**Sinclair Community College**

**Continuous Improvement Annual Update 2015-16**

**Please submit to your Division Assessment Coordinator / Learning Liaison for feedback no later than March 1, 2016**

**After receiving feedback from your Division Assessment Coordinator, please revise accordingly and make the final submission to your dean and the Provost’s Office no later than May 2, 2016**

**Department:** LHS - 0672 - Nursing Technology

Year of Last Program Review: FY 2012-2013

Year of Next Program Review: FY 2016-2017

**Section I: Progress Since the Most Recent Review**

Below are the goals from Section IV part E of your last Program Review Self-Study. Describe progress or changes made toward meeting each goal over the last year. Responses from the previous year’s Annual Update are included, if there have been no changes to report then no changes to the response are necessary.

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| **GOALS** | **Status** | **Progress or Rationale for No Longer Applicable** |
| Curriculum Revisions:   * Short-term: minor revisions by fall 2013 decreasing program credits to align with national standards. * Long-term: major revision to a concept based curriculum. | In progress X  Completed  No longer applicable | The short term revisions were approved through CMT and implemented fall 2013.  Long term revisions are currently in development by the Nursing Curriculum Committee. Though it is noted that the goal is a "concept-based curriculum", not competency. Faculty have had the opporutnity to review webinars purchased by the department reviewing the components of a concept based curriculum and how best to create it. The goal for implementation is fall 2015.  2014-15: The new curriculum is under development and on target for Fall 2015 implementation. This new curriculum incorporates feedback from the 2012 ACEN site visit as well as the OBOR mandate to reduce to 65 credits. The new curriculum plan has been approved in CMT, the Ohio Board of Nursing is slated to review it 3/12/15, and a substantive change to ACEN will be sent 4/15.  2015-16:   * OBN approved new curriculum 3/12/15. * ACEN focused site visit 2/16/16- final results pending. * Concept-based curriculum launched   + Fall 2015: NSG 1400/1450   + Spring 2016: NSG 1500/1600/1650 |
| Exploration of strategies to improve program completion to at/above national average for accredited ADN program including:   * Consideration of elimination of the Nursing Waiting List for entry and move toward a selective admission process.   + Redistributed of faculty resources to increase LPN Track enrollment. | In progress  Completed  No longer applicable | The national average for completion of an accredited associate degree program is 72%. The faculty have identified that the program goal of 58% is too low and have replaced it with a goal of at/above national average. We are aware this may take some time, but have implemented multiple strategies over the previous 18 months to improve retention and graduation:   * Increasing the number of Accelerated Admission for Academic Achievement (AAAA) students entering each term. It is noted that even though we can now accept up to 50 AAAA students we do not have enough qualified applicants. * Increasing the admission GPA from 2.0 to 2.5 * Changing from the PAX-RN to the TEAS as an admission exam * Development of an Introduction to Nursing course.   These interventions will not have an immediate impact but success will be monitored via 14-day report in early nursing courses, course success rates in early courses, and overall program completion rates.  The waitlist will continue as the faculty feel strongly that eligible students have an opportunity to enter the program via the waitlist.  One adjunct faculty and two full-time tenure track faculty were moved into the LPN course FA 14. This provided an opportunity to increase LPN-RN track enrollment from 10/term to 24/term. The LPN waitlist has been exhausted 1/15; next cohort to start SP16 under new curriculum.  Lastly, the waitlist has declined. The average wait for the Fall 2014 cohort was 3 semesters. We anticipate it will decrease to 2 semesters for the coming years. We believe this is directly related to the increase in enrollment coupled with the aggressive strategies of the nursing office to ensure no seat goes unfilled. |
| Explore new LPN cohorts programs with major hospital networks in the community. | In progress  Completed  No longer applicable | This goal is on hold until the long term curriculum changes are made. These changes will decrease the length of time required to complete the LPN-RN program which will be an attractive option for LPN's working in the hospital beginning fall 2015.  2015-16:  LPN positions have been reduced and eliminated in acute care settings; GDAHA data of 11 county region demonstrates 9.1% unemployment rate for LPNs- surplus; need to change our focus to recruitment from LPN programs. |
| Analysis of the feasibility of offering a BSN completion program at SCC | In progress X  Completed  No longer applicable | Currently, faculty resources are directed at the development of the new curriculum. However, a small taskforce is investigating the feasibility of a BSN completion program in the future.  2014-15: The faculty are very interested in pursuing a BSN completion option.  2015-16: Renewed possibility related to discussions at state level. Faculty remain interested and committed to this major program expansion if opportunity presents. Interest data collection in process and preliminary exploration of demand/needs. Awaiting decisions at state level.  Met with UD leadership 2/29/16 to discuss a 1+2+1 partnership. |

Below are the Recommendations for Action made by the review team. Describe the progress or changes made toward meeting each recommendation over the last year. Responses from the previous year’s Annual Update are included, if there have been no changes to report then no changes to the response are necessary.

