**Sinclair Community College**

**Continuous Improvement Annual Update 2014-15**

**Please submit to your Division Assessment Coordinator / Learning Liaison for feedback no later than March 1, 2015**

**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 1, 2015**

**Department:** 0672 – Nursing Technology

Year of Last Program Review: FY 2012-2013

Year of Next Program Review: FY 2017-2018

**Section I: Department Trend Data, Interpretation, and Analysis**

**Degree and Certificate Completion Trend Data – OVERALL SUMMARY**

Please provide an interpretation and analysis of the Degree and Certificate Completion Trend Data (Raw Data is located in Appendix A*): i.e. What trends do you see in the above data? Are there internal or external factors that account for these trends? What are the implications for the department? What actions have the department taken that have influenced these trends? What strategies will the department implement as a result of this data?*

* The increasing numbers from 08-12 is in response to a major funding initiative in 2005 with Premier Health (PH), in which additional faculty were hired with the intent to increase nursing graduates.
* The significant spike in 2012-13 is a result of semester conversion and a combination of two graduating classes into one.
* The decline in 2013-14 is also a result of the semester conversion and only expected to be a one-time decline. 2014-15 is expected to have approximately 150 graduates with a graduate return to the goal of 160-180 graduates/year.
* The faculty is focused on retention and completion strategies that align with the college goals as well as maintaining a steady production of nursing graduates without saturating the local market; though job placement is beginning to improve in the area.
* There are no new strategies in response to this data. A new curriculum is already in development for implementation Fall 2015 which decreases program length and credits. We are hopeful this will have a positive impact on program completion.

**Course Success Trend Data – OVERALL SUMMARY**

Please provide an interpretation and analysis of the Course Success Trend Data (Raw Data is located in Appendix A). Looking at the success rate data provided in the Appendix for each course, please discuss trends for high enrollment courses, courses used extensively by other departments, and courses where there have been substantial changes in success.

* The slight decline in overall Course Success Data is related to the new Introduction to Nursing course (NSG 1111). Like other introductory/early courses, this course has a lower success rate than other technical courses.
* There are two higher attrition nursing courses in the semester version of the nursing program, NSG 1102 and NSG 2200. Both have seen a decline in success since the semester conversion. Strategies have been implemented in an attempt to understand as well as improve students’ success in these courses as outlined in the goals section. At this time, the program has focused attention to the new curriculum being implemented in Fall 2015. NSG 1102 is being offered for the last time Spring 2015 and NSG 2200 will be retired after Fall 2015. The design in the new curriculum is taking in to consideration the higher attrition seen in the early nursing coursework.

Please provide any additional data and analysis that illustrates what is going on in the department (examples might include accreditation data, program data, benchmark data from national exams, course sequence completion, retention, demographic data, data on placement of graduates, graduate survey data, etc.)

Accreditation data is included in Section III, with the program outcomes assessment. In addition to that information, the following details regarding the NCLEX-RN are provided.

We have experienced a significant decline on the First-Time Pass Rate (F-TPR) on NCLEX over the past three years. In 2014, for the first time, our program demonstrated a drop below the state average. There are several variables we believe are contributing to this decline:

* In 2013 the National Council State Boards of Nursing (NCSBN) increased the passing standard.  They do this every three (3) years, and each time there is a 3-5% temporary dip in NCLEX First Time Pass Rates (F-TPR) nationally.  It usually comes back to normal within .5-1 year.  This time, there was an 11% decrease in FTP-R and recovery has not occurred.
* We have increased in size.  After the PH grant, we increase enrollment.  There seems to be a potential link with increasing enrollment and decreasing F-TPR. Additionally, we have a very diverse student population, typical of a community college.  Diverse students (including men, ESL, older student) are more likely to require a second attempt.
* Ohio overall has dropped below national average and believe the semester conversion may have created curriculum/transition problems throughout Ohio which are negative impacting success on NCLEX.
* The push for completion has demonstrated an increase in our program completion rates with a concurrent decrease in FTP-R.  We have implemented retention strategies that are beginning to be effective, but no strategies that would prevent students at risk for first time failure from progressing (as we really shouldn’t). When first and second NCLEX attempts are combine, the averages pass rates resembles our historical pass rates.

In response, the faculty are beginning to establish an action plan to intervene for improving F-TPR. This includes potential strategies such as:

* Structuring the Mid-curricular & Exit HESI practice exams
* Adjusting all medications to generic names in lectures, labs, and exams.
* Implementing all computerized testing using testing guidelines established in the Nursing Testing Policy.

