

BASIC PROGRAM INFORMATION

Program Review is a self-study of your discipline. It is about documenting the plans you have for improving student success in your program and sharing that information with the college community. Through the review of and reflection on key program elements, program review and planning identifies program strengths as well as strategies necessary to improve the academic discipline, program, or service to support student success. With that in mind, please answer the following questions:

Discipline Name: Nurising

Department Name: Nursing

Division Name: MNHS

Please list all participants in this Program Review :

Name	Position
Karen Donovan	Dept. Chair
Julie Van Houten	Asst. Chair
Julie Robinson	Asst. Chair
Lorraine Pagni-Keifer	FT Faculty

Number of Full Time Faculty: 11

Number of Part Time Faculty: 21

Please list the Classified positions (and their FTE) that support this discipline:

ADA-Kelly Donaghy 100%
Career technical Program Specialist-Gail Rodrigues 100%

What additional hourly staff support this discipline and/or department:

Sue Morgan-RN lab assistant

Discipline mission statement: [Link to "How to Build a Mission Statement"](#)

To provide a high quality nursing education to qualified and diverse students for the development of entry-level nurses who are prepared to meet the evolving healthcare needs of the community. The faculty strive to create a student-centered environment of collaboration, lifelong learning, and mentorship to promote academic excellence and effective, compassionate nursing care.

List any new degrees and certificates offered within this discipline since your last comprehensive review:

None

Discipline Level Data: <https://sharepoint2.palomar.edu/sites/IRPA/SitePages/PRP%20Summary%20Source.aspx>

SECTION 1: PROGRAM REFLECTION

1A. Program Analysis: Reflect upon and provide an analysis of your summary data.

When reviewing the data report, we analyzed enrollment numbers, full-time FTE, and part-time FTE information. As of Fall 2015, enrollment began to trend back up and we are at the highest level as of Spring 2016. We increased the cap of some of our classes in 2016 and we are going to be offering our N110 LVN-RN transition course in both the fall and spring moving forward. We were able to hire full-time faculty to fill our vacant positions. This has caused our ratio of FT to PT faculty to improve although this change is not reflected in the fall data. We had some of our faculty retire and we had been using full-time temporary faculty during the 2015 school year.

Our total success rate and total retention rate have been string with a success/retention rate of 98.4% in the fall and 90.1% in the spring. This is well above the institutional set standard of 70%.

We have seen improvement in our clinical placement opportunities although this is still an area of concern. The clinical sites continue to limit the number of students allowed on the floor each clinical day and this has led to the continued need to utilize part-time adjunct clinical instructors for clinical. Our total FTEF taught by part-time faculty was at 20.2% in Fall 2015 and 36.39% in Spring 2016.

1B. Standards: ACCJC requires that colleges establish institutional and program level standards in the area of course success rates. These standards represent the lowest success rate (% A, B, C, or Credit) deemed acceptable by the College. In other words, if you were to notice a drop below the rate, you would seek further information to examine why the drop occurred and strategies to address the rate.

Discipline Level Course Success Rate:

- A. The College's institutional standard for course success rate is **70%**.
- B. Review your discipline's course success rates over the past five years.
- C. Identify the minimum acceptable course success rate for your discipline. When setting this rate, consider the level of curriculum (e.g., basic skills, AA, Transfer) and other factors that influence success rates within your area. If you set your discipline standard below the College's standard, please explain why.

Standard for Discipline Course Success Rate: 70

Why?

1C. Program Update: Describe your proudest moments or achievements related to student success and outcome.

The Board of Registered Nurses (BRN) is a state agency and their program approval is mandatory in order to provide a nursing program for students. The Accreditation Commission for Education in Nursing (ACEN) is an elective national accreditation; however, without the ACEN accreditation, many local hospitals will not allow students for clinical rotations, and graduates would not be considered for employment at some local hospitals. Also, without ACEN accreditation graduates will not have the option of seeking advanced education and employment from military nursing programs.

The ACEN held their last accreditation site visit in Fall 2015. The visit went well and the visiting team recommended re-approval for another eight years with a follow-up report in two years. We were found to be non-compliant in Standard 6 (Outcomes) and recommendations were made for improved documentation of our Systematic Program Evaluation (SPE). There will be a follow-up report due in February 2018.

The BRN approval site visit was in April 2016. The visit went very well and our program was approved. We are all very proud that there were absolutely no findings. The BRN site visitors made a recommendation to administration to consider having two assistant chairs in order to support the workload and to increase the number of faculty prepared and eligible to take on the role of Department Chair.

The Interim Dean and the Department Chair held a student focus group in Spring 2016. Students from all semesters were invited to attend. Ground rules were given and students were not to discuss specific faculty members or semesters. Many great ideas came out of this focus group and laid the groundwork for some positive program changes.