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| **RECOMMENDATIONS** | **Status** | **Progress or Rationale for No Longer Applicable** |
| There is an ongoing national conversation regarding community colleges potentially offering BSN degrees, and the department deserves high praise for being engaged in these conversations. Engaging this issue early helps place the department in the forefront of departments considering this step. It is recommended that the department continue its thoughtful exploration of the topic, paying close attention to developments on the national front, and taking into consideration potential ramifications for accreditation from the Higher Learning Commission. The department should regularly update the dean and the Provost regarding any developments or proposals in this area. | In progress  Completed  No longer applicable | As above. Based on the new recommendations from the Governor to allow bachelor’s degrees at two-year schools, information has been provided to the Dean regarding projected needs for nurses in Ohio, and the current supply from pre-licensure programs. One of the current stipulations in the Governor’s proposal is that the degree is not offered within a 30-mile radius. Wright State University offers a BSN completion program, and they are within a 30 miles radius of SCC. However, it is an on-line program, as are the majority of BSN completion programs. Based on data from the SCC students, cost is the primary determinant in selecting a BSN completion program, and the WSU program remains cost prohibitive for many graduates.  2015-16: as noted above. |
| Historically the department has maintained a close watch on the job market, and it is recommended that any efforts to reduce the waitlist also account for job market considerations – it would be counterproductive to take steps to reduce the waitlist that would flood the market with more graduates than the number of available positions. Continuous monitoring of occupational forecasts and the employment outlook for nursing will be necessary to maintain the delicate balance between increasing access to the program and flooding the market with graduates. | In progress  Completed  No longer applicable | As noted in the analysis of our program completion rates, it is important that we balance the supply with the demand. With the decline in enrollment due to the semester conversion, the focus has changed to increasing LPN-RN enrollment and improve program completion rather than returning to quarter program enrollment levels. That said, the initiatives implemented are anticipated to provide maintenence of post PHP partnership graduate levels (180) in anticipation of the impending demand due to retirements and economy improvements. |
| The institution is approaching a time of fairly substantial employee turnover, and along with many other departments the Nursing Department will be impacted by this. The department is strongly encouraged to develop explicit faculty replacement strategies and to implement succession planning. As it becomes clear which positions are going to be vacated due to retirement, the department should proactively prepare viable candidates for these positions, particularly when they involve a leadership role. | In progress  Completed  No longer applicable | To improve the pipeline of future full-time faculty, the department has increased its pool of qualified adjunct faculty. Recuritment of mastered prepared adjuncts has been a focus and new evaluation tools and mentoring techniques are being used including site visits by the department chair.  Relative to leadership development, all nursing committees now have a chair and co-chair to provide opportunities for faculty to develop leadership skills in a mentoring rotation. |
| Related to succession planning, as key faculty retire systems should be developed to document their knowledge so that it is not lost to the department once they retire. Maintaining knowledge as seasoned faculty retire will be crucial for the future success of the department. | In progress  Completed  No longer applicable | The faculty manual has been updated and converted to an electronic version that is more easily accessible by all faculty members including ACF and adjunct. This promotes a working document which includes historical policies and procedures are not lost as faculty retire. |
| .  Dual admissions with Wright State has been an important effort for the department, and the department is encouraged to continue to develop these efforts, streamlining where appropriate to develop as seamless a transition process as possible. | In progress  Completed  No longer applicable | The department has worked with The Wright State University College of Nursing and Health to create a seamless transition for students in the capstone course at SCC. Students now have the option of replacing the theory capstone course (NSG 2210) with the online BSN transition theory course at WSU (NUR 4800). They will receive transfer credit for the SCC course to graduate while obtaining 3 credits toward their BSN completion program.  2015-16:  NSG 2210 will be retired in January 2017; need to advise students about double degree program with WSU. Student must complete AAS degree at SCC but if declare DD Program eligible for scholarships. |
| The department’s data based approach to revising admissions requirements is to be applauded. The department is encouraged to continue its use of data to fine tune admissions requirements, analyzing student success to ensure current admissions requirements are doing what they were designed to do and determining whether any additional revisions are appropriate. | In progress  Completed  No longer applicable | The systematic program evaluation plan addresses the continual collection, aggregation and trending of data to evaluate impact of the changes. |
| The department is encouraged to explore technology that would provide solutions to issues that the department struggles with – for example, tracking students and graduates, criminal background checks, etc. There are other departments on campus – Emergency Medical Services, for example – that have developed technology-based solutions to issues such as real-time assessment of student skills, criminal background checks, etc. The department is encouraged to work with these other departments to determine where efficiency might be increased. | In progress  Completed  No longer applicable | A meeting with the EMS department was held to discuss the tracking of pertinent data in Datatel, followed by a meeting with RAR to discuss how to map existing data to create necessary real time reports.  2013-14: The department worked with Paul Ciarlariello in RAR to create a report that pulls medical/CPR data from Datatel. This reporting process is run bi-weekly and notifications are sent to students (and their faculty) that have deficiencies. This has significantly improved the efficiency, effectiveness, and accuracy of this information. |
| During the meeting with the review team, the possibility of clinical opportunities at night and on weekends was raised. The department is encouraged to explore these possibilities, particularly as they might apply to development of a potential evening/weekend track for Nursing students who already hold full-time jobs. | In progress  Completed  No longer applicable | Clinical placements have stabilized since the semester conversion. We continue to meet student needs by offering evening sections of each course and faculty rotate assignments. At this time we do not have faculty to offer the entire program as a weekend cohort. |