**Section II: 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.

|  |  |  |
| --- | --- | --- |
| **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 competency 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. |
| 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. |
| 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. |

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.

|  |  |  |
| --- | --- | --- |
| **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. |
| 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. |
| 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. |

|  |  |
| --- | --- |
| Please respond to the following items regarding external program accreditation. | |
| **Date of Most Recent Program Accreditation Review** | Date of most recent accreditation review: \_\_\_2012\_\_\_\_\_\_\_\_\_\_  **OR**  Programs in this department do not have external accreditation |
| **Please describe any issues or recommendations from your last accreditation review (if applicable)** | 1. Encourage part-time/adjunct faculty to pursue nursing graduate education. 2. Ensure that information communicated in the College Catalog accurately reflects the correct length of the program. 3. Ensure that program length, including program hours, is congruent with the attainment of program outcomes and consistent with state and national standards and best practices. 4. Assess and evaluate the revised clinical evaluation tool to ensure that student learning outcomes are measured effectively. 5. Assess and evaluate program changes implemented to increase program completion rates to meet the expected level of achievement for program completion. 6. Ensure appropriate data collection methods related to program satisfaction among graduates and employers. |
| **Please describe progress made on any issues or recommendations from your last accreditation review (if applicable)** | 1. We are in compliance with the ratio of MSN prepared PT faculty. PT faculty without MSN are encouraged to pursue graduate degree. Of the 19 Adjunct faculty teaching during the 14-15 AY, 15 already hold graduate degrees, and 1 will complete in May. 2. College Catalog was updated immediately after site visit and is reviewed annually per the Systematic Program Evaluation Plan. 3. The Program Length and Credits has been reduced to 65 credits and 5 semesters, reflecting national best practice standards, with the implementation of the new curriculum Fall 2015. 4. New clinical evaluation tools are being created for the new curriculum with consideration for how data will be aggregated and evaluated. 5. The program has seen a slight increase in program completion rates (58%-64%) and are monitoring the impact of the following changes: Increased AAAA admissions, Increased GPA, TEAS implementation, Introduction to Nursing Course 6. Implementation of SurveyMonkey as a data collection tool for student and employer satisfaction surveys. The department has met with Bruce Clayton in RAR to explore our need for a bi-annual survey to meet the accreditation requirements for data collection. |

**Section III: 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 NEXT TWO YEARS, GENERAL EDUCATION OUTCOME ASSESSMENT WILL BE 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 THREE GENERAL EDUCATION OUTCOMES:**

