

Program or Area(s) of Study under Review:

ASSOCIATE DEGREE NURSING

Summary of Program Review:

A. Major Findings

1. Strengths:

- Movement to a more student-centered approach.
- Cohesive and collaborative faculty.
- Development and implementation of case study, DEI, and culturally competent delivery of curriculum.
- Strong relationships with clinical sites.
- Willingness to adapt to changes in healthcare and engage in dynamic learning processes.
- Regional acknowledgement of the quality of the graduate coming from the program.

2. Areas for Improvement:

- Stabilize faculty ranks in preparation for retirements.
- Increase adjunct faculty ranks in specialty areas (mental health nursing, pediatric nursing).
- Visualize and creation of a Bridge Program to better serve the growing demands of the nursing field.

3. Projected Program Growth, Stability, or Viability:

The nursing (ADN) program remains stable and has seen continued interest based upon the annual number of applications that are received (in excess of 150) for 40 spaces. Growth can occur with the development of an RN Bridge program.

B. Program's Support of Institutional Mission and Goals

1. Description of Alignment between Program and Institutional Mission:

The associate degree in nursing program aligns with the Institutional Mission and Vision inasmuch as the program evolves to serve the increasingly diverse population in the state, region, and local areas. The basis of the program is Career Education that serves the needs of the region and greater northern California by providing highly trained and competent health care professional via a rigorous and challenging educational program.

2. Assessment of Program's Recent Contributions to Institutional Mission:

Entrance to the program is based upon a random application selection process. Once admitted, students are provided with a balanced educational program that has utilized a variety of theories and techniques to address the variety of student learning needs and objectives to best serve the student. This is accomplished while simultaneously maintaining high standards for completion, success, and first-time licensure examination pass rates.

3. Recent Program Activities Promoting the Goals of the Institutional Strategic Plan and Other Institutional Plans/Initiatives:

Utilization of grant funds to provide DEIA and culturally competency training to nursing faculty in both the ADN and VN faculty.

C. New Objectives/Goals:

Develop and implement an RN Bridge program for vocational nurses and paramedics.
Improve DEI training opportunities for faculty/staff.

D. Description of Process Used to Ensure “Inclusive Program Review”

Full-time and adjunct faculty within the program were offered opportunities to provide input/feedback for the review via in-person staff meetings and via electronic distribution of the review during its various phases of development.

Program Review Report

Spring 2023

This report covers the following program, degrees, certificates, area(s) of study, and courses (based on the Taxonomy of Programs on file with the Office of Academic Affairs):

Program	Associate Degree Nursing
Degree(s)/Certificate(s)	Nursing: AS
Courses	NURS 151
	NURS 152
	NURS 153
	NURS 154
	NURS 155
	NURS 251
	NURS 252
	NURS 253

Taxonomy of Programs, July 2022

I. PROGRAM DATA

A. Demand

1. Headcount and Enrollment

	2019-2020	2020-2021	2021-2022	Change over 3-Year Period
Headcount				
Within the Program	109	109	115	5.5%
Across the Institution	8,285	7,193	6,646	-19.8%
Enrollments				
NURS-151	39	39	39	0%
NURS-152	38	39	39	2.6%
NURS-153	36	37	40	11.1%
NURS-154	31	37	38	22.6%
NURS-155	31	34	39	25.8%
NURS-251	32	34	39	21.9%
NURS-252	32	32	33	3.1%
NURS-253	32	32	32	0%
Within the Program	271	284	299	10.3%
Across the Institution	33,414	30,381	25,203	-24.6
<i>Source: SQL Queries for Spring 2023 Program Review</i>				

***RPIE Analysis:** The number of students enrolled (headcount) in the Associate Degree Nursing Program increased by 5.5% over the past three years, while headcount across the institution decreased by 19.8%. Enrollment within the Associate Degree Nursing Program increased by 10.3%, while enrollment across the institution decreased by 24.6%.*

Enrollment in the following courses changed by more than 10% ($\pm 10\%$) between 2019-2020 and 2021-2022:

Courses with enrollment increases:

- NURS-155 (25.8%)
- NURS-154 (22.6%)
- NURS-251 (21.9%)
- NURS-153 (11.1%)

Program Reflection:

The demand for nurses continues, even more so since the pandemic, though through the pandemic years applications to our nursing program dropped (related to fear, refusal to be vaccinated as required by the clinical sites, and/or due to concern of being infected while they or a family member were immunocompromised). We are limited to the number of students we can enroll in the program due to multiple factors: (1) it is required to have Board of Registered Nursing (BRN) approval before being able to increase student volume (2) a declining number of students are being accepted per clinical site (3) there is competition with other programs for those clinical sites as some “pay” for clinical (4) and the need for more clinical nursing instructors.