**Section II: Assessment of General Education & Degree Program Outcomes**

The Program Outcomes for the degrees are listed below. **All program outcomes must be assessed at least once during the 5 year Program Review cycle, and assessment of program outcomes must occur each year**.

**PLEASE NOTE – FOR THE PREVIOUS YEAR AND THIS YEAR, REPORTING OF GENERAL EDUCATION OUTCOME ASSESSMENT HAS BEEN TEMPORARILY POSTPONED. WE WOULD ASK THAT IN THIS ANNUAL UPDATE YOU IDENTIFY AT LEAST ONE COURSE IN YOUR DEGREE PROGRAM(S) WHERE ASSESSEMENT AT THE MASTERY LEVEL WILL OCCUR FOR THE FOLLOWING GENERAL EDUCATION OUTCOME:**

* **Cultural Diversity & Global Citizenship: Apply knowledge of cultural diversity to real world context by acknowledging, understanding, and engaging constructively within the contemporary world.**

**PLEASE RESPOND TO THE FOLLOWING QUESTIONS:**

**Do you have a required course in your program curriculum where Cultural Diversity & Global Citizenship could be assessed for mastery?**

**☒Yes ☐No If yes, please list the course: NSG 2600 of the new curriculum (first launch Spring 2017).**

**If no, is there an elective course that is listed on your Preferred Program Pathway Template where Cultural Diversity & Global Citizenship could be assessed for mastery?**

**☐Yes ☐No If yes, please list the course:** Click here to enter text.

**If no, is there another elective course that is an option in your program curriculum where Cultural Diversity & Global Citizenship could be assessed for mastery?**

**☐Yes ☐No If yes, please list the course:** Click here to enter text.

**If no, where do students master Cultural Diversity & Global Citizenship in your program? Do you need assistance incorporating this General Education outcome into your degree program?**

Click here to enter text.

**NOTE THAT THERE WILL NEED TO BE AT LEAST ONE EXAM / ASSIGNMENT / ACTIVITY IN THIS COURSE THAT CAN BE USED TO ASSESS MASTERY OF THE COMPETENCY.**

**YOU MAY ALSO SUBMIT ASSESSMENT RESULTS FOR THIS GENERAL EDUCATION COMPETENCY IF YOU HAVE THEM, BUT IT WILL BE CONSIDERED OPTIONAL**.