* **CRITICAL THINKING/PROBLEM SOLVING**
* **INFORMATION LITERACY**
* **COMPUTER LITERACY**

**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 THESE GENERAL EDUCATION COMPETENCIES IF YOU HAVE THEM, BUT IT WILL BE CONSIDERED OPTIONAL**.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **General Education Outcomes** | To which degree(s) is this program outcome related? | Year courses identified where mastery of general education competency will be assessed. | PLEASE INDICATE AT LEAST ONE COURSE WHERE MASTERY OF THE COMPETENCY WILL BE ASSESSED FOR EACH OF YOUR DEGREE PROGRAMS | What were the assessment results for this General Education competency?  (Please provide brief summary data)  **NOTE: - THIS ISOPTIONAL FOR THE FY 2014-15 AND FY 2015-16 ANNUAL UPDATES** |
| Critical Thinking/Problem Solving | | All programs | **2014-2015** | NSG 2206: Concept Map |  |
| Information Literacy | | All programs | **2014-2015** | NSG 2200: Health People 2020 Poster Presentation |  |
| Computer Literacy | | All programs | **2014-2015** | NSG 1400: Electronic Health Record Lab |  |
| Values/Citizenship/Community | | All programs | **2015-2016** | Due in FY 2015-16 |  |
| Oral Communication | | All programs | **N/A** | COM 2206/2211 |  |
| Written Communication | | All programs | **N/A** | ENG 1101 |  |
| Are changes planned as a result of the assessment of general education outcomes? If so, what are those changes | | **OPTIONAL FOR FY 2014-15** | | | |
| How will you determine whether those changes had an impact? | | **OPTIONAL FOR FY 2014-15** | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **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 Human Diversity.  Employer Satisfaction Survey question on Diversity program outcome.  Graduate Satisfaction Survey question on Diversity program outcome. | SP14:674  FA14: N/A  2012-13:  5% below Competent to Perform Independently  45% Competent to Perform Independently  50% above Competent or Expert Performance  2013: 5.23/6 (Lowest Rating)  FA14: 3.9/5 |
| 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. | SP14: 856  FA14: 831  2012-13:  5% below Competent to Perform Independently  45% Competent to Perform Independently  50% above Competent or Expert Performance  2013: 5.4/6  FA14: 3.9/5 |
| 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 six (6) categories related to communication.  Employer Satisfaction Survey question on Communication program outcome.  Graduate Satisfaction Survey question on Communication program outcome. | SP14: Avg. 917 (841-990  FA14: Avg. 800 (769-840)  2012-13  18% *below* Competent to Perform Independently  14% Competent to Perform Independently  68% *above* Competent or Expert Performance  2013: 5.36/6 (3rd Lowest rating)  2014: 3.9/5 |
| 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. | SP14: Avg. 976 (935-1013)  FA14: Avg. 928 (883-977)  2012-13  4% below Competent to Perform Independently  41% Competent to Perform Independently  55% above Competent or Expert Performance  2013: 5.5/6  2014: 4.0/5 |
| 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. | SP14: 932  FA14: 902  2012-13  5% below Competent to Perform Independently  27% Competent to Perform Independently  68% above Competent or Expert Performance  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. | SP14: Avg. 876 (854-929)  FA14: Avg. 819 (801-855)  2012-13  9% below Competent to Perform Independently  41% Competent to Perform Independently  50% above Competent or Expert Performance  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. | SP14: 936, 875  FA14: 932, 976  2012-13  4% below Competent to Perform Independently  32% Competent to Perform Independently  64% above Competent or Expert Performance  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. | SP14: 690, 766  FA14: 711, 805  2012-13  9% below Competent to Perform Independently  32% Competent to Perform Independently  59% above Competent or Expert Performance  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. | SP14: 770, 858  FA14: 708, 775  2012-13  9% below Competent to Perform Independently  32% Competent to Perform Independently  59% above Competent or Expert Performance  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. | SP14: 890, 875  FA14: 820, 816  2012-13  5% below Competent to Perform Independently  41% Competent to Perform Independently  54% above Competent or Expert Performance  2013: 5.4/6  2014: 3.97/5 |

|  |  |
| --- | --- |
| **Are changes planned as a result of the assessment of program outcomes? If so, what are those changes?** | The faculty recognizes that the HESI scores are below goal (850) in many areas. These data along with the newly implemented Mid-curricular HESI exam are being used to identify areas for emphasis as we phase out the current curriculum and develop the new curriculum. |
| **How will you determine whether those changes had an impact?** | We will continue to use the Mid-Curriculum and Exit HESI data trends to evaluate the impact. Student and Employer survey data will also be used to evaluate the new curriculum. |

**APPENDIX – PROGRAM COMPLETION AND SUCCESS RATE DATA**

**Degree and Certificate Completion**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Division | Department | Department Name | Program | FY 07-08 | FY 08-09 | FY 09-10 | FY 10-11 | FY 11-12 | FY 12-13 | FY 13-14 |
| HS | 0672 | Nursing Technology | NUR.AAS | 140 | 131 | 123 | 149 | 158 | 111 | . |
| HS | 0672 | Nursing Technology | NUR.LPN.AAS | 7 | 14 | 17 | 18 | 21 | 23 | . |
| HS | 0672 | Nursing Technology | NUR.S.AAS | . | . | . | . | . | 105 | 124 |

