

Los Angeles City College

Comprehensive Program Review 2008

Nursing Department

I. Department Mission

Describe the mission of the Department

The mission of the nursing program is to educate students for entry level registered nursing positions in a variety of multicultural health care settings within the community.

Los Angeles City College
Registered Nurse Program Philosophy

Los Angeles City College strives to provide higher education for all students. The college creates an educational environment where students have the opportunity to develop to their full potential. To this end, the college:

- Encourages students to become independent learners, critical thinkers, and active participants in the democratic process;
- Offers a challenging curriculum developed by faculty who recognize teaching and student learning as its primary responsibilities;
- Believes that learning occurs in many ways and in many places and that is not limited to the classroom; promotes student equity and staff diversity;
- Fosters sensitivity and appreciation for the cultural and individual differences that exist among its diverse student body and staff;
- Nurtures an environment of academic and intellectual freedom, mutual respect, collegiality, and collaboration throughout the campus community.

The philosophy of the nursing program supports the Los Angeles City College's philosophy and is based on the premise that our students bring unique learning abilities, life experiences, goals, responsibilities and support systems to the education experience.

The Faculty Believe that nursing is a profession providing an essential service that is sensitive to the basic health needs of society. It is characterized by a common core of knowledge and consists of an organized group of people working toward a common goal intended to assist clients, individuals, families and communities in adapting behaviors to achieve their maximum health potential.

The Faculty Believe that nursing practice is the application of knowledge and skills in the care of persons of various ages, ethnicities and cultural groups in various settings. The focus of client care is initiated through the use of the nursing process and adaptation in order to maintain a state of wellness or to support the declining client to die with comfort and dignity.

The Faculty Believe that nursing is a profession which is committed to, cares for and serves humanity. These commitments include: prevention of illness, promotion of health, restoration of health, enhancement of the quality of life throughout the lifespan and support for the dying with comfort and dignity.

The Faculty Believe that the goal of nursing education is to prepare qualified graduates with critical thinking skills, values, knowledge, nursing skills, and a sensitivity to socio-economic cultural differences. The optimum educational environment includes the physical, psychological and social forces that influence the learning process. The program has advancing levels of competencies to guide students toward achievement of their educational goals. The progression of teaching and learning is from simple to complex. Academic support is designed to accommodate individual learning styles. As adult learners, students may incorporate their life experiences in order to enhance the learning of concepts and skills inherent in the art and science of nursing, rules and regulations governing nursing practice, roles of the professional organizations and political, economic and social forces

impacting practice.

The Faculty Believe that the associate degree graduate nurse is a contributing member of the healthcare team. Graduates are prepared to function within the scope of the Nurse Practice Act as a manager of care, and a member within the profession of nursing.

As a PROVIDER OF CARE, the practice of the associate degree graduate nurse is characterized by critical thinking, clinical competence, accountability and commitment to the value of caring.

As a MANAGER OF CARE, the practice of the associate degree graduate is characterized by collaboration, organization, delegation, accountability, advocacy and respect for other healthcare workers. In this role, the graduate must possess the knowledge and skills necessary to make decisions, set priorities, communicate, delegate and direct care.

As a MEMBER WITHIN THE PROFESSION OF NURSING, the practice of the associate degree graduate is characterized by a commitment to professional growth, continuous learning and self-development. In this role, the graduate practices within the ethical and legal framework of nursing and accepts responsibility and accountability for his/her own practice. The graduate is also cognizant of the importance and appropriate use of research.

Philosophy of Nursing Education

The faculty believes that learning is a dynamic life long activity. Adult learners are self-directed and take ultimate responsibility for attainment of knowledge. Learning involves the active participation of both student and faculty. Each student enters the nursing program with unique characteristics, capabilities and motivation for learning. Personal growth of learners is enhanced based on successful learning experiences. The faculty is committed to providing a supportive learning environment, promoting creative and critical thinking and providing a variety of individual and group learning activities directed toward meeting the learning needs of all learners.

The nursing program at Los Angeles City College strives to ensure quality nursing education for entry level registered nurses of diverse backgrounds who are prepared to function as competent, caring, responsible members of the profession of nursing.

Nursing faculty are role models, clinically competent, and active professionally. Faculty facilitates the student learning process, foster leadership, critical thinking skills, and caring behaviors. Student learning is facilitated by referral to college support services such as the learning skills (which include tutoring, workshops, and remediation), financial aid, and counseling.

Conceptual Framework

The nursing curriculum is based upon the Roy Adaptation Model of Nursing developed by Sister Callista Roy, R.N., Ph.D., FAAN. The major concepts of the Roy Adaptation Model are the person or group as an adaptive system; the environment as internal and external stimuli; health as being and becoming whole and integrated; and nursing as the art and science of promoting adaptation.

The following premises are vital to understanding this model (Roy, Sr.C. & Andrews, HA (1999). The Roy adaptation model (2nd ed.). Stamford, CT:Appleton & Lange):

Individual "Man" (Person)

The Roy Adaptation Model views the individual as a bio-psycho-social-spiritual being in con-stant interaction with a complex and rapidly changing environment. The individual possesses both innate and acquired mechanisms which are biologic, psychological and sociological in origin. These mechanisms assist the individual to cope with his internal and external environment. Roy further categorizes coping mechanisms as the regulator and cognator subsystems. The regulator subsystem responds automatically to stimuli through neural, chemical, and endocrine coping channels. The cognator subsystem responds through four cognitive-emotive channels: perceptual and information processing, learning, judgment, and emotion (Roy p.46).

Environment

According to the Roy model, environment encompasses the world within and around humans as adaptive systems. As adaptive systems humans have the ability to change behavior in response to changing environmental stimuli.

Stimuli are categorized as: focal; contextual; and residual. Problems in adaptation occur when the individual responds ineffectively to changing stimuli from the internal or external environment in a manner that does not contribute to the integrity of the person.

Health

The Roy Adaptation Model defines health as a state and a process of being and becoming an integrated and whole human being. Lack of integration represents lack of health. Health (integration) is a reflection of adaptation. Adaptation is a positive response of human systems that promotes survival, growth, reproduction, mastery, and person and environment transformations.

Nursing

Nursing is a profession committed to caring for and serving humanity. These commitments include: promotion of health, prevention of illness, restoration of health, support for dying with dignity, and enhancement of the quality of life throughout the life span. According to the Roy Adaptation Model, the goal of nursing is to support and promote adaptation of individuals, families and groups during times of health or illness. This goal is achieved by including the patient and family and collaborating with other members of the health care team in the planning and implementation of care.

Nursing judgments, decisions and actions regarding patient care are guided by the conceptual framework of the Roy Adaptation Model and the nursing process. There are six steps in the Roy Adaptation Model: assessment of behaviors; assessment of stimuli; nursing diagnoses; goal setting; intervention; and evaluation. The model also encompasses four major modes of adaptation which are: physiological-physical; self-concept-group identity; role function; and interdependence. Within these four modes, stimuli influencing adaptation and the person's adaptive and ineffective responses to these stimuli are assessed. Nursing practice also incorporates knowledge from the physical, biological, and behavioral sciences as well as the liberal arts.

The student learner will be taught simple to complex concepts of the Roy model and beginning with normal parameters advance to common problems of adaptation. The primary focus of the nurse is to maintain and enhance adaptive behavior, manipulate stimuli to change ineffective behaviors to effective behaviors, ultimately achieving the goals for nursing care. Through the process of adaptation the individual is freed from ineffective behaviors and utilizes that energy to become an integrated and healthy individual.

II. Department Overview

a. Response To Demand

Describe the trends in Enrollment, FTES, and Average Class Size.

Given the data, what are the implications for your department? If relevant, discuss each discipline separately

One nursing program can not begin to fully address the nursing shortage in California, but one RN program can certainly contribute with other programs to successfully meet the demands for Registered Nurses.

Enrollment reports for the Department of Nursing include the generic ADRN students, LVN to RN students, a Los Angeles City College/Children's Hospital of Los Angeles RN Residency collaborative project, CNA and HHA programs.

The generic RN program admitted its first class of 35 students in Fall 2002, and graduated its first ADRN class of 25 students in Spring 2004 (approximately 71% retention rate). Since then, between 25-39 students have been admitted each Fall. The number of students admitted varies according to the amount of external funding available. The number of qualified applicants has steadily increased since Fall of 2002. For 25-38 slots, there are 250-300 qualified applicants.