One of these changes was update uniforms. The students have been complaining about the all white uniforms for decades. This

spring, we made a significant change to pewter grey uniforms that the students are to wear while on campus for lecture, lab, and while in clinical. This has been a very positive change and well received by the students, faculty, staff, the college, and our community partners. In addition, we feel that this change has made campus open lab safer for the students, faculty and staff as our students are easily identifiable. We also feel that this has been positive advertising of our program and that the students feel proud to be wearing their Palomar College Nursing Student uniforms on campus. They look and seem to act in a more professional manner since this change has been made.

Another change that came out of the focus group was the revision of the student handbook. This is currently under revision and will be more student-centered.

We have been able to continue to employ a part-time lab assistant to help out in open lab. This has been a real benefit to the students in improving their skills performance, care planning and nursing process, clinical reasoning, and in overall support while in the open lab sessions.

We have increased our outreach and marketing efforts. Our ADA, Career Technical Specialist, and our faculty have sought out opportunities to provide community outreach and to recruit students. We were able to obtain funds for promotional items as well such as Chap Stick, lanyards, and pencils.

We collaborated with Mira Costa Community College and California State University, San Marcos through the NCHEA grant to provide an event on empathy training and soft skills by securing a venue and a professional author and speaker, Marcus Engel, to present his talk and book "I'm Here". The event was a great success and we have over 2/3 of our students attend.

The Healthy Workforce Initiative (HWI) agreed to fund an ATI Test-Taking Strategies Workshop for 100 students this Spring. We had 86 students attend the workshop from all four semesters. HWI has agreed to provide this course for our students again in the Fall.

1D. Program Improvement: What areas or activities are you working on this year to improve your program? Please respond to new data as well as feedback from last year's program review.

Areas to improve the nursing program focus on increased student enrollment and retention. We have developed policy to allow veterans to challenge the first semester course in order to earn advance standing for second semester entrance. The LVN transition course offering has been increased from once per year to twice per year. The NED is working to offer additional educational tracks to allow for the individual needs of the LVN and veterans. This will help to improve retention rates, student success and satisfaction for these populations. The identification of high risk students early each semester along with the early intervention have also worked to improve the retention rates by providing college resources to students. Without which many of these students are unaware of services available to them.

NED policies and nursing education curriculum have been reviewed. Revisions are in progress to meet the current department and educational needs. A curriculum consultant has been sought to work with the department in these areas. The orientation process for new faculty and ongoing tenure support has been reviewed, and policy written to ensure ongoing support is provided to ensure faculty success. A civility consultant has been retained to work with NED faculty, staff and students to provide a civil environment and to teach faculty how to sustain civility as well as foster this behavior with our students. All of these activities will improve the efficiency of the department in the education provided to the students in our program.

1E. Unanticipated Factors: Have there been any unanticipated factors that have affected the progress of your previous plan?

We had hoped to be able to offer an RN-BSN program here at the community college level however, this had to be put on hold due to the proximity of our college to CSUSM. The Health Impact report (2016) has recommended that this option be opened up to additional community colleges and this will remain an option we would like to pursue in the future.

We have been working toward revising our curriculum and after much research and discussion, have decided to move toward a Concept-Based Curriculum. We met with several consultants and found one that best suited our needs. Unfortunately, over the course of the last several years, we have struggled with some discourse amongst our faculty. Following a recent change in leadership in the department, this discourse escalated and our plans to move forward with the curriculum revision was postponed for a semester to allow us time to work with a Civility Consultant, Dr. Cynthia Clark to improve our ability to communicate and work

well with one another. We felt this was an important step since the curriculum revision will take a lot of cooperation across all team members in the department.

1F. SLOACs: Describe your course and program SLO activities this past year. How have you used the results of your assessments to improve your courses and programs? [Refer to the SLO/PRP report – https://outcomes.palomar.edu:8443/tracdat/](https://outcomes.palomar.edu:8443/tracdat/)

Criterion: 70% of the students who enter the program will graduate.

Reflection of Results: Rates are improving as a result of the support implemented to aid in student's success and retention in the program.

Students Sampled: Students earning degree/certificate

Next Planned Assessment: Spring 2017

Action: None needed Spring 2016

NCLEX Pass Rates 85%

Action: none at this time making improvement with graduation rates as a result of all the things were implements to assist student's success. (03/15/2017)

Action: none needed (03/15/2017)

Reporting Year: 2015-2016

Next Step: Assess this SLO again on its next scheduled timeline.

Graduation rate for Fall 2015-2016 = 72% (03/15/2017)

Resource Needs: Technology

Reflection of Results: Graduation rate is concerning and many measures are being implemented to increase retention and graduation rates.

Students Sampled: Students earning degree/certificate

Funding request rationale: N/A

Next Planned Assessment: Spring 2016

Action: No further action needed (03/15/2017)

Reporting Year: 2014-2015

Next Step: Assess this SLO again on its next scheduled timeline.

Graduation Rates - 70% of the students who enter the program will graduate.