**Course Success Rates**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Department** | **Department Name** | **Course** |  | **FY 07-08** | **FY 08-09** | **FY 09-10** | **FY 10-11** | **FY 11-12** | **FY 12-13** | **FY 13-14** |
| 0672 | Nursing Technology | NSG-1100 |  | . | . | . | . | . | 92.0% | 91.5% |
| 0672 | Nursing Technology | NSG-1101 |  | . | . | . | . | . | 90.8% | 91.6% |
| 0672 | Nursing Technology | NSG-1102 |  | . | . | . | . | . | 79.6% | 68.2% |
| 0672 | Nursing Technology | NSG-1111 |  | . | . | . | . | . | . | 67.9% |
| 0672 | Nursing Technology | NSG-1130 |  | . | . | . | . | . | 97.0% | 94.7% |
| 0672 | Nursing Technology | NSG-1131 |  | . | . | . | . | . | 80.0% | 78.6% |
| 0672 | Nursing Technology | NSG-120 |  | 97.8% | 98.2% | 95.3% | 94.0% | 93.9% | . | . |
| 0672 | Nursing Technology | NSG-121 |  | 97.4% | 98.2% | 95.8% | 94.5% | 94.0% | . | . |
| 0672 | Nursing Technology | NSG-122 |  | 62.4% | 77.1% | 73.7% | 80.7% | 83.1% | . | . |
| 0672 | Nursing Technology | NSG-123 |  | 85.5% | 87.4% | 84.8% | 84.0% | 91.3% | 93.1% | . |
| 0672 | Nursing Technology | NSG-132 |  | 100.0% | 100.0% | 96.0% | 100.0% | 97.0% | . | . |
| 0672 | Nursing Technology | NSG-133 |  | 88.5% | 96.3% | 76.0% | 76.7% | 83.3% | . | . |
| 0672 | Nursing Technology | NSG-220 |  | 71.7% | 60.6% | 81.0% | 79.7% | 82.2% | . | . |
| 0672 | Nursing Technology | NSG-2200 |  | . | . | . | . | . | 78.7% | 79.9% |
| 0672 | Nursing Technology | NSG-2201 |  | . | . | . | . | . | 84.9% | 97.5% |
| 0672 | Nursing Technology | NSG-2202 |  | . | . | . | . | . | 98.8% | 98.7% |
| 0672 | Nursing Technology | NSG-2203 |  | . | . | . | . | . | 99.4% | 98.1% |
| 0672 | Nursing Technology | NSG-2206 |  | . | . | . | . | . | 99.4% | 98.4% |
| 0672 | Nursing Technology | NSG-221 |  | 89.4% | 89.2% | 91.7% | 89.5% | 93.2% | 100.0% | . |
| 0672 | Nursing Technology | NSG-2210 |  | . | . | . | . | . | 100.0% | 99.1% |
| 0672 | Nursing Technology | NSG-2211 |  | . | . | . | . | . | . | 98.4% |
| 0672 | Nursing Technology | NSG-222 |  | 87.0% | 86.5% | 83.3% | 83.3% | 89.1% | . | . |
| 0672 | Nursing Technology | NSG-223 |  | 99.3% | 98.5% | 99.4% | 98.9% | 100.0% | . | . |
| 0672 | Nursing Technology | NSG-224 |  | 95.0% | 96.5% | 96.3% | 99.5% | 95.3% | . | . |
| 0672 | Nursing Technology | NSG-225 |  | 100.0% | 100.0% | 100.0% | 100.0% | 99.5% | 100.0% | . |
| 0672 | Nursing Technology | NSG-226 |  | 97.4% | 96.0% | 98.6% | 97.9% | 96.2% | . | . |
| 0672 | Nursing Technology | NSG-2297 |  | . | . | . | . | . | . | 79.4% |
| 0672 | Nursing Technology | NSG-230 |  | 100.0% | 99.3% | 100.0% | 100.0% | 99.4% | 100.0% | . |
| 0672 | Nursing Technology | NSG-250 |  | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | . | . |
| 0672 | Nursing Technology | NSG-251 |  | 100.0% | . | 100.0% | 100.0% | . | . | . |
| 0672 | Nursing Technology | NSG-252 |  | . | 100.0% | 100.0% | 100.0% | . | . | . |
| 0672 | Nursing Technology | NSG-258 |  | 87.3% | 89.4% | 93.8% | 95.8% | 97.5% | 100.0% | . |
| 0672 | Nursing Technology | NSG-260 |  | 100.0% | . | . | . | . | . | . |
| 0672 | Nursing Technology | NSG-293 |  | 66.7% | 46.7% | 59.1% | 48.8% | 81.3% | . | . |
| 0672 | Nursing Technology | NSG-294 |  | 66.7% | 70.0% | 60.0% | 63.2% | 81.3% | . | . |
| 0672 | Nursing Technology | NSG-295 |  | 73.3% | 66.7% | 30.8% | 65.0% | 50.0% | . | . |
| 0672 | Nursing Technology | NSG-296 |  | 66.7% | 71.4% | 66.7% | 58.8% | 100.0% | . | . |
| 0672 | Nursing Technology | NSG-297 |  | 99.8% | 99.6% | 99.3% | 99.7% | 99.3% | 100.0% | . |