Despite the pandemic, our nursing program did not “take a break” from clinicals or class (as many other nursing programs did). About half of our nursing faculty were persistent to meet the educational need of our students –

both didactically and clinically - using Zoom and voice thread for lecture when not permissible to be on campus and the simulation lab and skills lab until we found alternative clinical sites when our local facilities were initially not accepting students at all. We did have five students “pause” their education for a semester for personal and medical reasons and have returned and completed the program. As said, about half of the nursing faculty would utilize zoom, but absented themselves from clinical for many of the reasons students did. Our rationale for continuing the clinicals and thus the program was that “this is what nurses do!”What better learning opportunity for nursing students than to work with “real nurses” to learn the realities of our jobs in real life? The advocacy for students, patients and the program from those faculty who worked through even initial covid was commendable and an example of their dedication to their profession and their students.

2. Average Class Size

	2019-2020		2020-2021		2021-2022		Three-Year	
	Sections	Average Size	Sections	Average Size	Sections	Average Size	Average Section Size	Trend
NURS-151	1	39.0	1	39.0	1	39.0	39.0	0%
NURS-152	1	38.0	1	39.0	1	39.0	38.7	1.8%
NURS-153	2	18.0	2	18.5	2	20.0	18.8	4.4%
NURS-154	2	15.5	2	18.5	2	19.0	17.7	14.2%
NURS-155	1	31.0	1	34.0	1	39.0	34.7	11.9%
NURS-251	1	32.0	1	34.0	1	39.0	35.0	9.4%
NURS-252	1	32.0	1	32.0	1	33.0	32.3	0.9%
NURS-253	1	32.0	1	32.0	1	32.0	32.0	0%
Program Average*	10	27.1	10	28.4	10	29.9	28.5	10.3%
Institutional Average*	1,332	25.1	1,202	25.3	1,111	22.7	24.4	-9.6%

Source: SQL Queries for Spring 2023 Program Review

Average Section Size across the three-year period for courses, and both within academic years and across the three-year period for the program and institutional levels is calculated as:

$$\frac{\text{Total \# Enrollments}}{\text{Total \# Sections}}$$

It is not the average of the three annual averages.

RPIE Analysis: Over the past three years, the Associate Degree Nursing Program has claimed an average of 28.5 students per section. The average class size in the program has exceeded the average class size of 24.4 students per section across the institution during this period. Average class size in the program increased by 10.3% between 2019-2020 and 2021-2022. Average class size at the institutional level decreased by 9.6% over the same period.

Average class size in the following courses changed by more than 10% ($\pm 10\%$) between 2019-2020 and 2021-2022:

Courses with increases in average class size:

- NURS-154 (14.2%)
- NURS-155 (11.9%)

Program Reflection:

The first semester is often the semester that is hit hardest by the loss of students as the reality of having to touch strangers and care for them is often a difficult concept for some who envision nursing as a well paid, prestigious and somewhat glamorous profession. We have found that the inclusion of Certified Nursing

Assistant license as a pre-requisite has helped to balance that out. The two classes listed as an increase in class size are due to our policy of allowing students who fail one section of the program to return and repeat that course and then move on once in a two year period of time. The second semester is the reality check of our program for many students as the content becomes more difficult and the expectations become more “true to life as a real nurse.” Therefore the increasing numbers are those who repeated and are now returning to another cohort to complete the program. The issues with new students leaving regarding COVID concerns actually allowed returning students to join in and re-fill those cohorts so they could continue in the program.