A second admission enrollment was opened in Spring 2007 with 27 generic RN students admitted, doubling our yearly enrollment. In addition, 19 LVN to RN students were admitted to third semester in Spring 2006.

The overall retention rate in the ADRN program has been approximately 86%, with the highest attritions in first and second semesters.

Success rates must include not only graduation rates but success in passing the NCLEX-RN licensing exam. The CA Board of Registered Nursing posts NCLEX-RN pass rates as yearly aggregates, and as such, our overall pass rates for first attempts have been between 75-91% since 2004.

Our program goal is 85%, which has been met by the majority of our graduating classes. Although first time failures have paralleled changes in the NCLEX-RN exams, this may not be the only reason why graduates fail NCLEX. Other influence include English as a second language, test anxiety, and inadequate preparation from refusing NCLEX preparation assistance.

The advanced placement enrollment of LVN to RN students is very important as it provide a pathway for LVNs to upgrades skills and practice levels necessary to meet complex patient care needs.

The CNA and HHA programs have temporarily been archived secondary to financial and space reasons.

The CHLA/LACC RN Residency program has continually increased enrollment to address the RN vacancies in pediatrics.

b. Student Achievements

Given the data, describe the trends in Success Rates, Retention Rates, and Degrees and Certificates awarded. What are the implications for your program(s)?

Overall retention rates have averaged approximately 86%, but we have recently seen a decline in these retention rates in first semester students. Students are entering the ADRN program underprepared for the academic and clinical demands that are inherent to any nursing program. The pool of applicants has increased, but many of these applicants come from academic backgrounds that are significantly less demanding than the ADRN program. Aggressive academic assistance has been implemented, but it is quite likely that attrition rates will increase over the next several semesters.

Pre-requisite admission criteria have recently been changed in accordance with the Chancellor's validation study. this will hopefully have a positive impact on the potential for student success in the ADRN program.

NCLEX-RN success rates, as posted on the BRN website, continue to maintain between 75-91%. Rates are affected by many influencing factors. Recent influences have included students who re-entered the ADRN program after initial failure. We are seeing a strong trend that these re-entering students either experience repeat program failure or fail the NCLEX-RN licensing exam on the first attempt. With this knowledge, we are aggressively pursuing supplemental support programs for these at-risk students. It is too early to comment on the results.

Graduates of the RN program receive an Associate in Science degree and are eligible to sit for the NCLEX-RN exam. There is a non-degree certificate option for LVN to RN students, however none has taken this option.

Both the CNA and HHA programs offer certificates. Currently these programs are temporarily not offered.

c. FTEF

*Discuss how the FTEF trends will impact your program. Include any need for increasing or reducing your program faculty. (Develop Resource if necessary.) Given the data, describe the trend in FTEF/FTES ratio .
What are the implications for your program(s)?*

The Department of Nursing has 5 FTEF, one of whom has 100% release time as Department Chair, which leaves 4 FTEF to provide academic instruction. Compared to other nursing programs in our District, with fewer, the same as, or more students, this program has approximately 50% of the necessary FTEF. Two Limited and one hourly faculty have been hired, with the support of grant funding, to teach required academic courses. Between 12-17 hourly clinical faculty are needed at any given time to supplement FT faculty and provide clinical instruction.

With the current budgetary challenges, this program may be faced with 50% or more enrollment reduction in order to safely and successfully educate our students, unless FT faculty can be hired to fill vacancies. Given the nursing crisis in CA, this decrease in enrollment will have a negative impact on the overall State (and National) initiatives to satisfy demands for RNs.

III. Vocational Programs

a. Labor Market Demand

1. How does your program meet labor market demand? Cite specific examples and sources.

In the 2007 California Labor Market and Economic Analysis, Registered Nursing is listed as number one in the 100 top-growth skilled occupation, with a projected growth of nearly 61,000 new jobs between 2004-2014 (Associate Degree level).

Health Care

Health care is the ultimate "population serving" industry, reflecting the demands of a growing and aging population, both in California and across the nation. California is facing a nursing shortage that is expected to widen over the next two decades, along with a growing demand for other health caregivers.

A recent study by the LMID examined the skills need and demand for 48 health care occupations that provide direct care, administrative support, and operations support for the industry. The same study examined the skills relationships and career ladder potential between five direct care occupations: home health aide, nursing aide, medical assistant, LVN, and RN. Each of these occupations is critical to California's future.

Top occupations in California's health care industry include RN, nursing aides, LVNs, physicians and surgeons, home health aides, and medical assistants (CA Labor Market and Economic Analysis 2007 p.19).

The LACC Registered Nursing Program enrolled its first class of 27 students in Fall 2002. This first class graduated in 2004. 100% of those graduates are employed as Registered Nurses in the Los Angeles area. Since that time, between 25-36 students have been enrolled each Fall.

In Spring 2007, the Department of Nursing enrolled a second cohort of 30 students, doubling the yearly admission to the Registered Nursing program. In addition, 15 LVN to RN students were admitted. In Fall, 2007 22 additional LVN students were enrolled plus 36 generic RN students for a total Fall enrollment of 58 new RN students.

The Department of Nursing is very sensitive to the disparity between the numbers of graduates completing RN programs per year (approximately 6100) versus approximately 11,000 annual openings (ibid, p.40). With the doubling of the LACC RN program in less than 5 years, we are contributing to the evolving resolution of the RN deficits in CA.

100% of the graduates of the LACC nursing program have been employed as Registered Nurses upon successful completion of the NCLEX licensing exam.

b. Advisory Board

Advisory Board Member Name	Company / Affiliation	Title	Voc. Program
Bonnie Adams, MSN, RN, EdD	HETC	Director	
Cathy Cass MSN, RN	Good Samaritan Hospital	Education Director	
Fran Guzek, MSN, RN	CHLA	Education Manager	
Kathy Wojno, MSN, RN	Hollywood Presbyterian Hospital Medical Center	VP Nursing Services	
Leslie Neuman	Children's Hospital Los Angeles	Affiliate schools coordinator	
Linda Kim, MSN RN	Hollywood Presbyterian Hospital Medical Center	Education Director	
Suzanne Taylor, MSN, RN	CHLA	Education Director	

Advisory Committee Meetings

Dates	No. of members attending	Voc. Program
Thursday, April 01, 2004	12	

What have been the major outcomes of your advisory board meetings? Of those outcomes, which have been acted upon, and what is your plan of action with regard to other outcomes discussed?

Significant focus is on improving the quality of students admitted to this program. This has been addressed in the following ways:

1. More stringent admissions standards that limit failures, repeats, and withdrawals to one, from pre-requisite core courses.
2. Overall college GPA 2.5 or higher.
3. "C" or higher in each of the core sciences.
4. Satisfactory performance on the TEAS entrance exam, currently the 67th percentile.
5. Equal admission criteria for LVN to RN students.
6. Successful performance on a placement exam, as well as success in passing the LVN to RN bridge course for LVN to RN students.

c. Comparable Programs

Outline your plans to investigate other programs that offer comparable training. If known, compare and contrast your program to these other programs in your service area.

Comparable public programs are available in our District colleges. Every program has experienced similar challenges with underpreparedness of students, academic challenges, and NCLEX challenges. One of our District programs has fully implemented the Chancellor's prerequisite criteria and is now experiencing a significant increase in student performance, retention rates, decreased attrition rates, and increased performance on NCLEX pass rates.

LACC has one remaining step to complete the upgrade in admission criteria. The implementation of the weighted mathematical formula that evaluates all college work, will be implemented for the Spring 2009 admission. This "cut score", as well as the TEAS and academic record will hopefully have a significant positive impact on student success and our program.

Private colleges have the freedom to implement different admission standards and traditionally have been well-funded to provide strong faculty and student support. In spite of this, private colleges are faced with the same challenges of progressively more underprepared students seeking admission to nursing programs.

All Registered Nursing programs must satisfy the same basic educational plan, as the educational criteria are established by the Board of Registered Nursing.

d. Program Accreditation

Is this program subject to approval/accreditation by specialized state, regional, or national accrediting agencies?