For the program SLO Graduations rates: Graduation rates will be determined based upon the number of students who start in a given semester and the number who finish four semester later. The graduation rate for Fall 2015-2016 was 72%. The graduation rates are improving as a result of the support that has been implemented to aid in the student's success and our retention efforts. The information from the assessment of the SLOs determines that the nursing department needs to focus on retention of our students; specifically, the nursing department needs to implement solutions to assist our graduates to complete the 4 semester program in 4 semesters. Revising the mentor list and improving the peer to peer mentoring within semesters is another way to improve retention. We have recently included family members in the new student orientation so that the student's support system can be included in orientation. In addition, our Recruitment and Retention team has volunteered to rotate attendance of the Informational Meetings held routinely for students who are interested in the program. The students will attend and answer any questions about the program and offer their perspective.

We have made the purchase of the Kaplan program mandatory for all of the nursing students as a remediation tool. This allows students from all four semesters access to additional learning tools to enhance their success. During their final semester, they are

given a 4 day Kaplan review course in order to help prepare them for the NCLEX.

We have implemented student representatives for each semester to attend faculty meetings and to bring student issues to staff in a timely manner. This was done based off of feedback from our Student Round Table and Focus groups that they would like to have a forum to bring concerns forward earlier in order to see any changes implemented within their semester.

The student handbook is under revision and will be more student-centered.

Adding another lab assistant for lab to assist in student remediation would be one way to improve student support and retention in the future.

SECTION 2: PROGRAM GOALS

2A. Progress on Previous Year's Goals: Please list discipline goals from the previous year's reviews and provide an update by checking the appropriate status box .

Goal	Completed	Ongoing	No Longer a Goal
To hire a permanent, FT-faculty to staff the simulation lab. This posit	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide high quality education for all students to ensure student su	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Address the recommendation and areas of non-compliance resultin	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Unfortunately, the goal to obtain approval to have a BSN program t	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2B. New Discipline Goals: Please list all discipline goals for this three-year planning cycle (including those continued from previous planning cycle):

GOAL #1	
Program or discipline goal	Provide high quality education for all students to ensure student success and preparedness. The accrediting bodies are requiring we meet the needs of our students by providing high quality education and have the staff to support this requirement.
Strategies for implementation	We are hiring a consultant to assist us with a major curriculum revision to a Concept-Based Curriculum (CBC). This curriculum change is proposed to assist students to be able to "think like a nurse" and improve their understanding of the concepts necessary to build a solid foundation that will allow the student to develop improved clinical reasoning skills and critical thinking skills. In addition, we would like to get additional support in the lab.
Timeline for Implementation	The curriculum revision is expected to start in the fall. The additional lab support is also anticipated to start in the fall.
Outcome(s) expected (qualitative/quantitative)	Improved student evaluations in the area of preparedness; Increased retention rates; Lower attrition rates; Increased Faculty satisfaction (measured through evaluations on the End of Semester reporting). The curriculum revision is expected to also improve our efficiency rating.
GOAL #2	
Program or discipline goal	Address the recommendation and area of non-compliance resulting from the ACEN visit September 2015.
Strategies for implementation	Faculty have started preparation and are updating the Systematic Plan of Evaluation (SPE) each month and as needed. Two faculty attended the ACEN Standards update workshop and all faculty have been reviewing these updates and implementing the changes when documenting on the SPE.
Timeline for Implementation	The ACEN follow-up report is due 2-2018.
Outcome(s) expected (qualitative/quantitative)	The follow-up ACEN report will show that we are in compliance in all areas.
GOAL #3	
Program or discipline goal	To expand the nursing program by: increasing enrollment, offering a separate LVN-RN track, and by improving the process for admittance of veterans, transfer students, and foreign nurses.

ANNUAL INSTRUCTIONAL PROGRAM REVIEW TEMPLATE for 2016-2017

Strategies for implementation	We have submitted a proposal for the Strong Workforce Grant with several tracks for program growth. We have increased the cap for our LVN-RN transition course and have started offering this course in both the spring and fall semesters. We have expanded our outreach and plan to increase our marketing. We adopted a Veterans policy to allow for credit by experience. We are working on strategies to allow for transfer and foreign students to enter the program at the appropriate levels. we have updated our pathway on transfer students. We have met with counseling to create clear pathways for our veterans, transfer students, and foreign nurses applying to our program. Additional support staff will be requested through the college and through grants to provide additional support/resources for these students.
Timeline for Implementation	We anticipate being able to offer the separate LVN-RN track by Spring of 2018. The pathway and policy updates are anticipated to be completed by Fall 2017.
Outcome(s) expected (qualitative/quantitative)	Clear, seamless transition into the program. Students will feel supported and will report on their evaluations that they strongly agree or agree that there are adequate resources available to them. Faculty will report that they feel adequately supported as well/ We will be able to increase enrollment and improve our efficiency rating.

**Department Chair/
Designee Signature:** _____

Date: _____

Division Dean Signature: _____

Date: _____

Vice President Signature: _____

Date: _____