3. Fill Rate and Productivity

Fill Rate			
	Enrollments	Capacity	Fill Rate
2019-2020	271	320	84.7%
2020-2021	284	320	88.8%
2021-2022	299	320	93.4%
Three-Year Program Total	854	960	89.0%
Productivity			
	FTES	FTEF	Productivity
2019-2020	107.5	20.8	5.2
2020-2021	108.6	23.0	4.7
2021-2022	117.5	20.7	5.7
Three-Year Program Total	333.6	64.5	5.2
Sources: SQL Queries for Spring 2023 Program Review; SQL Server Reporting Services – Term to Term Enrollment FTES Load Comparison Report (by Credit Course) *Note: NURS-153, NURS-154, and NURS-155 have a capacity of 0 recorded. For the fill rate calculations above, a capacity of 20 was assigned to NURS-153 and NURS-154 (the courses with two sections offered within an academic term) and a capacity of 40 was assigned to NURS-155 (the course with one section offered within an academic term). <u>RPIE Analysis:</u> The fill rate within the Associate Degree Nursing Program ranged from 84.7% to 93.4% over the past three years, and the fill rate across the three-year period was 89.0%. [Fill rate has not been calculated at the institutional level.] Between 2019-2020 and 2020-2021, enrollment increased while capacity remained constant, resulting in an increase in fill rate. Between 2020-2021 and 2021-2022, enrollment increased while capacity remained constant, resulting in an increase in fill rate. Productivity within the Associate Degree Nursing Program ranged from 4.7 to 5.7 over the past three years, totaling 5.2 across the three-year period. [Productivity has not been calculated at the institutional level.] The three-year program productivity of 5.2 is lower than the target level of 17.5, which reflects 1 FTEF (full-time equivalent faculty) accounting for 17.5 FTES (full-time equivalent students) across the academic year. (This target reflects 525 weekly student contact hours for one full-time student across the academic year.)			

Program Reflection:

As described in section 2, COVID provided an opportunity for the classes to fill with returning students. Nursing productivity is never high and will probably never be as we are required by the Board of

Registered Nursing (BRN) to have an approved nursing faculty person assigned and present with nursing students when in the clinical setting. The facilities (as mentioned in section 1) allow fewer students on a unit at a time due to their own poor staffing and increasing stressors for their staff due to the unknowns and their additional work loads. In years gone by, we were allowed 15 nursing students to one RN faculty staff person while in the clinical setting. This number has been slowly decreasing over the years, even before the pandemic, but has changed rapidly since the pandemic. At this time, we are often allowed only 3-4 students per one approved RN faculty person up to about 9 students per faculty depending on the facility and the type of hospital unit needed to meet the BRN requirement of “concurrent theory and practice based on topic”. The number of students allowed per unit at any given facility is the purview of the facility - not the BRN and not NVC.

4. Labor Market Demand

Economic Development Department Standard Occupational Classification Description Code 29-1141: Registered Nurses	Numeric Change in Employment (Baseline Year to Projected Year)	Projected Growth (% Change in Positions; 2018 Base Employment vs. 2028 Projected Employment)	Projected Number of Positions (Total Job Openings)
Napa County (2018-2028)	40	2.2%	1,000
Bay Area ^A (2018-2028)	10,630	16.7%	47,550
California (2018-2028)	35,000	10.8%	211,970
<i>Source: Economic Development Department Labor Market Information, Occupational Data, Occupational Projections (http://www.labormarketinfo.edd.ca.gov)</i> ^A Bay Area counties include: Alameda, Contra Costa, Marin, San Francisco, San Mateo, Santa Clara, Solano, and Sonoma. Figures also include San Benito County (reported with projections for Santa Clara County).			

RPIE Analysis: The figures reported in the table above pertain to the Standard Occupational Classification for the following position:

- Registered Nurses

The Economic Development Department projects an increase of 40 positions within Napa County and an increase of 10,630 positions within the Bay Area for the Associate Degree Nursing Program by 2028 (compared to 2018). These increases in the number of positions translate to a 2.2% increase for the industry within Napa County and a 16.7% increase within the Bay Area (not including Napa County). The projected growth within the Bay Area exceeds the projected growth in California. The projected growth within Napa County is lower than the rates for California and the Bay Area.

Program Reflection:

The increase in need for nurses in Napa County will probably continue related to the increasingly aging population residing in Napa County and also related to the aging of the nursing pool that resides in and around Napa County. Many of us are approaching or beyond retirement age and will need to be replaced. Health care has changed tremendously over the years and exponentially faster since the pandemic--- this too impacts older nurses as our roles have been changing significantly and rapidly. Literature clearly shows a need for increasing numbers of nurses and the inability for our hospitals and other health care facilities to find adequate staff to care for the population’s health care needs - this is very concerning. While just a few years ago many of our acute care medical centers would only hire BSN, MSN and advanced practice nurses they are currently advertising for associate degree RN’s and even Licensed Vocational Nurses to work in

tandem with the more advanced RN's to try and meet patient needs. This has happened before, as I have worked as a nurse long enough to see the cyclical pattern of health care needs, at least when it comes to nursing (and it is clearly in the literature as well).