Yes

i. Accreditation Status and Recommendations

What is the program's accreditation status?

This program is approved by CA Board of Registered Nursing. The next full approval visit is scheduled for October 1 & 2, 2008. Programs are generally visited every 6-8 years. Since the LACC ADRN program opened in 2002, this upcoming visit will be the first full visit for this program.

Indicate recommendation of the most recent accreditation evaluation of the program and corrective actions taken or planned. Most recent accreditation report and all additional pertinent documentation and explanations should be available on site for consultant review.

ii. Student performance on licensure or board exams on first attempt.

Provide a brief analysis of student performance on licensure or board exams on first attempt.

The most recent pass rates for first attempts with the NCLEX-RN licensing exam yielded a 91.2% success rate for LACC graduates.

Previous pass rates range between 75-85%.

Students who have not passed the NCLEX-RN exam on the first attempt primarily trend toward three categories:

1. Re-entry students post failure from the program
2. LVN to RN students (with a sub-trend from private, non-college LVN programs)
3. Students with marginal pre-requisite performance and marginal program performance.

iii. Employer Satisfaction Survey attempt.

Provide brief analysis of employer satisfaction with regard to completed survey results.

A formal employer satisfaction survey has not been completed. Nearly all employers of LACC graduates are also our clinical affiliate agencies, and as such, we have received positive verbal reports about our graduates. Specifically, employers rate our graduates higher than many other programs on readiness for entry into practice, knowledge and skills abilities, critical thinking ability, safe care practices, ability to work as a team member, integrity, and work ethics.

IV. Curriculum

a. Program Delivery and Effectiveness: Current Courses

Analysis of over-all course offerings and effectiveness

Enrollment goals are reached or exceeded for all nursing classes. When space is available, we re-admit our students who have previously failed, but who have successfully completed a re-admission remediation plan.

The "passing" grade for nursing courses is 75% or higher, which equates to a "C". A grade of 74.9% or less is not passing (we generally do not "round up" scores) and is recorded as a Failing ("F") grade. In each subject area, grades (A, B, C, F) plot out as a bell curve the majority of the time. All grades are issued as letter grades.

The most challenging courses for our students are courses offered in the first semester. Not only is the material complex, but the testing demands analysis, synthesis, and application of theoretical concepts to clinical practice. Many non-nursing college classes employ knowledge and comprehension and do not include higher level thinking processes as integral to the curriculum and student performance.

Students are very challenged to succeed when faced with complex concepts and higher level performance demands. In addition, student learning outcomes are based on both theoretical comprehension and clinical application of those complex concepts. Success in this nursing program demands accomplishment through cognitive, affective, and psychomotor domains of learning.

As this is a program, students enroll with the goal of sequentially progressing through all semesters. The first semester provides a foundation upon which subsequent classes are built. If students fail to understand concepts presented in first semester, they have a much higher likelihood of subsequent failure.

Although the program as a whole prepares our students for entry into practice, we have experienced disequity in the distribution of content and placement of some classes. Faculty have been very aware of this and sensitive to supporting our students toward a successful outcome.

Specifically, the placement of Pediatric Nursing (Nursing 107) and Maternity Nursing (Nursing 106) in the second semester has been extremely challenging for students and faculty alike. Students are not as well prepared to manage the complex needs and complex theoretical material in the second semester, as they would be if these sections were offered later in the program. Both of these subjects require a broad Medical-Surgical foundation to successfully manage the material and translate these theoretical concepts to clinical practice. This means that the first semester is very intense and at a higher level than most programs in order to prepare students for the second semester material. As a result, the highest failure rate tends to be in the first two semesters.

The placement of Pediatrics and Maternity in the second semester was a mandate from the Board of Registered Nursing to facilitate a timely transition for LVN to RN students. This focus has changed and in our Fall 2009 curriculum, these issues will be resolved with the placement of these subjects later in the curriculum. In addition, each semester achieves concept and content equity.

In spite of these challenges, our students generally function at or usually above, students in other programs at the same level. This is evidenced by verbal reports from our clinical facilities where students from multiple programs and program types affiliate.

Course-by-course analysis of offerings and effectiveness (optional)

b. Title 5 Updates and Student Learning Outcome Assessment

Analysis of Title 5 Update Status

Title 5 updates are currently pending completion. Courses will remain as currently submitted, with the addition of SLOs. All courses currently have overall and specific student learning outcomes, along with evaluation criteria.

Please update requested information below:

Note: Course list includes all courses ever approved for the department, including archived courses. Courses must be updated through the Curriculum Committee every 6 years. Courses that are out of compliance with this requirement are highlighted. Please update and save information on all pages.

If the Title 5 Update Date seems to be incorrect, contact the Chair of the Curriculum Committee.

Courses Last Updated Before 2002

Course		Title	Title 5 Update Date	SLO Assess. Complete	Change(s) made	Comments
REGNRS G	100	Certified Nursing Assistant	5/1/2001	No	No	Archived
REGNRS G	99A	Orientation to Pediatric Nursing	12/1/2001	No	No	deleted
REGNRS G	99B	Professional Development & Hospital Safety	12/1/2001	No	No	deleted
REGNRS G	99C	Family-Centered Care & Psychosocial Issues	12/1/2001	No	No	deleted
REGNRS G	99D	Growth Development & Nutritional Care	12/1/2001	No	No	Deleted
REGNRS G	99E	Patient Assessment	12/1/2001	No	No	Deleted
REGNRS G	99F	Medications & Fluids/Issues in Patient Care	12/1/2001	No	No	Deleted
REGNRS G	99G	Group Dynamics: Coping/w Stress in Pediatric Care	12/1/2001	No	No	Deleted

Courses Last Updated After 2002

Course		Title	Title 5 Update Date	SLO Assess. Complete	Change(s) made	Comments
REGNRS G	103	Nursing Pharmacology	3/2/2002	UN*	No	pending
REGNRS G	104	Nursing Foundations	3/2/2002	UN*	No	pending
REGNRS G	105	Beginning Medical-Surgical	3/2/2002	UN*	No	pending
REGNRS G	106	Nursing Care of the Childbearing Family	9/2/2002	UN*	No	pending
REGNRS G	107	Nursing Care of the Pediatric Client	9/2/2002	UN*	No	pending
REGNRS G	108	"Nursing Care of the Client with	3/2/2003	UN*	No	pending
REGNRS G	109	Intermediate Medical-Surgical Nursing	3/3/2003	UN*	No	pending
REGNRS G	110	Advanced Medical-Surgical Nursing	10/3/2003	UN*	No	pending

Courses Last Updated After 2002

Course		Title	Title 5 Update Date	SLO Assess. Complete	Change(s) made	Comments
REGNRS G	111	Nursing Leadership and Management	10/4/2003	UN*	No	pending
REGNRS G	115	Nursing Skills Competency I	3/2/2002	No	No	pending
REGNRS G	116	Nursing Skills Competency II	11/2/2002	UN*	No	pending
REGNRS G	117	Nursing Skills Competency III	3/4/2003	UN*	No	pending
REGNRS G	120	Nursing Informatics Competency I	3/2/2002	No	No	not offered
REGNRS G	150	Expanded Practice and Principles of Pediatric Nursing I	4/8/2005	Yes	Yes	SLOs done
REGNRS G	151	Role Development in Pediatric Nursing	4/9/2005	Yes	Yes	SLOs done
REGNRS G	152	Expanded Practice and Principles of Pediatric Nursing II	4/10/2005	No	No	SLOs done
REGNRS G	99E/101	Home Health Aide	10/2/2002	No	No	Reg Nrsng 101 archived. 99E is an erroneous course number.

Archived & Deleted Courses

Course		Title	Archive / Delete	Comments

c. Student Learning Outcomes and Assessment

1.a Course-level SLOs - Describe what the faculty in the department have done in developing and conducting assessment of course-level student learning outcomes. Include description/discussion of trainings and workshops attended and department meetings.

All faculty met with SLO coordinator and were given instructional assistance for the development of SLOs. Because of clinical and classroom demands, only one faculty was able to attend SLO workshops. However, SLO review has been done during department meetings and all faculty are currently working on their respective curricula to more clearly define SLOs according to the standard matrix. All courses include student learning outcomes and objective and quantifiable evaluation criteria. The outcomes are delineated as course outcomes, clinical and theory outcomes.