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| **Program Outcomes** | To which course(s) is this program outcome related? | Year assessed or to be assessed. | Assessment Methods  Used | What were the assessment results?  (Please provide brief summary data) |
| Acknowledge the influence of **diversity** on patients, families and members of the health care team. | ALH-1101 ALH-2202 BIO-1141 BIO-1242 BIO-2205 COM-2206 ENG-1101 MAT-1130 NSG-1100 NSG-1101 NSG-1102 PSY-1100 |  | HESI Report for 2012-13 AY Capstone performance on AACN Curriculum Category: Cultural/Spiritual (category change).  Employer Satisfaction Survey question on Diversity program outcome.  Graduate Satisfaction Survey question on diversity program outcome. | SP 15: 773, 678  FA 15: 841, 841  SP14: 674  FA14: N/A  2014:  No new employer data: Unable to collect for 2014 as employers cite employee privacy concerns. Working with facilities to identify new process.  2012-13:  5% below Competent to Perform Independently  45% Competent to Perform Independently  50% above Competent or Expert Performance  FA15: 3.8/5  SP15: 4.0/5  FA14: 3.9/5  2013: 5.23/6 (Lowest Rating) |
| Apply best current evidence and **critical thinking** to the steps of the nursing process to make clinical judgments related to nursing care. |  |  | HESI Report for 2012-13 AY Capstone performance on ACEN Critical Thinking Category.  Employer Satisfaction Survey question on Critical Thinking program outcome.  Graduate Satisfaction Survey question on Critical Thinking program outcome. | SP15: 805  FA15: 832  SP14: 856  FA14: 831  2014: No new employer data as identified above.  2012-13:  5% below Competent to Perform Independently  45% Competent to Perform Independently  50% above Competent or Expert Performance  SP15: 4.0/5  FA15: 3.7/5  2014: 3.9/5  2013: 5.4/6 |
| Apply principles of effective and therapeutic **communication** with patients, families and members of the interdisciplinary health care team. | ALH-1101 ALH-2202 BIO-1141 BIO-1242 BIO-2205 COM-2206 ENG-1101 MAT-1130 NSG-1100 NSG-1101 NSG-1102 NSG-2200 NSG-2201 NSG-2202 NSG-2203 NSG-2206 NSG-2210 PSY-1100 PSY-2200 |  | HESI Report for 2012-13 AY Capstone performance in categories related to communication.  Employer Satisfaction Survey question on Communication program outcome.  Graduate Satisfaction Survey question on Communication program outcome. | FA15: 806 (786-869)  SP15: 786 (770-803)  SP14: Avg. 917 (841-990)  FA14: Avg. 800 (769-840)  2014: No new employer data as identified above.  2012-13  18% *below* Competent to Perform Independently  14% Competent to Perform Independently  68% *above* Competent or Expert Performance  SP15: 4.0/5  FA15: 3.8/5  2014: 3.9/5  2013: 5.36/6 (3rd Lowest rating) |
| Assume responsibility and accountability for meeting **ethical, legal and quality** standards of the profession. | ALH-1101 ALH-2202 BIO-1141 BIO-1242 BIO-2205 COM-2206 ENG-1101 MAT-1130 NSG-1100 NSG-1101 NSG-1102 NSG-2200 NSG-2201 NSG-2202 NSG-2203 NSG-2206 NSG-2210 PSY-1100 PSY-2200 |  | HESI Report for 2012-13 AY Capstone performance in Three (3) categories related to ethical and legal standards.  Employer Satisfaction Survey question on Ethical/Legal program outcome.  Graduate Satisfaction Survey question on Ethical/Legal program outcome. | FA15: 907 (862-964)  SP15: 791 (717-844)  SP14: Avg. 976 (935-1013)  FA14: Avg. 928 (883-977)  2014: No new employer data as identified above.  2012-13  4% below Competent to Perform Independently  41% Competent to Perform Independently  55% above Competent or Expert Performance  FA15: 3.8/5  SP15: 4.0/5  2014: 4.0/5  2013: 5.5/6 |
| Demonstrate **caring** behaviors in providing patient-centered nursing care. | ALH-1101 ALH-2202 BIO-1141 BIO-1242 BIO-2205 COM-2206 ENG-1101 MAT-1130 NSG-1100 NSG-1101 NSG-1102 PSY-1100 |  | HESI Report for 2012-13 AY Capstone performance in Basic Care/Comfort category.  Employer Satisfaction Survey question on Caring program outcome.  Graduate Satisfaction Survey question on Caring program outcome. | FA15: 837  SP15: 778  SP14: 932  FA14: 902  2014: No new employer data as identified above.  2012-13  5% below Competent to Perform Independently  27% Competent to Perform Independently  68% above Competent or Expert Performance  FA15: 4.7/5  SP15: 4.0/5  2013: 5.43/6  2014: 4.35/5 |