B. Momentum

1. Retention and Successful Course Completion Rates

Retention Rates (Across Three Years)				Successful Course Completion Rates (Across Three Years)		
Level	Rate	Course Rate vs. Program Rate		Rate	Course Rate vs. Program Rate	
		Above	Below		Above	Below
NURS-151	100%	--	--	99.1%	X	
NURS-152	100%	--	--	95.5%		X
NURS-153	100%	--	--	91.2%		X
NURS-154	99.1%	--	--	98.1%	--	--
NURS-155	100%	--	--	100%	X	
NURS-251	100%	--	--	99.0%	X	
NURS-252	100%	--	--	99.0%	X	
NURS-253	100%	--	--	100%	X	
Program Level	99.9%			97.6%		
Institutional Level	89.6%			74.0%		
<i>Source: SQL Queries for Spring 2023 Program Review</i> -- Indicates a value that is within 1% of the program-level rate. <i>Bold italics</i> denote a statistically significant difference between the course-level rate and the program-level rate. Bold denotes a statistically significant difference between the program-level rate and the institutional rate. Note: Grades of EW (Excused Withdrawal) for spring 2020 and beyond are not included in the calculations of the three-year retention and successful course completion rates reported above. This approach reflects the standard recommended research practice of not including EWs in either the numerator or the denominator for these rates.						

RPIE Analysis: Over the past three years, the retention rate for the Associate Degree Nursing Program was significantly higher than the rate at the institutional level. The retention rates of courses within the program did not differ significantly from the program-level rate. The retention rate for the Associate Degree Nursing Program falls within the fourth quartile (Q4) among program-level retention rates (across 58 instructional programs, over the past three years). The retention rate for Associate Degree Nursing is among the top 25% of retention rates among NVC programs.

Over the past three years, the successful course completion rate for the Associate Degree Nursing Program was significantly higher than the rate at the institutional level. The successful course completion rate of NURS-153 was significantly lower than the program-level rate. The successful course completion rate for the Associate Degree Nursing Program falls within the fourth quartile (Q4) among program-level successful course completion rates (across 58 instructional programs, over the past three years). The

successful course completion rate for Associated Degree Nursing is among the top 25% of successful course completion rates among NVC programs.

Over the past three years, the difference between retention and successful course completion at the program level (2.3%) was significantly lower than the difference at the institutional level (15.6%). This figure represents the proportion of non-passing grades assigned to students (i.e., grades of D, F, I, NP).

No Associate Degree Nursing courses claimed a difference (between retention and successful course completion) that exceeded 10%.

Program Reflection:

Our retention rates and successful course completion reflect the nature of our program—in that students who leave the program once, may return to the program and repeat the course and then continue on if they have a “C” or better grade in a subsequent course. No one stays in the program if not achieving a grade of “C” or better—understanding the basic concepts of nursing practice are essential to their being safe themselves in the clinical setting as well as for the safety of their patients. Students must pass the NCELX-RN exam to become licensed and be able to practice as a nurse. The nursing faculty at NVC has worked hard to upgrade the curriculum, with BRN approval, to meet current and future nursing demands. We all believe our students in the nursing programs should have empathy, caring and the critical thinking skills to perform their nursing responsibilities effectively and efficiently, at a novice level by the time they graduate so that they can take and pass the NCLEX and be a safe provider when licensed. The simulation lab was an invaluable asset for our students and our program to meet these goals—especially in the pandemic years and looking to the future of decreasing face to face clinical hours.

2. Student Equity

	Retention Rates (Across Three Years)		Successful Course Completion Rates (Across Three Years)	
	Program Level	Institution Level	Program Level	Institution Level
African American/Black	100%	86.4%	94.3%	65.6%
Latinx/Hispanic		88.7%	98.8%	70.3%
First Generation		89.2%	98.3%	72.7%
Veteran		91.1%	*	71.9%
19 or Younger		89.8%	99.6%	72.3%

Source: SQL Queries for Spring 2023 Program Review

Bold italics denote a statistically significant difference between rates at the program and institutional levels, with the lower of the two rates in **bold italics**.