1.b Course-level SLOs – Describe any changes implemented as a result of the findings from the assessment of course-level student learning outcomes.

2. Program-level SLOs – Has the department developed SLOs for its program(s)?

Award Type	Program	Program SLO Developed?	Program Outcome
AA	Pre-Nursing and Health Related Majors - ADN	No	
AA	Pre-Nursing and Health Related Majors - BSN	No	
AS	Registered Nursing	Yes	<p>PROGRAM OUTCOMES</p> <p>1) NCLEX passing rates for Los Angeles City College first time exam takers will be maintained at 85 % or above. (As demonstrated by an 85 % or greater passing rate for LACC first-time test takers on the Board of Registered Nursing NCLEX Quarterly Report.)</p> <p>2) Los Angeles City College nursing graduates will retain a transfer rate of at least 30% to Bachelor of Science in Nursing Programs. (As evidenced by 30 % or more of LACC nursing graduates surveyed, 6-12 months after graduation, stating they have started a BSN Program or plan to start within the next 6 months.)</p> <p>3) Graduates of the Los Angeles City College Nursing Program will demonstrate employment rates of 85 % or above within 6 months of completing the program. (As evidenced by 85 % or more of nursing graduates responding to graduate survey being employed full-time at 6-12 months after graduation.)</p> <p>4) Employers of nursing graduates from Los Angeles City College will have moderate satisfaction in 85% of the graduates hired. (As demonstrated by 85 % of employers of LACC nursing graduates identifying a moderate overall satisfaction with the nurse they have employed.)</p> <p>5) 85 % or more of LACC Nursing Graduates will identify moderate or greater satisfaction with the quality of their education and the program's support of students as evidenced by responses on the graduate survey 6-12 months post graduation.</p>

3. Core Competencies Alignment – How do the department's course and program SLOs address City's Core Competencies?

Information Competency:

The Associate Degree Registered Nursing (ADRN) program implements the Nursing Process as the foundation of nursing practice. The Nursing Process includes Assessment, Diagnosis (identification and labelling of problems/needs based upon the results of data gathering), Planning (developing a plan address identified problems), Intervention (putting the plan into action), Evaluation (assessing the results, outcomes, effects of the interventions).

The implementation of the Nursing Process demands critical thinking abilities and creative thinking. The Nursing Process further demands higher level thinking that includes data synthesis and analysis, which develop from knowledge and comprehension of theoretical material, followed by clinical application.

Competencies are assessed by student clinical performance, patient care plans, oral presentations of clinical and or research articles (individual and group), performance on essay and or objective exams that include fill in the blank, multiple choice, multiple multiples choice, anatomical site selection, concept maps, poster presentations (individual and group), performance on standardized assessment exams. All have specific performance criteria and grading rubrics.

Written and Oral Communication:

All students must complete written documentation of patient care in the medical record, develop daily care plans and complete exams and written assignments. Written assignments require APA format. All students must deliver oral patient reports to care providers prior to leaving the patient unit. All students complete oral case and or clinical presentations and provide patient education.

Technological Literacy:

All course documents and most assignments and testing are done via computer. All students must achieve functional competency to complete this program. In addition, most clinical facilities employ electronic patient records and documentation procedures that students are required to use.

Personal Growth and Development:

As part of their leadership course, all students are required to complete and submit a daily journal that reflects self assessment, goals, knowledge, challenges, and professional goals. Journalling is also required in several other courses and encouraged throughout the curriculum.

Intellectual curiosity is inherent in the educational process for nurses. When knowledge and actions have a direct effect on human lives, the drive toward increased knowledge is self-sustaining. This is evidenced by their evolving level of student practice from novice to expert, from completely instructor dependent to interdependence to independence.

Nursing continues to hold the public's trust, and that includes nursing students and faculty. To that end, our faculty must be role models who demonstrate integrity, honesty, and ethical reasoning and practice. Students are expected to elevate their behaviors to embrace those professional standards in the delivery of competent, compassionate, and non-judgmental care. Evaluation criteria that address these behaviors are included in all courses throughout the curriculum and are also cited in the Student Handbook from the American Nurses' Association and the National Student Nurses' Association.

Interpersonal, Intercultural, Global Awareness:

Understanding, respect, and acceptance of cultural diversity is integral to this nursing program and the nursing profession as a whole. Every course addresses cultural diversity throughout the curriculum. Domestic and global social issue that affect the health of people are integrated in all courses. For example, domestic social policy and health policy and its effects on the health of society are discussed in beginning first semester classes. Global diseases such as HIV/AIDS are discussed later in that same semester. Bioterrorism and the physical, social, and psychological affects on world population is initially presented in first semester.

Perhaps an even greater impact and wholistic understanding of health and illness and societal influences comes from our students' involvement in community focused activities. All our students participate in volunteer work at homeless shelters, rescue missions, community health fairs and similar projects. These activities link our students to their community and stimulate a deeper understanding of human needs and how the profession of nursing might best address those needs.

d. Proposed New Course and Course Changes

1. Enter new courses and course changes planned (Note: All course changes, additions and archives require Curriculum Committee approval).

Course Name	Advisory Committee Recommendation	New technology developments	Similar CSU/UC lower division requirements	Course needed for sequence	Integrating current trends and new information	Other (please detail)
Intro to Nrsng	No	No	No	No	No	New curriculum
Fundamentals of Nursing	No	No	No	No	No	New curriculum
Nursing Process	No	No	No	No	No	New curriculum
Nursing Communication	No	No	No	No	No	New curriculum
Nursing Pharmacology	No	No	No	No	No	New curriculum
Medical/Surgical Nursing I	No	No	No	No	No	New curriculum
Medical/Surgical Nursing II	No	No	No	No	No	New curriculum
Medical/Surgical Nursing III	No	No	No	No	No	New curriculum
Gerontology & Community Based Nursing	No	No	No	No	No	New curriculum
Psychiatric/Mental Health Nursing	No	No	No	No	No	New curriculum
Reproductive Nursing & Women's Health	No	No	No	No	No	New curriculum
Care of Children & Family	No	No	No	No	No	New curriculum
Nursing Leadership & Management	No	No	No	No	No	New curriculum

e. Course Scheduling

Use this link to ClassTracks to access information about historical course scheduling. Review data over the last 5 years with special attention to scheduling in the afternoon and evening, on Fridays, on Weekends, and on-line. Comment on the enrollment in these sections, and on the feasibility of offering classes at non-standard times.

Web site available on LACCD intra-net: <http://classtrack.laccd.edu/lacity/>

Password: lac4681

The ADRN program classes have maintained the same scheduling format since the inception of the program in Fall 2002. Classes are not taken as independent units, but rather a program of study. Enrollment is controlled by the Department of Nursing and class scheduling must take into account the student clinical rotations that are integral to all nursing courses. Clinical rotations are scheduled according to the clinical facility's available days and times. Course class times must continue as currently scheduled to allow for the varying clinical rotations requirements.

Are required courses scheduled in appropriate sequence to permit students to complete the program in the prescribed program length? If yes, describe the rationale upon which the sequence is based. If no, what is the plan for alleviating these problems? Explain.

Nursing courses are standardly sequenced. Students enroll in the program, and if successful, complete this program and graduate in 4 semesters, after pre-requisite courses are completed.

What outreach and hybrid classes has your department offered? What are the benefits and problems associated with outreach and hybrid classes? How can the outreach and hybrid classes be improved?

N/A

f. Course Consistency

How does the department determine that classes are taught consistently with the course outline? You may consider such approaches as:

Class syllabi are collected and reviewed for a majority of faculty, mentoring of part-time faculty to ensure integrity of course outline, evaluation of full-time program faculty, evaluation of part-time program faculty, program-wide or course-wide exams, distribution of appropriate course outline to faculty, department chair's review of individual instructor's finals or other exams

All course modules (outlines) and syllabi are reviewed every semester and updated as needed. These are given to co-faculty and PT faculty every semester. Documents are reviewed with co-faculty and PT faculty during pre-semester, intersemester, and end of semester meetings. Regular communication is maintained with all faculty via telephone, email, and face meetings.

