab Technician -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; preform 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. This position is being funded through VTEA funding.

c) Simulation Coordinator- 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. This would be a release-time compensated faculty position.

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- 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 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).

CNA

According to the April 2019 Central Valley Labor Market Analysis for Certified Nursing Assistants and Home Health Aides, the C.N.A occupation is expected to grow over 11% in the next 5 years, with 860 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)

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.

Describe any external opportunities or challenges.: RN

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 reinstated the Student Nurse Intern position on multiple nursing units in response to our recommendation and also the hospital's need for nurses. This allows the nursing student during the last semester 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. This year the program will have and increase of 20 LVN to RN students, for the 2019-2020 year. Fund have be secured through Strong Workforce and one of the clinical partners. A challenge related to the increase in FTES is that it is sometimes difficult for our clinical partners to provide the clinical opportunities needed for the students to meet their clinical objectives and SLO's with our current FTES.

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.

CNA

1. There is an increased demand for CNA hires in the community. According to the April 2019 Central Valley Labor Market Analysis for Certified Nursing Assistants and Home Health Aides, the C.N.A occupation is expected to grow over 11% in the next 5 years, with 860 projected annual job openings and Home Health Aide occupation is expected to grow by 80% with 353 annual job openings.

Overall SLO Achievement: Registered Nursing (RN) Program

The nursing program 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) These SLOs are semester leveled, meaning each semester's expectations of the student increase with complexity. The faculty assess all 8 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

Certified Nurse Assistant (CNA) Program

The temporary full-time and adjunct faculty of the CNA program are responsible in maintaining and updating the SLO evaluations of the program

Changes Based on SLO Achievement:

Overall PLO Achievement: Belen Kersten and Jonna Schengel

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.

Certified Nurse Assistant (CNA) Program

The assessment cycle is the same as the RN program assessment cycle

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 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:

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: 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).

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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 Leave Blank: 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 oversite, 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 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 prelicensure 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 Learning, and the Society for Simulation in Healthcare).

Priority: High Safety Issue: No External Mandate: No Safety/Mandate Explanation:

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 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 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; preform 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:

<u>16_Simulation_Guidelines.pdf</u> <u>COS ROF from BRN.pdf</u> <u>INACSL Standards of Best Practice.pdf</u> <u>Learning Gets Real- A Hands-On Simulation Guide for Teaching Tomorrow's Clinical Practitioners.pdf</u> <u>COS Recommendations 6-2019.pdf</u>

Personnel - Faculty - A Simulation Coordinator is needed to help facilitate the development of the simulation lab and to oversee the daily operations. (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 0.4 release time 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

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 Leave Blank: Leave Blank: Identify related course/program outcomes: Person(s) Responsible (Name and Position): Jor

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

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: 2019 - 2020
 08/09/2019

 Status: Continue Action Next Year

 Part-time/adjunct counselor for the Nursing and Allied Health Division position was filled for the 2019-2020 year-paid with funding from industry partners.

 Immed an District Objectives (Net Deriving)

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: <u>RN Counselor rationale 2019.pdf</u>

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

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

Leave Blank:

Implementation Timeline: 2019 - 2020 Leave Blank: Leave Blank: Identify related course/program outcom

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:

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 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 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 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: High 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.

Action: Continual Curriculum Revision Development mandated by the BRN (VTEA)

Develop a comprehensive program curriculum using a concept-based curricula

Leave Blank: Mandated by Law/Accreditation Implementation Timeline: 2018 - 2019 Leave Blank: 03/01/2018 Leave Blank: Identify related course/program outcomes: Our program outcomes will change from the current 8 SLOs. They are currently in the development phase District Objective 2.4: Increase CTE course success rates and program completion Person(s) Responsible (Name and Position): Terri Paden Rationale (With supporting data): The BRN has recommended the program updates the current curriculum as it has not been updated for over 10 years. The recommendation was made during our re-accreditation visit last November. The program has 5 years from that visit to have an updated curriculum implemented. Priority: High Safety Issue: No External Mandate: Yes

Safety/Mandate Explanation: Accreditation organization recommendation

Update on Action

Updates

Update Year: 2019 - 2020

Status: Continue Action Next Year

Continuing to work on curriculum change. Completed phase 2 of curriculum revision with consultant, courses and program launched on CourseLeaf, and major curriculum change plan sent to BRN summer 2019. On track for new curriculum launch beginning Fall 2020.

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

10/29/2019

08/09/2019

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 4.2 - Improve organizational effectiveness by strengthening operations of and communication between District departments, divisions, and constituents

Action: Maintain accreditation standards through nursing specialty of a Full Time Pediatrics Instructor

A pediatric nursing instructor is needed for a recently vacated position (new division chair has vacated the position)

Leave Blank: Mandated by Law/Accreditation Implementation Timeline: 2018 - 2019 Leave Blank: Leave Blank: Identify related course/program outcomes: Pediatrics is a specialty nursing content area mandated by the BRN to be included in the RN program curriculum. A pediatrics nursing instructor must be approved by the BRN to be competent to teach in this area. A qualified Pediatrics nursing instructor will contribute to the program success in direct relation to District Objective 2.1: Increase CTE course success rates and program completion annually Person(s) Responsible (Name and Position): Terri Paden Rationale (With supporting data): California Nursing Practice Act, Article 3 Prelicensure Nursing Programs, section 1426 Required Curriculum which include theory and clinical practice in Pediatrics Nursing Priority: High Safety Issue: Yes

External Mandate: Yes

Safety/Mandate Explanation: Pediatric nursing is a mandated content area required in the RN program curriculum

Update on Action

Updates

Update Year: 2019 - 2020 Status: Action Completed Full-Time Tenured Track Faculty hired at the end of the Spring 2019 semester Impact on District Objectives/Unit Outcomes (Not Required):

08/09/2019

Resources Description

Personnel - Faculty - Full time tenure tract faculty position (Active)
Why is this resource required for this action?: Resource request is connected to achieving the action Notes (optional):
Cost of Request (Nothing will be funded over the amount listed.): 130000

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 2.4 - 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