Shaded cells pertaining to retention rates indicate that statistically significant differences for those groups were not found at the institutional level.

Note: Grades of EW (Excused Withdrawal) for spring 2020 and beyond are not included in the calculations of the three-year retention and successful course completion rates reported above. This approach reflects the standard recommended research practice of not including EWs in either the numerator or the denominator for these rates.

*Data suppressed due to low N (<10 students in cohort).

RPIE Analysis: This analysis of student equity focuses on the five demographic groups with significantly lower retention and/or successful course completion rates found at the institutional level (vs. the corresponding rates among all other demographic groups, combined) over the past three

years. Tests of statistical significance were conducted to compare program-level and institution-level rates among the five groups listed above.

Within the Associate Degree Nursing Program, the retention rate among African American/Black students was significantly higher than the rate at the institutional level.

Within the Associate Degree Nursing Program, the successful course completion rates among African Americans/Blacks, Latinx/Hispanics, first-generation students, and students ages 19 or younger were significantly higher than the corresponding rates at the institutional level. (The program-level successful course completion rate among veterans is not reported due to small cohort size.)

These findings regarding retention and successful course completion among equity groups are consistent with the findings that emerged from the comparison of retention and successful course completion at the program vs. institutional level, where the program-level rates were significantly higher than the institution-level rates for both retention and successful course completion. (See Section I.B.1 above.)

Program Reflection:

From a nursing perspective, that does not surprise us. We, as nurses, treat human beings as human beings. As nurses our job is to be supportive and help with problem solving despite race, creed, color, gender, economic status or disease process. We teach and encourage understanding of differences among people whether they be cultural, genetic, ideological or preference. Reports that reflected otherwise would be of major concern for the faculty and program as it would be incongruent with what we do—and who we are.

3. Retention and Successful Course Completion Rates by Delivery Mode (of Courses Taught through Multiple Delivery Modes, i.e., In-Person, Hybrid, and Online)

This section does not apply to the Associate Degree Nursing Program, as courses associated with the program were not offered through multiple delivery modes within the same academic year between 2019-2020 and 2021-2022.

C. Student Achievement

1. Program Completion

	2019-2020	2020-2021	2021-2022
Degrees			
Nursing AS	32	32	31
Institutional: AS Degrees	422	394	305
Average Time to Degree (in Years)⁺			
Nursing AS	6.1	7.3	5.6
Institutional: AS Degrees	4.7	4.9	4.6

Source: SQL Queries for Spring 2023 Program Review

*Time to degree/certificate within the program reported among cohorts with at least 10 graduates within the academic year. Asterisk indicates that data have been suppressed.

+Average time to degree/certificate was calculated among students who completed a degree/certificate within 10 years (between first year of enrollment at NVC and award

conferral year). Among 2018-2019 completers, the average time to degree/certificate was calculated among students who enrolled at NVC for the first time in 2009-2010 or later. Among 2019-2020 completers, the average time to degree was calculated among students who enrolled at NVC for the first time in 2010-2011 or later.

***RPIE Analysis:** The number of AS degrees conferred by the Associate Degree Nursing Program decreased by 3.1% between 2019-2020 and 2021-2022. Over the same period, the number of AS degrees conferred by the institution decreased by 27.7%. The Associate Degree Nursing Program accounted for 7.6% of the AS degrees conferred in 2019-2020 and 10.2% of those conferred in 2021-2022. The average time to degree among Associate Degree Nursing AS recipients was higher than the average time to degree among all AS recipients, as the average time to degree is calculated based on students' first term of enrollment at NVC (when some students might have been taking pre-requisites for the program).*

Program Reflection:

The numbers of degrees conferred by the ADN program declined a bit likely related to the pandemic. Unlike the usual in-class courses offered at the college, we were literally in the midst of the pandemic in a way others were not. The time to degree recipients' calculation is a reflection of the pre-requisite classes our students are required to take before even being accepted into the nursing program. Acceptance into the program may take 1-3 years due to the demand exceeding the allowable admissions (per the BRN).