Part-time faculty are assigned to the FT faculty, who serves as course coordinator and mentor. PT faculty participate in all department activities, including faculty meetings, curriculum meetings, Board of Registered Nursing preparation activities.

All faculty receive course evaluations at the end of each course. Part-time faculty have access to these at any time, as would any FT tenured faculty. FT faculty who are in the tenure review process, review evaluations during the tenure eval meetings. Any issues or concerns that are revealed in the evaluations are discussed with faculty and appropriate interventions are planned and implemented as needed.

All nursing faculty are diligent in their efforts to align course exams with course material and learning outcomes. Item analysis is completed on every exam and inconsistencies are evaluated and appropriately addressed.

There are standardized exams in every semester that cover specific course content. The evaluation of the results of the standardized exams includes an itemized group and individual analysis of knowledge deficits. If there is consistency among areas, the course content is reviewed to assess whether coverage of this material was adequate or whether modifications are needed.

V. Departmental Engagement

a. What standing committees does your department maintain? What are their charges and membership?

Nursing Curriculum Committee:

Reviews and evaluates all curricula for appropriateness, currency, consistency with course and program goals and student learning outcomes.

Identifies and validates curriculum threads in each course.

Evaluates curricula for consistency in implementation of the theoretical model.

Evaluates, implements new teaching and or technology methods to facilitate and improve student learning outcomes.

Student Admissions and Retention Committee:

Reviews all applicant files for admission to validate that admission criteria have been met.

Selects qualified applicants for admission using a lottery system.

Reviews information on students who are in academic jeopardy and collaborates with course faculty and other departments to design appropriate remediation programs.

Assesses academic records, TEAS results, intervention outcomes, faculty reports for students who have failed. If there is a pattern that may have led to student failures, collaborative interventions are developed and implemented to address those issues.

b. What interdepartmental collaboration has your department been involved in during the past six years?

The Nursing Department has worked very closely with the Learning Skills Center to develop remediation plans, tutorial workshops, and supplemental instruction for students who demonstrate academic deficiencies. Academic deficiencies are demonstrated by below standards scores on standardized admission tests, poor course scores, communication difficulties (language), clinical performance below course standards (often related to deficiencies in basic skills or language issues).

The Nursing Department also collaborates with the Teaching Learning Center to assist with faculty development in the use of etudes and other computer programs.

This department also collaborates with the science and math departments regarding pre-requisite courses and has accordingly modified one of our admission requirements as a result of this interaction.

Faculty from the Nursing Department participate in Academic Senate, curriculum committee, tenure review committees, Information Technology committee, Department Chairs caucus, Educational Planning Committee.

c. What has your department done since the last review to establish connections with schools, institutions, organizations, businesses, and corporations in the community?

The Department of Nursing maintains a close and active relationship with the health care organizations in this community. In collaboration with Children's Hospital Los Angeles, the LACC Nursing program maintains the ongoing RN Residency program, for which college credit is granted to all enrolled RNs. This program has expanded to several area Children's Hospitals as well.

With support of the Chancellor's Office Workforce Development grant, the Department of Nursing and CHLA developed and implemented the Adult RN Residency program, based on the platform of Pediatric RN Residency program, already in place. This was a 2 year grant and is now a self-sustaining program, that is now in place at several area adult hospitals.

The Department of Nursing Chairperson is an active participant on the Health care subcommittee of the Hollywood Chamber of Commerce. The purposes of this committee are to increase the public's awareness of health care services, elevate the standard of health care, improve access to health care, and participate in local, federal, and state policy that affects the health and well-being of our population.

The Department Chairperson also participates in the Community Redevelopment Agency activities that affect the health and welfare of residents in the Hollywood/LA area.

Students and faculty participate in community health fairs and provide blood pressure screening, cholesterol screening, height, weight, body fat analysis screening, glucose evaluations, nutritional education and other activities as needed.

VI. Professional Development

Are there areas of unmet professional development needs among faculty in this program? Please explain a proposed plan of action for addressing this need and any resources needed to achieve this development.

There is a great need for all clinical faculty to have the opportunity to participate in the Clinical faculty development course through the CSU system. This is a costly course (~\$2500) and funds are not available to support our faculty for this program. The focus of this program is to educate and develop clinical nursing faculty to better serve nursing students.

Our faculty were recently surveyed and there is consensus to achieve national certification as Nurse Educators from the National League of Nursing (NLN). The Department Chair is in the process of exploring the possibility of an on-site review and preparation program so eligible faculty will be able to sit for this exam. The preparation and certification will elevate the educational standard of this program. Once certified, faculty will use the designation of CNE, Certified Nurse Educator. It is the goal of this department for all faculty to hold this certification. This certification is one pathway toward excellence for our program.

List all professional development activities engaged in by each faculty member in your program in the last 2 years. Activities may include:

- *Conference attendance*
- *Conference presentations*
- *Other off-campus presentations*
- *Publications*
- *Grants*
- *On-Campus presentations*
- *Leadership/ Membership in professional organizations (specify)*
- *Leadership/ Membership in campus-wide or District-wide committees (specify)*

Faculty Name	Professional Development Activities
AUSTIN NEGRETТА, Part-Time	Med-Surg Mandatory Skills clinical update 2008 ACLS 2008 Cancer chemotherapy classe 2008 Leadership workshop 2007 Nenopause CE 30 ceu 2007 Diagnosis and Management of lung cancer 2006 Cancer chemotherapy 2006 BCLS 2006 Patient care provider ceu 2006 Oncology Symposium 2006 Diabetic symposium 2006 Med-Surg Skill lab 2006 Pain Management, Palliative Care, and Treatment of Terminally Ill 2006 BCLS Instructor cert 2005 Med-Surg Skills Lab 2005 Charge Nurse Workshop 2005, 2004, 2003 Med-Surg Symposium 2004, 2003 Med-Surg Skills Lab 2004, 2003
BECKER MARSHA, Full-Time	Completion of BSN @ CSUDH 2004. Completion of MSN @ CSUDH December of 2007. National Association of Clinical Nurse Specialists conference attendance in March of 2007. Post-Graduate Diabetes Seminar attendance in January of 2008.
BURTON JESSICA, Part-Time	BSN 2005 ACLS 2007 9 units AFM 2007 8 units BFM 2006 8 units NRP 2006 8 units BLS 2006 4 units
Creekmur, Ted, Part-Time	Gerontology course 1/08 30 hours West Coast University Teaching for the Adult Learner 2006 West Coast Irvine & hours Public Speaking and Presentations 2007 Covina At Visiting Nurses Team Building within Academic Setting 2007 West Coast 6 hours Wound Care Trends 2008 Covina 2 hours Care of the Chronic adult Mentally Ill USC 2004 12 hours Continue to work in Psych Nursing at Ingleside Psychiatric Hospital since 2004 Continue to work in Psych Nursing at Ingleside Psychiatric Hospital since 2004 Mental health clinical instructor Los Angeles City Collger 2005 Three 8 week courses 2007/2008 ----- Mental Health Clinical Instructor West University with five 10 week courses for last 2 years Mental Health Instr. at Glendale College Fall 07 and LA City fall 07
DALKE KATY, Part-Time	resigned 2007
DOWNEY HELEN, Full-Time	resigned 10/31/07
Esmail, Karima, Part-Time	
ESTOLANO HELEN, Full-Time	No longer here
FARRAND FRANCES, Full-Time	1/3/07 to 8/12/07- Tumor Board 12 CEU's April 2007- National ONS conference- 12.8 CEU's Jan-Dec 2007- GLAONS- 10 CEU's 5/18/2007- Simulation Lab (Harbor)- 6 CEU's 10/12/2007- CSNA convention Fall 2007- DNP thesis defense Sp 2007- DNP thesis proposal Fall 2006 DNP Thesis proposal Summer 2006- N478, N479, N480, N481 for total of 8 units Sp 2006- N521- 3 units Summer 2005- N520- 3 units Sp 2005 N483, N504 6 units Spring 2005 N401- 3 units Dec 2007- presentation of research to So.Ca. PNA
FEKETE MARY, Part-Time	
KEOGH SUSAN, Part-Time	no longer here
Levy, Darlene, Part-Time	