| Demonstrate **safe** performance of required nursing skills within cognitive, affective and psychomotor domains. | ALH-1101 ALH-2202 BIO-1141 BIO-1242 BIO-2205 COM-2206 ENG-1101 MAT-1130 NSG-1100 NSG-1101 NSG-1102 PSY-1100 |  | HESI Report for 2012-13 AY Capstone performance: seven (7) categories related to safety.  Employer Satisfaction Survey question on Safety program outcome.  Graduate Satisfaction Survey question on Safety program outcome. | FA15: 837 (808-853)  SP15: 801 (741-823)  SP14: Avg. 876 (854-929)  FA14: Avg. 819 (801-855)  2014: No new employer data as identified above.  2012-13  9% below Competent to Perform Independently  41% Competent to Perform Independently  50% above Competent or Expert Performance  FA15: 3.9/5  SP15: 4.1/5  2013: 5.55/6 (highest rating)  2014: 4.1/5 |
| Demonstrate use of **technology** to access and manage information for safe and quality care. | ALH-1101 ALH-2202 BIO-1141 BIO-1242 BIO-2205 COM-2206 ENG-1101 MAT-1130 NSG-1100 NSG-1101 NSG-1102 NSG-2200 NSG-2201 NSG-2202 NSG-2203 NSG-2206 NSG-2210 PSY-1100 PSY-2200 |  | HESI Report for 2012-13 AY Capstone performance: two (2) categories related to technology.  Employer Satisfaction Survey question on Technology program outcome.  Graduate Satisfaction Survey question on Technology program outcome. | FA15: 798, 849  SP15: 790, 834  SP14: 936, 875  FA14: 932, 976  2014: No new employer data as identified above.  2012-13  4% below Competent to Perform Independently  32% Competent to Perform Independently  64% above Competent or Expert Performance  FA15: 3.7/5  SP15: 4.1/5  2013: 5.30 (2nd lowest rating)  2014: 4.0/5 |
| Implement nursing care that promotes balance in **human responses** to actual or potential health problems. | ALH-1101 ALH-2202 BIO-1141 BIO-1242 BIO-2205 COM-2206 ENG-1101 MAT-1130 NSG-1100 NSG-1101 NSG-1102 PSY-1100 |  | HESI Report for 2012-13 AY Capstone performance on Health Promotion & Maintenance  Employer Satisfaction Survey question on Human Response program outcome.  Graduate Satisfaction Survey question on Human Response program outcome. | FA15: 743, 931  SP15: 789, 909  SP14: 690, 766  FA14: 711, 805  2014: No new employer data as identified above.  2012-13  9% below Competent to Perform Independently  32% Competent to Perform Independently  59% above Competent or Expert Performance  FA15: 3.8/5  SP15: 4.0/5  2013: 5.5/6  2014: 3.9/5 |
| Implement **teaching** that is effective in promoting health or preventing illness. | ALH-1101 ALH-2202 BIO-1141 BIO-1242 BIO-2205 COM-2206 ENG-1101 MAT-1130 NSG-1100 NSG-1101 NSG-1102 NSG-2200 NSG-2201 NSG-2202 NSG-2203 NSG-2206 NSG-2210 PSY-1100 PSY-2200 |  | HESI Report for 2012-13 AY Capstone performance in two (2) categories related to teaching.  Employer Satisfaction Survey question on Teaching program outcome.  Graduate Satisfaction Survey question on Teaching program outcome. | FA15: 769, 798  SP15: 789, 771  SP14: 770, 858  FA14: 708, 775  2014: No new employer data as identified above.  2012-13  9% below Competent to Perform Independently  32% Competent to Perform Independently  59% above Competent or Expert Performance  FA15: 3.8/5  SP15: 4.0/5  2013: 5.45/6  2014: 3.95/5 |
| Plan and deliver nursing care to a group of patients in **collaboration** with other registered nurses and the interdisciplinary team. | ALH-1101 ALH-2202 BIO-1141 BIO-1242 BIO-2205 COM-2206 ENG-1101 MAT-1130 NSG-1100 NSG-1101 NSG-1102 NSG-2200 NSG-2201 NSG-2202 NSG-2203 NSG-2206 NSG-2210 PSY-1100 PSY-2200 |  | HESI Report for 2012-13 AY Capstone performance in Nursing Concepts- Collaboration/Managing Care category.  Employer Satisfaction Survey question on Collaboration program outcome.  Graduate Satisfaction Survey question on Collaboration program outcome. | FA15: 850, 819  SP15: 790, 840  SP14: 890, 875  FA14: 820, 816  2014: No new employer data as identified above.  2012-13  5% below Competent to Perform Independently  41% Competent to Perform Independently  54% above Competent or Expert Performance  FA15: 3.7/5  SP15: 4.0/5  2013: 5.4/6  2014: 3.97/5 |

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| **Are changes planned as a result of the assessment of program outcomes? If so, what are those changes?** | Not at this time. The new curriculum was developed using components of these data which continue to be monitored in the old curriculum. New assessments are under development for the new curriculum (which also include HESI scores). |
| **How will you determine whether those changes had an impact?** | Continue to monitor Exit HESI data including the addition of a Mid Curricular HESI and assessment plans for each course in the new program. |