2. Program-Set Standards: Job Placement and Licensure Exam Pass Rates

Measure	Program-Set Standard* (& Stretch Goal)	Recent Performance			
		Year 1	Year 2	Year 3	Three-Year Total
Job Placement Rate	75% (100%)	92.6%	100%	100%	97.6%
Licensure Exam Pass Rate	75% (100%)	93%	93.7%	71.9%	86.3%
Sources: Perkins IV Core 4 Employment data for Program (TOP Code: 0505) for job placement rates (https://misweb.cccco.edu/perkins/Core_Indicator_Reports/Summ_CoreIndi_TOPCode.aspx) *Program-set standards and stretch goals reported in the table are the standards and goals established in 2019.					

***RPIE Analysis:** Among Associate Degree Nursing students, job placement rates have consistently exceeded the program-set standard (of 75%). The job placement rate reached the stretch goal (of 100%) in two of the past three years.*

Program Reflection:

Seven years ago, the program was placed on probation by the Board of Registered Nursing due to having two successive years of first-time licensure exam pass rates below the required minimum of 75% (per the BRN). Since that time, and after curriculum revision and faculty training, those numbers have consistently been in the 90%+ ranges.

The lowest number above is representative of only a few recent graduates having taken the NCLEX exam thereby creating a small margin for error. Our program also is on an "offset" calendar in which students begin in January and end in December. They take their exams in a period that often crosses two calendars (for reporting BRN and NCLEX purposes). Additionally, these numbers/data have been impacted nationwide by COVID due to the closure of clinical sites to students and the move to a more online educational model when

"hands-on" learning became a luxury rather than the norm. We fully expect this number to remain in the 90% range.

II. CURRICULUM

A. Courses

Subject	Course Number	Date of Last Review (Courses with last review dates of 6 years or more must be scheduled for immediate review)	Has Prerequisite* Yes/No & Data of Last Review	In Need of Revision Indicate Non-Substantive (NS) or Substantive (S) & Academic Year	To Be Archived (as Obsolete, Outdated, or Irrelevant) & Academic Year	No Change
NURS	151	2021	No	No	No	X
NURS	152	2021	Yes (NURS 151)	No	No	X
NURS	153	2020	Yes (NURS 152)	No	No	X
NURS	154	2022	Yes (NURS 152)	No	No	X
NURS	155	2021	Yes (NURS 152)	No	No	X
NURS	251	2022	Yes (first year)	No	No	X
NURS	252	2021	Yes (NURS 251)	No	No	X
NURS	253	2020	Yes (NURS 252)	No	No	X

*As of fall 2018, prerequisites need to be validated (in subsequent process) through Curriculum Committee.

B. Degrees and Certificates⁺

Degree or Certificate & Title	Implementation Date	Has Documentation Yes/No	In Need of Revision+ and/or Missing Documentation & Academic Year	To Be Archived* (as Obsolete, Outdated, or Irrelevant) & Academic Year	No Change
AS	2017	Yes	No	No	X

*As of fall 2018, discontinuance or archival of degrees or certificates must go through the Program Discontinuance or Archival Task Force.

⁺Degrees and Certificates cannot be implemented until the required courses in them are approved and active.

Program Reflection:

Curriculum changes must be approved by the BRN before approval at the NVC Curriculum Committee level. Due to the pandemic many routine processes were put on hold due to focus/ concentration on having students be successful despite faculty challenges, clinical site challenges, and the many life stressors for students, the public and the BRN in general. This would also include nursing faculty stressors such as personal illness, family illness and even deaths, and financial struggles. Also included was the fact that the Program Director also participated in clinicals to meet student needs during this time – which was out priority. Our primary goal was to be supportive and provide students with what they needed to be successful in the program during a very difficult time. Students were reluctant to commit to time, exposure and expense at a time when security was very questionable for so many.

In regard to curriculum specifically, we did a complete curriculum revision in 2016 that was approved by the BRN in 2017 and then the curriculum committee at NVC in 2017-18. Catalogs, curriculum of records and web pages were updated after that time. The BRN then re-approved our curriculum without changes in 2019-20 and are due to re-approve our program in Fall 2023. There are several minor changes that need to be made to the catalog due to typos and reiterations with new computer programs that have been reported to Seth Anderson this semester (spring 2023) and will be moved to the curriculum committee as non-substantive/FYI items in fall 2023.