Comprehensive Program Review 2008

MANCHESTER PAULINE, Full-Time	2003-completion of 36 unit FNP program. ACLS/BCLS 14 CEU 2004-18 hour NP update and review NP conferences 8CEUs; ONS conference 12.8 CEUs 2005- BCLS 4 CEU 20CEU NP update; 15 CEU NP conferences 2006-2008-6 units Doctoral program 24 CEU Faculty Development Institute 03/07-9 CEU COADN 10/07-10.5 CEU COADN 20 CEU AANP conference 04/08-30 CEU Diabetes Management
MARKLINGER MAUREEN, Full-Time	2004 completed 10 unit Maternal Child Health Educator Course ACLS/BCLS update 6 CEUs;Helping Families with IUFD 6 CEUs;Obstetrical Emergencies Prolpse cord,Previa,Abruptio placenta,Amniotic Fluid Embolisms,6 CEUs Neonatal Resusitation 4CEUs, Client Restraints California Medical Center 2007 8 CEUs, Assisting Woman with Breastfeeding Issues Brigham and Woman's Hospital Boston Ma 2004 8 CEUs;faculty Development Institute 3/07/08 9CEUs;Nursing Student National Convention 2007 15 CEUs;Psychiatric Nurse Educators Interventions for Violent Clients in Inpatient Units The Arbour Hospital Boston Ma 2005 6 CEUs;Conference Increasing Medication Compliance in Clients with Bipolar Disorders Arbour Hospital 2003 6CEUs.
Mendez, George, Part-Time	
Paysan-Modina, Michelle, Part-Time	Health Screening and Education Center/ Employee Health- 5/01- present LBCC Instructor- 8/04- present LACC Instructor- 9/07- present
PORTUGAL ADRIANA, Part-Time	
Rhodes, Debbie, Part-Time	
SIMPSON TURK JOCELYN, Full-Time	10/7/2004 Pediatric Diabetes, Endocrinology & Ophthalmology 1.5 10/28/2004 Beyond the Building Blocks of Pediatric Nrsng 7 11/9/2004 Skin & Soft Tissue Infections: New Strategies for Persistent Problems 1 1/11/2005 Diagnosing & Managing Excessive Sleepiness & Fatigue in Depression 1 2/8/2005 Strength to Thrive:HIV Related Malignancies- A Growing Concern 1.8 3/10-13/2005 28th Annual Meeting of CANP 16.8 8/25/2005 Teaching for Evidence Based Practice 7 11/3-4/2005 PALS Provider Course 14 1/24/2006 Aligning N-CLEX-RN Test Plan with Program Goals 6 4/11/2006 Chronic Pain Mgmt 1 7/19-20/06 Chemotherapy and Biotherapy Provider Course 16.5 6/12/2007 Byetta: Understanding Clinical Placement through Physiology 1 1/7/1900 Pain Mgmt: Assessment of Pain 1.5 11/13/2007 Pain Mgmt: Non-Pharm Therapies in mgmt of pedi pain 1.4 11/13/2007 Pain Mgmt: Pain Pathophysiology 1.4 11/13/2007 Pain Mgmt: Pharm Mgmt of Pedi Pain 1 11/15/2007 Pediatric Pain Management 8
TAYLOR SUZANNE, Part-Time	RN Residency Program @ CHLA
Udeozor Valerie, Full-Time	

<p>UPSHAW DARLENE, Full-Time</p>	<p>Darlene Upshaw RN, MSN Nursing Educational CEU/Activities</p> <p>2002-2004 University of Phoenix MSN classes Honors Student- Sigma Theta Tau International Society</p> <p>2004: September 2004: Mass Casualty Decontamination Class October Parent Mentor and Career Day speaker May 2004: American Heart Association Pediatric Advanced Life Support (PALS) May 2004-2006 November 2004: MOAB (Management of Aggressive Behavior) Recert class November 2004: Immunity and the Developing Brain November 2004: Personality and Health November 2004: When Patients Don't Comply</p> <p>2005: January 2005 Pediatrics: Pre-hospital and Emergency Department Care February 2005 Parent Mentor and Career Day speaker March 2005 Pain Response team recert class April 2005 April American Heart Association Adult Advanced Life support April 2005—2007 August 2005 The Childrens Hospital Corporate Compliance Plan August CHLA Orientation class's Pediatric curriculum September 2005 Certification Course for Investigators on Protecting Human Research Subjects November/December 2005 Association of Pediatric Oncology Nursing: Foundations of Pediatric Hematology/Oncology Nursing</p> <p>2006: January: 2006 CHLA's Performance Improvement Process and Current PI Projects February: 2006 the heart of Outpatient BMT: Overview of BMT, GVHD, Treatment and Supportive Care February: 2006 APON The Pediatric Chemotherapy and Biological Provider Course March Magnet Nursing Poster and In- service for CHLA magnet status May: American Heart Association Pediatric Advanced Life Support (PALS) May 2006-2008 June Teleconference for competency for FACT accreditation September 2006 Search for Unrelated Donors October 5,6 2006 Children's Oncology Group meeting with updated new protocols October 2006 Parent Mentor and Career Day speaker November 2006 The Hematopoietic Leukapheresis Challenge</p> <p>2007: January American Heart Association BSL 01/08/2007 – 01/2009 Protecting Yourself Against Healthcare Liability February 2007 Pediatric Radiation Therapy April American Heart Association Adult Advanced Life support April 2007—2009 May 2007 Simulation-based Training: Best Practices for Instruction June 2007 Rhabdomyosarcoma- What Do We Know? July 2007 Pediatrics CVC's Update August 2007 Flex day August appointed new assistance director for LACC Nursing Program, Lead instructor first semester September 18, 2007 ETUDES NG Training Fall 2007 Association of Pediatric Hematology/Oncology Nurses (APHON) Published article Volume 21, Number 3 Guidelines for Progenitor/Stem Cell Collection November 2007 CLIC Certification of Research Staff on Good Clinical Practice November 2007 2nd Annual Medical-Surgical Nursing Symposium</p> <p>2008: January 2008 Winter remediation class January 18, 2008 Participated in Foundation for Accreditation of Cellular Therapy (FACT) for the Hematopoietic Progenitor Transplant Program @ CHLA May 2008 Assessment Technologies Institute (ATI) workshop Regional Nursing Educational Conference for student success outcome May 2008 Syllabus update May: American Heart Association Pediatric Advanced Life Support (PALS) May 2008-2010</p>
----------------------------------	--

VII. Support and Activities

a. Instructional Support Services

Item	Yes / No
Is there adequate secretarial/Instructional Assistant support for this program?	No
Are the necessary media services to support this program readily available?	Yes
Are the library references provided by the college sufficient to support up-to-date program instruction?	Yes
Are library resources integrated into the program curriculum and coursework?	Yes
Are adequate services provided in compliance with program needs for meeting health and safety guidelines?	Yes
Are the custodial services to this program in compliance with program needs for meeting health and safety guidelines?	Yes

If "no" was answered to any of the above, please explain.

As this program has grown, the administrative secretarial support has not. The nursing department currently has one Administrative Intern and one Secretary. The Administrative Intern coordinates all student applications (approximately 500-600 per year), maintains all student files, coordinates all re-entry and exit processes, maintains contracts files, coordinates all qualified student files for admission review, and has recently been involved in a new computerized clinical placement system. In addition, she schedules, coordinates, and presents monthly or twice monthly information sessions for potential applicants. For the last two semesters, she has been a principle figure in implementing the TEAS test (Test of Essential Academic Skills), as part of our grant-supported admission criteria.

The secretary is the first person potential students and the public meet. She receives and triages several hundred telephone calls every day, coordinate student appointments with the nursing counselor in the admissions office, initiates, maintains, and coordinates student graduation BRN documents, provides assistance to all students and facilitates access to the computer lab and skills lab in the absence of the skills coordinator (Instructional Assistant).

The Instructional Assistant (Skills Lab Coordinator) FT position was filled in February 2008, after 3 months without the benefit of this pivotal position. The previous Skills Lab Coordinator held a part-time position, which did not meet department or student needs. This is a position that is needed in order to satisfy program requirements for BRN approval. The Skills Lab coordinator is directly involved with assisting students to achieve competency in implementing clinical nursing skills. She works in concert with the course faculty and also participates in remediation programs for students.

b. Student Services, Academic Support, and Marketing

Describe the availability and adequacy of academic counseling and advising for students enrolled in the program. Who performs these services?