III. LEARNING OUTCOMES ASSESSMENT**A. Status of Learning Outcomes Assessment**

Learning Outcomes Assessment at the Course Level

	Number of Courses with Outcomes Assessed		Proportion of Courses with Outcomes Assessed	
Number of Courses	Over Last 4 Years	Over Last 6 Years	Over Last 4 Years	Over Last 6 Years
ALL	All	All	All	All

Learning Outcomes Assessment at the Program/Degree/Certificate Level

Degree/Certificate	Number of Outcomes*	Number of Outcomes Assessed		Proportion of Outcomes Assessed	
		Over Last 4 Years	Over Last 6 Years	Over Last 4 Years	Over Last 6 Years
N/A					

Program Reflection:

The PLO's and SLO's for all the Nursing courses are assessed and evaluated at the end of every semester as required by the BRN. They are the basis for all our clinical objectives on our evaluation tools as well as the ability of our students to pass the required coursework. We were tardy in inputting the information to TracDat (were a little busy getting our students through the pandemic) and the system is now not being used. All data was provided to Christopher Howe this semester for 2020 to present for input into the new tracking computer system.

B. Summary of Learning Outcomes Assessment Findings and Actions

Our nursing students do not pass a nursing course unless they meet all the Student Learning Objectives (SLO's) of that course. The Program Learning Objectives (PLO's) are met if each student completed the program successfully.

Program Reflection:

We do follow SLO and PLO outcomes in our Nursing staff meetings and reflect on things we might change based on the changing realms of health care needs, health care policy and changing attitudes of the student populations we are currently dealing with.

Making changes to the curriculum will be costly, as the BRN now charges for review and approval of curriculum changes. In the goal of being fiscally responsible but also professionally responsible, we as nurses have a moral obligation to be sure our future generations are well prepared and safe practitioners. We are aware of the need for some minor curriculum changes and have tentative plans to discuss/ modify the following:

- Adjust the number of clinical hours per course, per specialty, to reflect recently changed BRN rules regarding required hours, as they have been significantly decreased. Discussions have included decreasing our currently required clinical hours of face to face *somewhat*, but not down to the level required by statutes as we know the value of the face-to-face clinical hours for student success and patient safety. Decreasing these hours would allow for more group work and independent work which would improve efficiency and allow faculty more opportunity to effectively work with more students.
- Discussion has included better utilizing simulation and case studies to meet current critical thinking requirements on the NCLEX-RN exam. This would require the Simulation lab to be expanded (high fidelity simulators are here, much of the equipment is here, and funding has been looked at and planned, but actual work has not been enacted and needs to be, to make this resource effective), This would probably also require more manpower in the realm of more simulation technician hours after modification of Room 811 to the existing lab has occurred. This will benefit not only the ADN program, but the VN program, RT program, PT program and the EMT/Paramedic program. It also has potential for outside sources to pay for the space use when not being used by current HEOC programs.
- Discussion about the potential of re-awakening the VN/ Paramedic Bridge course from about eight years ago. This would help the need for more RN's, meet a community need for all the VN's and paramedics who request such a program yearly since it was ended. It would allow the ADN faculty to share its knowledge base and efficiently bridge these students into the second year of the ADN program filling gaps in of up to 40 (or more if approved by the BRN) students graduating per cohort rather than the 32/33 currently averaging, providing more opportunity for faculty to work year round if desired as most nurses do, answering to only one Board of Nursing if we eliminate the VN program which is struggling annually for students, and increasing the number of students we can accommodate -with BRN approval-- with more efficiency ...keeping the NVC Nursing program active year round for clinical placements in our local facilities.

IV. PROGRAM PLAN

Based on the information included in this document, the program is described as being in a state of:

- ☐ Viability
- ☒ Stability
- ☐ Growth

*Please select ONE of the above.

This evaluation of the state of the program is supported by the following parts of this report:

The Associate Degree Nursing Program (RN) has weathered the pandemic years as well as or better overall than the rest of the NVC campus. During this very challenging time in our nation's history and the history of the nursing profession. The faculty, staff, and the students who coalesced and continued to provide quality educational opportunities are to be strongly commended for their stamina and perseverance in maintaining educational quality without compromise but doing so in a collaborative, flexible, and dynamic process.

Complete the table below to outline a three-year plan for the program, within the context of the current state of the program.

PROGRAM: ASSOCIATE DEGREE NURSING

Plan Years: 2023-2024 through 2025-2026

Strategic Initiatives Emerging from Program Review	Relevant Section(s) of Report	Implementation Timeline: Activity/Activities & Date(s)	Measure(s) of Progress or Effectiveness
Update the existing curriculum	Section IA2, IB1	Fall 2023- Spring 2024	Implementation
Update the VN/Paramedic bridge	Section IIIB	Fall 2025	Implementation
Update the Simulation Center	Section IIIB	Ongoing	Implementation

Describe the current state of program resources relative to the plan outlined above. (Resources include: personnel, technology, equipment, facilities, operating budget, training, and library/learning materials.) Identify any anticipated resource needs (beyond the current levels) necessary to implement the plan outlined above.

Note: Resources to support program plans are allocated through the annual planning and budget process (not the program review process). The information included in this report will be used as a starting point, to inform the development of plans and resource requests submitted by the program over the next three years.

Description of Current Program Resources Relative to Plan:

The ADN program faculty, with the strong support of the Dean, have been able to leverage grant funding provided by the Chancellor's Office and the Strong Workforce Development funding sources to make a variety of improvements to the Simulation Center in recent years. The heavy lifting has

been done at the administrative level but the concepts originate from the faculty and staff who are “in the field” and see what can be done in our educational setting.

Overall, the program is moving forward with appropriate resources relative to access to appropriate learning resources for students. We are always looking to improve our simulation activities and learning center. Our largest, and most present, challenge is to replace our retiring faculty in a timely manner. This won’t be an easy task and will require “out of the box” thinking by the current faculty and the administration to move processes along in an expedient, yet professional and rigorous fashion.

V. PROGRAM HIGHLIGHTS

The program-level plan that emerged from the last review (Spring 2020) included the following initiatives:

- Program productivity
- Improved Learning Outcomes documentation

A. Accomplishments/Achievements Associated with Most Recent Three-Year Program-Level Plan

Program productivity is a goal that needs continued work, but considering the requirements of outside licensing agencies may preclude major strides in this area. The program is a single program in the overall college community yet it must adhere to a large number of external processes that create challenges (clinical site mandates, BRN requirements, etc.).

Our graduation numbers are solid, our pass rates (in general) are consistent and within expected parameters, we have a cohesive faculty group, and we have migrated to a more student-centered approach that has been noted to be humanistic, relevant, and friendly while maintaining high professional standards and expectations.

B. Recent Improvements

Update curriculum but this is an ongoing process as healthcare, educational, and legislative mandates are implemented on an annual basis that must be addressed via the curriculum or program-level basis.

C. Effective Practices

Student centered, program centered and contributions to the community as needed with vaccination clinics, assistance in Skilled nursing facilities and hospitals during the pandemic.

ASSOCIATE DEGREE NURSING SPRING 2023

Completed by Supervising Administrator:

Robert Harris

Date:

7/6/2023

Strengths and successes of the program, as evidenced by analysis of data, outcomes assessment, and curriculum:

- Student centered and responsive to needs.
- Responsive to changing healthcare environment.
- Demonstrated flexibility and willingness to adapt.
- Strong, cohesive faculty.
- Improvements in Simulation Center to reflect changing clinical environments.

Areas of concern, if any:

- Maintaining appropriate levels of staffing for the specialized areas of the nursing program (Mental Health, Pediatrics).
- Stewardship and maintenance of relationships with clinical sites to allow placement in the local area and greater bay area to provide students with diverse experiential opportunities.
- Impact of COVID and learning environment on first-time licensure exam passage rates in coming years and the subsequent reaction of the Board of Registered Nursing.

Recommendations for improvement:

- Improve simulation environment.
- Hiring a diverse, culturally responsive faculty.
- Curricular revision.

Anticipated Resource Needs:

Resource Type	Description of Need (Initial, Including Justification and Direct Linkage to State of the Program)
Personnel: Faculty	Three full-time faculty retired with SERP and having challenges seeking/hiring replacements. This puts program in jeopardy in specialty nursing areas.
Personnel: Classified	Proper training of incumbents to address the needs of the program while sharing incumbents with other areas of college.
Personnel: Admin/Confidential	None
Instructional Equipment	Up-to-date equipment that is used in the clinical setting so that students are better prepared when entering the clinical sites.
Instructional Technology	Ensure all faculty/staff have access to proper technology in offices.
Facilities	Completion of neonatal lab in Room 811.

Operating Budget	Sufficient with leveraging of grant with GF.
Professional Development/ Training	Utilization of grant funding for improved cultural competence training for all faculty/staff in nursing program.
Library & Learning Materials	N/A