Academic counseling and advising are done through the college counseling department. There is a designated nursing counselor who interacts with potential and enrolled nursing students. Many students receive assistance through the International Student Office, but these students also receive advisement through the nursing counselor as well.

Our nursing counselor is very accessible for our students and provides a valuable service.

Academic Support Services

Identify the academic support services which are used most often by the students and faculty of this program.

Service	Frequently	Sometimes	Not at all
Specialized testing (OSS)	X		
Tutorial services: writing center	X		
Tutorial services: Pi Shoppe		X	
Tutorial services: Learning Skills	X		
Accommodations for disabilities	X		
Use of All-College Computer Lab	X		
Use of specialized departmental lab	X		
Consultation for teaching/learning problems	X		

Marketing

What impact do you feel the college catalog, class schedule and college web site have on marketing your program? Describe your program's plan for working with the institutional marketing personnel in developing new promotional materials to enhance the marketing of your program.

Although we receive many calls from the information published in the college catalog, our most active marketing tool is our students. We have color brochures that are distributed to our marketing department for recruitment fairs, and are also available in the admissions center. These brochures are in the process of being updated to provide more specific program details.

The nursing department provided formal recruitment brochures to our marketing department highlighting men, women, and the multicultural professionals in nursing. These recruitment brochures were developed by Johnson & Johnson and are an excellent representation of nursing.

We have requested to update the nursing website to reflect current admission standards and provide course information. This website revision is pending at this time.

Nearly all potential students have web access. An updated, easy to navigate department website will likely have more recruitment impact than paper media.

The nursing department maintains DVDs from Johnson & Johnson that highlight the nursing profession and the diversity within the profession. These DVDs were developed for recruitment of students to the nursing profession and to provide new students or applicants with an overview of the dimensions of nursing and our contributions to society. We use these during orientation and for our recruitment activities.

c. Programs, clubs, organizations, and special activities for students

List the clubs which are designed specifically for students in this program. Describe their significant accomplishments.

Our students belong to the California Nursing Students' Association and the National Student Nurses' Association. Student representatives, along with the faculty advisor, have attended local and national conventions for the last four years. Sevaeral of our students participate in the legislative offices within those organizations.

Students have also formed a Nursing Club, which is affiliates with the campus Student Organization.

List any awards, honors, scholarships or other notable accomplishments of students in the program.

One student was awarded the opportunity to participate in the Vassar College summer internship program. This is a competitive program and requires academic accomplishment, letters of recommendation, and an essay.

Each year, one student is awarded the Eleanor Hilger Scholarship. This is a department scholarship awarded to the student who best demonstrates the philosophy and vision of Eleanor Hilger, who was a former faculty member at Los Angeles City College. This scholarship has been awarded for the last four years.

Good Samaritan Hospital has presented students from two classes with a financial award and scholarship assistance for clinical excellence.

UCLA-Santa Monica Hospital adopted a student created brochure on vaccine prevention of hepatitis for new mothers and babies. This educational brochure was created by the students in partial fulfillment of the requirements of their Maternal Child Health course.

California Hospital Medical Center has adopted a student created educational poster that depicts the stages of labor and delivery. This poster is in both English and Spanish and will be placed in every patient Labor, Delivery, and Post-partum room.

VIII. Resources: Personnel, Equipment and Facilities

a. Classified Staff, Student Workers, and Faculty

Classified Staff

<u>Staff Name</u>	<u>Job Title</u>	<u>Projected for Retirement</u>
Colleen Stringfellow	Administrative Intern	no
Silvy Olivares	Senior Secretary	no

Student Workers

<u>Student Name</u>	<u>Type</u>	<u>End of Employment</u>

Faculty

Projected faculty retirements

--

Are available faculty and clerical staff adequate to support the program?

No. The nursing program at LACC has 1/3 the number of faculty of comparable programs in the District. We have at best, a 50% faculty deficit in this program. We currently have 2 limited and one hourly faculty filling the roles of FT faculty. There are 5 FT faculty listed for this department, one has 100% mandatory release time to fulfill the duties of Department Chair. This leaves 4 FT faculty for approximately 130-150 students. Three of these faculty are new faculty and in years 1-2 of the tenure process.

Since there are distinct specialties within the curriculum and within nursing, faculty can not simply move from one class to another. Validated competency and BRN approval is required to teach any portion of the nursing program.

b. Equipment inventory, including technology and software

Does your department maintain an equipment inventory? **Yes**

Discuss the department equipment needs. Include both equipment/technology upgrades and expansion.

With the exception of computers that were purchased just under 2 years ago, the computers in our department average 6 or more years old, including the computers in the student computer lab. Our TSS department has been working gracefully to maintain the life of these computers. There is one photocopy machine that is nearing the end of its functional viability. We have upgraded operating systems and memory in all the computers and have repaired the photocopy machine multiple times.

We have recently secured external funding that will support the purchase of a new copy machine, which is a critical need for this program. As we acquire additional grant funding, we will begin to replace the aging computers. As a safety measure, we have requested at least the Department Chair's computer to have weekly backups through TSS.

We have been able to use grant funding to purchase instructional materials and skills lab supplies for student use. However, we must upgrade major skills lab equipment in order to provide a quality educational experience for our students. A priority purchase is a Human Patient Simulator. As clinical space becomes more difficult to secure, we must develop complementary ways for students to receive the necessary clinical experience fulfill their educational requirements. The mannequins, beds, and other equipment are getting or are, out of date. It is critical to maintain currency in any nursing program to provide the appropriate educational experience.

It is anticipated that we will move into the new Science and Technology building in Fall 2009. Although there is no budget at this time, new equipment will be needed, including beds, gurneys, monitoring equipment, AV equipment, computers, monitors, printers, photocopier, and other equipment and supplies necessary to maintain any nursing program.

c. Facilities

Are available general use facilities, such as classrooms, laboratories, and faculty office/work space adequate to support the program? Please explain.

Classroom space is a challenge to secure as we do not have dedicated classrooms, and will be more challenging for everyone, as our campus begins much anticipated renovations to one of our main classroom buildings.

Our department as a whole is impacted with noise, tobacco smoke, and outside temperature issues as we do not have full walls, which leaves our department open to the influences outdoors, on the walkways, foot traffic in the bookstore, security issues, and competition with all this when students are in skills lab courses, viewing instructional videos, or meeting with faculty. Ambient noise resonates throughout the department and is disruptive to all occupants.

The space is shared with International Students, and they are also disturbed by the level of noise, which increases when our students are present.

Sound absorbing baffles would be one possible solution to the noise level. The baffles are lightweight, made of sound-absorbing material and can be suspended from the ceiling. Full walls are needed to prevent the volume of tobacco smoke from entering our department and to reduce or prevent the ambient noise from outside and the bookstore.

Faculty office space is also exposed to the outside and all of the consequent problems. One office has its own ceiling, but no heat or air conditioning source, so the door can not be closed for extended periods of time. This is a faculty office, but it is the only "private" space available for student counseling. The faculty is very gracious about sharing this office for this purpose.

This said, these are now temporary problems that should be resolved when the Sci Tech building is completed.

IX. Planning and Budgeting

(Past / New Planning Goals & Activities are in separate report.)

a. Budget and Expenditures

Describe the trends in budget and expenditures in your department.

Both program 10100 and all supplemental grant funding are combined, although there is some separation between restricted and unrestricted funds. Since 2003, the use of program 10100 funds has decreased in direct relationship to the availability of grant support. Salaries and benefits have remained essentially flat, in spite of a doubling in program size and FTES. This supports the assessment that this program is experiencing a deficit in faculty. Unrestricted funds (program 10100) for equipment and supplies have profoundly decreased and are zero in 2007 and 2008 and have been minimal since 2003. Grant funding has increased each year to support our program. In order to secure ongoing grant funding, we must implement positions for both a grants manager and skilled grant writer on this campus, as currently exists at LA Pierce College.

The nursing program has enormous potential to be financially self-sustaining, as indicated by the decreasing reliance on college funding and increased external support.

c. New Departmental Planning Assumptions

In the space below, please list the planning assumptions that will guide your department during the next 6 year period. Include assumptions for at least the following areas:

- *Expected demand*
- *Anticipated curricular trends*
- *Anticipated pedagogical trends*
- *Anticipated technological trends*
- *Anticipated trends in student preparation and/or demographics*
- *Relevant Advisory Group recommendations*

The demand for Registered Nurses will continue to increase well-past 2015, when the nursing shortage/crisis is projected to peak. 100% of RN program graduates who pass the NCLEX-RN licensing exam, easily find stable, economically viable work. Our program could easily double the size of each class admitted in the Spring and Fall semesters (60-80 students per class, or 120-160 per year). This is not possible unless this program is able to increase FT faculty, support staff, and develop the educational infrastructure necessary to successfully educate prospective RNs.

We will implement a new curriculum in Fall 2009 to more effectively address the educational needs of our students. In addition, this curriculum will be standardized throughout the LACCD and will facilitate student mobility through our campuses.

Human Patient Simulators (HPS) are becoming a mandatory inclusion in nursing education. There are a number of research studies that validate the increased clinical competencies and skills, as well as increased critical thinking abilities of nursing students who have participated in education programs where HPS was an integral part of the curriculum.

Active learning, along with concept teaching and case analysis are the most desirable teaching and learning strategies. It is no longer practical to exclusively employ traditional lecture and content delivery that supports a passive learning mode.

Along with the implementation of HPS, learning skills labs must be technologically competent to support the integration of online testing and access to student learning enhancements available on educational websites. In addition, consideration to implement global use of PDAs or similar tools will be necessary for students to manage and reference the extensive body of scientific knowledge required for safe practice. It is also quite reasonable to consider delivering select nursing content via hybrid classes.

As the demand for higher level thinking, knowledge, and skills continues to increase for entering nursing students, we must re-think admission criteria pre-nursing preparation. It is becoming unreasonable to use valuable time to teach nursing students basic skills such as bathing, vital signs, turning, positioning patients and the like. Pre-nursing education that incorporates these CNA-level skills is needed to allow RN programs to focus on higher level processes.

The LACC ADRN program has enjoyed and embraced an ethnically and gender-diverse student population. LACC enrolls more male students than most programs. Our classes are rich with varying ages from 20 years of age through 50 plus, with backgrounds as simple as high school graduation to second career advanced professionals, such as chemists, engineers, and health care administrators. As nursing and healthcare continue to demonstrate robust employment opportunities, we will see a continuing increases in second career professionals.

We have a reputation of welcoming students from all backgrounds and lifestyles, and it is very important that we continue to respect and preserve these different threads that weave the fabric of our society.

d. Self-Assessment of Challenges Facing Department

Please present the Department's analysis of the challenges it will face over the next 6 years in light of the measures of program effectiveness, progress toward past goals, and new planning assumptions.

Past goals have been achieved with increased grant funding and the addition of a second admission each Spring that has doubled the capacity of the nursing program. Faculty has not adequately been increased to reflect the doubling of student enrollments.

There are four daunting challenges that currently face us and will move with us into the future.

1. Financial support to develop a center of excellence for the education of Associate Degree Registered Nurses.

This is a major challenge. As college funds decrease, we have become more reliant upon public and private grant support. It is incumbent upon this college to support the nursing department's pursuit of public-private funding resources. This support includes competent grants managers and grant writers.

2. Recruitment and retention of excellent faculty.

It is the goal of this department to develop alliances with local graduate nursing programs to provide mentored and guided teaching internships. This will provide an excellent pool of potential faculty who have been specifically educated to teach in nursing program. Dialogue has been initiated with a local private college to provide this link.

3. Recruitment and retention of highly qualified students.

Admission criteria must be modified on an ongoing basis to reflect the increase in entry knowledge and skills. Current admission criteria have upwardly adjusted and will increase again for the Spring 2009 admission. Integral to recruitment and retention highly qualified students will be the achievement of 90% or greater passing rates on the NCLEX-RN licensing exam.

4. Develop a strong and well-articulated transition from ADRN to BSN with local colleges and universities.

The ADRN degree prepares entry level RNs for clinical care. To better address complex patient needs and complex societal health issues, more advanced education is required. Dialogue has been initiated with the CSU system to explore the feasibility of an on-site ADRN to BSN program.

X. Final Summary by Discipline

a. Based on your program review, summarize:

1. *Department Strengths - What is your program doing well?*

Clinical education of students
Encouraging and supporting student involvement
Facilitating student success with limited resources and limited faculty

2. *Department Weaknesses – What areas can your program improve?*

Theoretical education of students has suffered as a result of faculty deficits (insufficient faculty). This needs to immediately be addressed.

Department faculty mentoring is very challenged as 3 out of 4 faculty are in the first 1-2 years of tenure track.

3. *Discuss anything else you would like to share about your program that has not been addressed*

b. Seven Principles for Good Practice in Undergraduate Education:

- *Good Practice Encourages Student – Faculty Contact*
- *Good Practice Encourages Cooperation Among Students*
- *Good Practice Encourages Active Learning*
- *Good Practice Gives Prompt Feedback*
- *Good Practice Emphasizes Time on Task*
- *Good Practice Communicates High Expectations*
- *Good Practice Respects Diverse Talents and Ways of Learning*

Additional information about the seven principles for good practice can be found at the following web sites:

<http://honolulu.hawaii.edu/intranet/committees/FacDevCom/guidebk/teachtip/7princip.htm>

<http://www.tltgroup.org/seven/home.htm>

Please identify and discuss one principle that you feel your program does well and one principle that you feel your program could improve upon as a good practice in serving your students.

A major strength in our program is active student involvement. Our students regularly participate in faculty meetings, contribute to the student handbook, vote on modifications in class scheduling, syllabus, and assignments (as appropriate). They participate in decision-making about supplementary learning materials (skills lab equipment, software, etc.). Our senior students and graduates mentor "newer" students in the skills lab.

We support collaborative learning and include group activities and projects throughout the curriculum.

All students have faculty contact resources, usually cell phones, to more easily reach faculty for questions, concerns, assistance, outside of regular office hours.

Our greatest concern and challenge is insufficient faculty resources that significantly impact on the time that faculty have available to assist students in the classroom.

Course content is very complex and demands increasingly higher levels of critical thinking. This means that we must assist our students in developing an entirely new way of thinking, a new way of processing, analyzing, applying, and evaluating concepts as they relate to the care of human beings across the lifespan in the clinical setting.

This process requires individual as well as group faculty/student interaction on many levels. In the clinical setting, a maximum of 10 students per faculty is necessary to safely achieve student learning goals and sometimes this ratio is not adequate. (Our clinical sites mandate a maximum of 10 to 1 student/faculty ratio as well).

In the classroom setting, we have had 49 students with one faculty. Ratios this high not only place unrealistic demands on faculty, but also impact student learning outcomes because there is simply not enough time for adequate student/faculty interaction. Classroom faculty also carry a full clinical load with each course. We have made a program decision that this will not occur again.

Evaluate each aspect of the program by indicating the appropriate status

NURSING					
	Very Strong	Satisfactory	Needs Improvement	Major Concern	N/A
Enrollment		X			
FTES		X			
FTES / FTEF			X		
Retention Rate		X			
Success Rate		X			
Degrees and Certificates		X			
FTEF				X	
Course Offerings		X			
Course Outline Consistency		X			
Vocational Program		X			
Student Learning Outcomes			X		
Departmental Engagement		X			
Professional Development		X			
Support & Activities		X			
Equipment		X			
Physical Facilities			X		
Budget & Expenditure			X		
Objectives		X			
Resources			X		

Evaluate each aspect of the program by indicating the appropriate status

NURSING, REGISTERED					
	Very Strong	Satisfactory	Needs Improvement	Major Concern	N/A
Enrollment	X				
FTES	X				
FTES / FTEF			X		
Retention Rate		X			
Success Rate		X			
Degrees and Certificates	X				
FTEF				X	
Course Offerings		X			
Course Outline Consistency		X			
Vocational Program	X				
Student Learning Outcomes					X
Departmental Engagement			X		
Professional Development	X				
Support & Activities		X			
Equipment			X		
Physical Facilities				X	
Budget & Expenditure			X		
Objectives		X			
Resources		X			